OF INDIAL SAFETY TRAFFIC CRASH	LOCAL REPORT NUMBER*						
PHOTOS TAKEN OH-2 OH-3	2,0,2,0,-,0,0,0,0,1,2,5,						
SECONDARY CRASH	REPORTING AGENCY NAME*	NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR				
PRIVATE PROPERTY	City of Kent Police	5 <sub>1</sub> 7 <sub>1</sub> 0 <sub>1</sub> 3 <sub>1</sub>	1 - SOLVED	0 2	0 2 98 - ANIMAL		
I-CITY	Y, VILLAGE, TOWNSHIP*			CRASH DATE / T	IME*	CRASH SEVERITY	
6 / 1 2-VILLAGE Kent			-	01022020	1535 5	1-FATĄL - 2-SERIOUS INJURY	
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE	TMAL DEGREES	SUSPECTED	
4 3-EAST	GRANT		$S \setminus T$	41.164	3 - MINOR INJURY SUSPECTED		
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH	REFERENCE ROAD NAME (ROAD, M	ILEPOST, HOUSE #)	ROADTYPE	LONGITUDE DE	4 - INJURY POSSIBLE		
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	MANTUA		ST	-81,357	0,5,6	5 - PROPERTY DAMAGE ONLY	
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE		711-11	NTERSECTION REL	ATED	
1 2-MILE POST 2-SOUTH US			RD - ROAD SQ - SQUARE	X WITHIN INTE	RSECTION OR ON APP	PROACH	
3- HOUSE # 3- EAST	- STATE ROUTE BL -	BOULEVARD MP-MILEPOST ST	- STREET	WITHIN INTE	RCHANGE AREA	NUMBER OF APPROACHES	
DISTANCE DISTANCE CR	- NUMBERED COUNTY ROUTE I		- TERRACE		ROADWAY		
	MUMPEDED TOWNSHIP		A - WAY	ROADWAY DIV	IDED		
3 - YARDS		HEIGHTS PL - PLACE		KONDWAY BIY	IDED		
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVER		ER OF CRASH COLLISION/IMPAC OLLISION 4 - REAR-TO-REAR	т	DIRECTION OF TRAVE	L ME	EDIAN TYPE	
	VALLEY ACCESS BETW	EEN 5- BACKING		1 - NORTH	1	DED FLUSH MEDIAN	
3 - IN MEDIAN 11 - RAILWAY G 4 - ON ROADSIDE 12 - SHARED U	VEHIC	CLES IN 6-ANGLE SPORT 7-SIDESWIPE, SAME	DIRECTION	3- EAST	2 - DIVIDED FLUSH MEDIAN		
5 - ON GORE TRAILS	2 - REAR-	,		4 - WEST	3 - DIVIO	DED, DEPRESSED MEDIAN	
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE 7 - ON RAMP 14 - TOLL BOOT	J-11CAU-	ON 9-OTHER/UNKNOW	/N			DED, RAISED MEDIAN TYPE)	
8-OFF RAMP 99-OTHER/UI	NKNOWN				9 - OTHE	R/UNKNOWN	
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WO	RK ZONE	CONTOUR	CONDITIONS	SURFACE	
INODIVEDO DOCCENT	- LANE CLOSURE - LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST V WARNING SIGN	VORK ZONE	1	1 1	2	
	WORK ON SHOULDER	2 - ADVANCE WARNIN	G AREA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE	
	OR MEDIAN - INTERMITTENT OR MOVING WORK	3 - TRANSITION AREA 4 - ACTIVITY AREA		2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP, BITUMINOUS,	
ACTIVE SCHOOL ZONE 5.	-OTHER	5 - TERMINATION ARE	A	3 - CURVE LEVEL	3 - SNOW	ASPHALT	
LIGHT CONDITION	WEATHER	R		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT	3 - BRICK/BLOCK	
1 - DAYLIGHT  1 2 - DAWN/DUSK		6 - SNOW			OIL, GRAVEL	STONE	
3 - DARK - LIGHTED ROADWAY		7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT,	SNOW		6 - WATER (STANDI) MOVING)	ואזט-כ	
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN	9 - FREEZING RAIN OR FREEZI 99 - OTHER / UNKNOWN			7 - SLUSH	9 - OTHER/UNKNOWN	
9 - OTHER / UNKNOWN	J-SEEL, HAIL	77 - OTHER / DINKNOWN			9 - OTHER/UNKNOW	'N	
NARRATIVE						Indicate the north	
UNIT ONE WAS STOPPED (	ON W CDANTET A	Т				direction with an "N" on the	
		1			-	compass diagram.	
THE STOP SIGN BEFORE	N. MANTUA ST.						
UNIT TWO WAS TRAVELI	NG EASTBOUND						
BEHIND UNIT ONE. UNIT	TWO FAILED TO			1 1	1 1 1		
STOP WITH AN ASSURED	CLEAR DISTANCE	teritori dillo della collegita del la la collegia della collegia d	W. era.	/- i	1 ! /		
		THE RESIDENCE AND A SECURITION OF THE RE	W GREAT ST	$\Pi'$	" / (	N :	
AND STRUCK UNIT ONE,	CAUSING PROPER	TY	<b>在新</b> 国		7	T	
DAMAGE ONLY.			-		/		
				5	1		
			ä	S W Case	1 1	TO SCALE	
	PAT AND THE STANDARD CONTRACTOR CONTRACTOR AND THE STANDARD THE STANDARD CONTRACTOR CONT			- 1	' /		
	in ip displykylynyspi dat syn sky, dan till allelikhinkolog ykdanyspi op assat synaste om annat is skuly gyg						
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED	DATE / TIME	REPORT TAKEN BY	
0.1,0.2,2.0,2.0,/.1.5,3.5,0.1.0	0,2,2,0,2,0,/,1,5,3,8,	$0_11_10_22_10_20_1/1$	5,44	0,1,0,2,2,0,2	0,/,1,6,0,7,	POLICE AGENCY	
TOTAL TIME OTHER TOT ROADWAY CLOSED INVESTIGATION TIME MINU	AL OFFICER'S NAME*			ICER'S NAME*		MOTORIST	
MING	McNulty, Sama			er, Jennifer	NUMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AM EXISTING REPORT SENT TO (DPS)	



2,0,2,0,-,0,0,0,0,0,1,2,5 OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER) OWNER PHONE: INC., DE AREA CODE | SAME AS DRIVER) DAMAGE 1 | EON HOLDINGS DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP ( SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 6300 E 37TH ST N ,BEL AIRE ,KS 67220 J 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCOUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR **VEHICLE MAKE** KS 359GMT 3.N1,AB7,AP0,KL6,1,5,0,9,3 2,0,1,9 Nissan INSURANCE COMPANY INSURANCE POLICY # INSURANCE VERIFIED COLOR VEHICLE MODEL **ESURANCE** PAOH7383976 **GRY** SENTRA TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #DCCUPANTS MATERIAL RELEASED INTERLOCK CLASS # PLACARD ID # 1 - <10K LBS DEVICE HIT/SKIP UNIT 2 - 10,001 - 26K LBS 0.2 PLACARD 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNGWM03H E 19-BUS (16+ PASSENGERS) 0 1 3 - SPORT LTILITY VEHICLE 24 - WHEELCHAIR (ANY TYPE) 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 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/SKIP (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 4 - HIGH AUTOMATION 0 2 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 1 - NONE 5 - BUS - CHARTER/TOUR 11 - FIRE 16.FARM 21 - MAIL CARRIER 0,1, 2-TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWLYG 99-OT-ER 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 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 12 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER B - POLE 12 - CONCRETE MIXER 0,1 / NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTOTRANSPORTER CARGO 2 - BUS 6 - CARGO VAN/ENCLOSED BOX 4 - LOGGING 10-FLAT BED 14-GARBAGE/REFUSE BODY 4 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DIMP 99.OTHER/UNKNOWN 0 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING B - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR DEFECTIVE DEFECTS 3 - TAIL LAMPS ACCIDENT 6 - TIRE BLOWOUT - 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 -TOP [ 13 ] 7 - SHOULDER / ROADSIDE 10-DRIVEWAY ACCESS □-ALL AREAS [15] NOH-MOTORIST 2 - INTERSECTION - UNMARKED CROSSWALK 99 - OTHER / UNKNOWN B - SIDEWALK 1) - SHARED USE PATHS OR LOCATION AT IMPACT CROSSWALK 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 OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 4 3-STRIKING 1 1 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE 19-STANDING 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 0 , 6 , 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM JOGGING, PLAYING 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 99 - UNKNOWN 11 - SLOWING OR STOPPED 13 - TOP 16 - WORKING DISABLED VEHICLE & STRUCK IN TRAFFIC 6 - MAKING LEFT TURN 9 - OTHER / UNKNOWN 17 - PHISHING VEHICLE 99 - OTHER / HNKNOWN 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 - FAIL URE TO YIELD 8-FOLLOWING TOO CLOSE / ACDA 13-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14-STOPPED OR PARKED EQUIPMENT 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING BOOR INTO 0,1 2 TWO WAY 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY. ROADWAY 4 - RAN STOP SIGN 10 -IMPROPER PASSING 19 - LCAD S-IFTING/FALLING/ CONTRIBUTING SHARAFE SPEED CIRCUMSTANCES SHARAFE SPEED 3 F ASHER 15 - SWERVING TO AVOID 6 - NO CONTROL SPILLING 99 - OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING 5 - IMPROPER TURN 12 - IMPROPER BACKING # OF THROUGH LANES RAIL GRADE CROSSING ON ROAD 1 - NOTHNYOLVED SEQUENCE OF EVENTS - INVOLVED-ACTIVE CROSSING 2 **EVENTS** 2 0 1 - OVERTURN/ROLLOVER 3 - INVOLVED-PASSIVE CROSSING 11 - CROSS CENTERLINE -CRESS OF TREST ON OF 6 - EQUIPMENT FAILURE 15-RAILWAY VE-ICLE 22 - WORK ZONE WAINTENANCE DU PALENT 2 - FIRE EXPLOSION T - SEPARATION OF UNITS IV-ATIVAL - TATV TRAVEL 23 - STRUCK BY FALLING, UNIT / NON-MOTORIST DIRECTION 13-AHIMAL - DEFR 3 . IMMERSION 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO CR. NORTH 5 - VORTHEAST 19-AHIMAL - OTHER 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13 - OTHER NON-COLLISION A - NORTHWEST 2 - SOUTH 20 - MOTOR VEHICLE IN 5 - CARGO/ EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT 4 ro 3 7 - SOUTHEAST LOSS OR SHIFT 3 - EAST 24 OTHER MOVABLE CBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRA'L END 37 - TRAFFIC SIGN POST 50 - WORK ZONE MAINTENANCE 43-CURB / CRASH CUSHION 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST EQUIPMENT 44 - DITCH UNIT SPEED DETECTED SPEED 26-BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 51 - WALL 27 - BRIDGE PIER OR ABUTMENT 34-MEDIAN GUARDRAIL - STATED / ESTIMATED SPEED SUPPORT 52-BUILDING 46 - FENCE , 0 , 0 , 0 40 - UTILITY POLE → 2 - CALCULATED / EDR 53 - THINNEL 47 - MAIL BOX 2R - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54-OTHER FIXED OBJECT 48-TREE 3. HADETERMINED POSTED SPEED 29 - BRIDGE RAIL BARRIER OR SUPPORT 99 OTHER / UNKNOWN 49 - FIRE HYDRANT 36 - MEDIAN OTHER BARRIER 30-GUARDRAIL FACE 42 - CULVERT 1 MOST HARMFUL EVENT J FIRST HARMFUL EVENT

**LOCAL REPORT NUMBER** 

## 2,0,2,0,-,0,0,0,0,1,2,5

UNIT#	OWNER NAME: LAST, FIRS	T, MIDDLE (X SAME AS DRIVER)		OWNED PHONE: has	CE AREA CODE (X SAME AS DRIVER)	DAMAGE					
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (MISMEAS DRIVER)  DAMAGE SCALE  1 - NONE  3 - FUNCTIONAL DAMAGE										
	ARDEN CT, R		1 - NONE 3 - FUNCTIONAL DAMAGE  1 - NONE 4 - DISABLING DAMAGE								
	IAL CARRIER: NAME, ADDR		9 - UNKNOWN								
		C+90 3 139A**			PHONE: INCLUDE AREA CODE	DAMAGED AREA(S)					
	LICENSE PLATE #	VEHICLE	IDENTIFICATION #	VEHICLE YEA	AR 2 VEHICLE MAKE		ATE ALL THAT APPLY				
OH	DFL4051	1.J.4.GW4.8	S <sub>1</sub> 4 <sub>1</sub> 4 <sub>1</sub> C1 <sub>1</sub> 0 <sub>1</sub> 0 <sub>1</sub> 8	3,8,5, 2,0,0,	4. Jeep	12	12				
INSURAN VERIFIE	INSURANCE COMP		SURANCE POLICY #	COLOR	VEHICLE MODEL	11 12	11 12				
VERIFIE		SIVE 92	3336965	GRN	CHEROKE	E <sub>0</sub> 11 1 2	10 11 1 2				
Перимен	TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY: COMPANY	NAME	10 2	10 2 00 2				
COMMER	RCIAL GOVERNMENT	RESPONSE L	ICLE WEIGHT GVWR/GCWR	HAZARDO	US MATERIAL	9 9 3	3 9 9 3				
INTERL	OCK CHITCHIP WAY	#UCCUPANTS	1 - ≤10K LBS.		LASS # PLACARD ID #	7 7 5 7	$\sqrt{7}$				
DEVICE	EO HIT/SKIP UNIT	0,1	2 - 10,001 - 26K LBS. 3 - >26K LBS.	PLACARD		6	6				
	1 - PASSENGER CAR			3-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6	11 7 6 5				
				19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10 /	12 2				
	3 - SPORT LTILITY VEHICLE	9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK	23-OTHER VEHICLE	25 - CTHER NON-MOTORIST	<u> </u>	10 2				
UNIT TYPE		BICYCLE		21 - HEAVY EQUIPMENT	26 - BICYCLE	9	9 3 3				
	5 - CARGO VAN 6 - VAN (9-15 SEATS)	11 411 752241819519615	16-FARM EQUIPMENT 17-MOTORHOME	22 - AHIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - UNKNOWN OR HIT/SKIP		; · · · · · · · 7.				
ы		(ATV/UTV)	17-18-01-OKTIONE		11-044-10M-04-11/3KP	8	( ) · ( ) · ( )				
	# OF TRAILING UNITS					11 12	5 11 12				
	WAS VEHICLE OPERATING IN AU			- CONDITIONAL AUTOMATION	9 - UYKNOWN	10 12	10 12				
2	1-YES 2-NO 9-OTHER/UNK			4 - HIGH AUTOMATION		10 11 1	10 11 1				
	T-1E9 S-NO 3-DIMERIUNKI	MODE LEVEL	Z - FARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3	3 9 9 3 3				
	1 · NONE	5 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	8 4 7	8 4 -				
	2 · TAXI	7 - BUS - INTERCITY		17 - MOWING	99-OTHER/UNKNOWN	B 7 5	4 8 7 5 4				
SPECIAL	3 - ELECTRONIC RIDE SHARING			13 - SNOW REMOVAL		7	7 5				
	4 - SCHOOLTRANSPORT 5 - BUS - TRANSIT/COMMUTER	9 - BUS - OTHER 10 - AMBIH ANCE	14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPMENT	19-TOWING		•	6				
-		90.740	120,1410	AN I III III III	Ta	ł	12 12 12				
0,1	1 - NO CARGO BODY TYPE /NCT APPLICABLE	3 - VEHICLE TOWING ANOTHER  VOTOR VEHICLE	PHARRIE	8 - POLE 9 - Cargotank	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER	12					
CARGO	2 - BUS	4 - LOGGING	A DADCOMANIENO, OCCUPANO	10-FLAT BED	14 - GARBAGE/REFUSE	a Ma					
TYPE			7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99-OTHER/UNKNOWN	,600,	3 9 T 3 9 🔞 3				
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTORTROUBLE	99 - OTHER / UNKNOWN	0					
VEHICLE	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT	10 - DISABLED FROM PRIOR	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	6 6 6				
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			_				
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAW/CROSSING ISLAND	12-FIRST RESPONDER	- NO DAMAGE	[0] - UNDERCARRIAGE [14]				
	CROSSWALK	4 - MIDBLOCK - MARKED		10 - DRIVEWAY ACCESS	AT INCIDENT SCENE	TOP [ 13 ]	- ALL AREAS [ 15 ]				
LOCATION		CROSSWALK  5 - TRAVEL LANE - 0 - EL LOCATION		11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN		UT NOT AT BOSING ( ) ( )				
AT IMPACT		0.00		TRAILS		□ - UN	IIT NOT AT SCENE [ 16 ]				
	1 - NON-CONTACT	1 - STRAIGHT AHEAD		13 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE	INITI	AL POINT OF CONTACT				
1 3 1	2-NON-COLLISION 3-STRIKING	2 - BACKING 1 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19-STANDING	0 - NO DAMA					
ACTION	4 - STRUCK PRE-CRASI	4 - OVERTAKING/PASSING		15 - WALKING, RUNNING,	20 - OTHER NON-MOTORIST		RTO UNIT 15 - VEHICLE NOT AT SCENE				
	5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11-SLOWING OR STOPPED	JOGGING, PLAYING	21 - STANDING OUTSIDE	DIAGI 13-TOP	99 - UNKNOWN				
	& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	IN CHANGE IN	16 - WORKING 17 - PUSHING VEHICLE	DISABLED VEHICLE 99-OTHER / UNKNOWA	13-10					
			12-011,1616233				TRAFFIC				
	1 - NONE 2 - FAIL URE TO YIELD	7 - LEFT OF CENTER  B - FOLLOWING TOO CLOSE ! ACD!	DARKER BOCITION	17 - VISION COSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL				
0,8	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED	13 - OPERATING DEFECTIVE EQUIPMENT ·	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - CNE-WAY	1 ROUNDABOUT 4 - STOP SIGN				
	4 CAN STOD STOR	10-IMPROPER PASSING	ILLEGALLY	19 - LOAD SHIFTING/FALLING/	ROADWAY	2 2 TWO-WAY	4 2 - S G VAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL				
CONTREBUTING	G 5 - UNSAFE SPEED	11 -DROVE OFT ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING 21 EVPROPER CROSSING	99 OTHER IMPROPERACTION		3 - FLASHER 8 - NO CONTROL				
SEQUENCE	6-IMPROPERTURN	12 - IMPROPER BADICING	2 00	E3 11 10 Ex 5/10531 13		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING				
M SEQUENCE	E OF EVENTS					1 1	1 - NGT INVOLVED 1 - 1 - NYOUVED-ACTIVE DROSS NS				
, 2 0	1 - OVERTURN ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS 61-6R6SS CENTERLINE =	16-RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE	2	3 NVOLVED-PASS VE CROSSING				
1 4 0	2 - FIREIEKP (05/04	TIL SEPARATION OF UNITS	09 905 TE 0 REST 01/0F	17 - ANYAL — PARY	DOU PHONT						
	3 - WMERSION	B - PAN OFF ROAD RIGHT	TO LOCADIMINE DESIGNATION	13-AHMAL - DEER	23 - STRUCK BY FALLING, SHIFTING CARGO CR	UNIT/N	ON-MOTORIST DIRECTION				
2	4 - JACKKNIFE	9 - RAN GFF ROAD LEFT	13 - OTHER NON-COLLISION	19-AYIMAL — OTHER 20-MOTOR VEHICLE IN	ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST				
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14-PEDESTRIAN	TRANSPORT	3Y A MOTOR VEHICLE 24-OTHER MOVABLE CBJECT	FROM 4 TO					
3		8811767-	15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE			4 - WEST 8 - SOUTHWEST				
	25 - IMPACT ATTENUATOR	COLLISIO 31-GUARDRAIL END	N WITH FIXED OBJECT 37-TRAFFIC SIGN POST	T - STRUCK 43-Cdr8	5C - WCRK ZONE MAINTENANCE		9 - OTHER / UNKNOWN				
41	CRASH CUSHION	32 - PORTABLE BARRIER	38-OVERHEAD SIGN POST	44 - DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED				
	26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER	39-LIGHT / LUMINARIES SUPPORT	45 - EMBANKMENT	51 - WALL 52 - BUILDING		- STATED / ESTIMATED SPEED				
5	27 - BRIDGE PIER OR ABUTMEN	34 - MEDIAN GUARDRAIL BARRIER	40-UTILITY POLE	46 - FENCE 47 - MAILBOX	53-TUNNEL	0 0 5	2 - CALCULATED / EDR				
,,	28-BRIDGE PARAPET 35-MEDIAN CONCRETE 41-OTHER POST, POLE				54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED				
6	29-BRIDGE RAIL 30-GUARDRAIL FACE	BARRIER 36-MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99 OTHER / UNKNOWN						
1	FIRST HARMFUL EVE	1	ARMEIN EVENT			2 5					

CHIED DEPARTMENT MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER								
						2,0,2,0,-,0,0,0,0,1,2,5,								
UNIT#	UNIT # NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GENDER							
0,1	GREEN, HILDA, M						0,1,0,7,1,9,7,9,4,0, ,, F							
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
<b>182 D</b>	ALE DR	103 ,Kent ,OH 44	4240									*		
INJURIES		EMS AGENCY (NAME)		INJUREDT	AKEN TO:	MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITIO	N AIR RAG US	AGE EJECTIO	N TRAPPED	
ADDRESS 182 D INJURIES	TAKEN BY		10H11	ŀ				USED 0 4	MC HE	MPLIANTI	1	1	1	
	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAR	GED	LOCAL	OFFENSE DESC	RIPTION	<u> </u>	CITATIO	N NUMBER		
OL STATE	RT880	095				ĺ	CODE							
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	UPTO3 DRIN	/ER	ALCO	HOL / DRUG SUSPE	CTED	CONDITION		OHOL TEST	D D	RUG TEST(	S)	
	SELECT UP TO 2		DIST BY	RACTED	AL	COHOL MAR	RUUANA		STATUS	YPE VALUE	STATUS	YPE RESU	11 4	
4	السالي			1	OT	HER DRUG		1	1	1	_1			
UNIT #	NAME: LAST, S	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER	
0,2	ENGLA	AND, ALISA, D							0,6	0 9 1 9	5 9	60	F	
ADDRESS	STREET, CITY, ST	ATE, ZIP							CONTACT	PHONE - INCL E AREA	ODE			
127 G	ARDEN	CT, Ravenna, Ol	H 4426	66									140	
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED I	TAKEN 10:	MEDICAL FACILITY	HAME, CITY)	SAFETY EQUIPMENT	DOT-CO	SEATING POSITIO	N AIR BAG US	AGE EJECTIO	N TRAPPED	
S 5	BY							USED 0 4	MC HE	LMET 0 1	1	1	1	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAR	GED	LOCAL	OFFENSE DESC	FFENSE DESCRIPTION			CITATION NUMBER		
ADDRESS 127 G INJURIES 5 OL STATE O, H	RR281.	344		333.0	03		CODE	Maximum Sp	aximum Speed Limits			65266		
OL CLASS	ENDORSEMENT	RESTRICTION SELECT			ALCO	HOL / DRUG SUSPE		CONDITION		OHOL TEST		RUG TEST(		
	341211-07-112		BA	TRACTED	AL AL	COHOL   MAH	ANAULIS				STATUS	YPE RESU	LT select de to 4	
4				1	01	HER DRUG		1		1	_1			
UNIT#	NAME: LAST, I	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER	
	1								L.	<del> </del>	11	1	إيـــال	
ADDRESS	S: STREET, CITY, ST	ATE, ZIP							CONTACT PHONE - INCLUDE AREA					
010	***	— <u>que mo equa e</u>							ـــا					
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED 1	TAKEN 10:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	SEATING POSITIO	N AIR BAG US	AGE EJECTIO	N TRAPPED	
ž	BY							ــــــــــــــــــــــــــــــــــــــ	MC HE	LMET			استاد	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAR	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATIO	N NUMBER		
0				L.,										
OL CLASS	SELE UP	RESTRICTION 55		VER TRACTED		COHOL MAR		CONDITION	STATUS T	YPE VALUE		RUG TEST(		
			BY			HER DRUG	ANAUGS							
INJ	URIES	SEATING POSITION	A	IR BAG		OL CLASS	sille	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TEST ST	ATUS	
1 - FATAL		1 - FRONT - LEFT SIDE	1 - NOT DEP	LOYED		1 - CLASS A		1 - ALCOHOL INTER	Contract of the Contract of th	1 - NOT DISTRACTED	Contract of the same	NONE GIVEN		
	D SERIOUS INJURY D MINOR INJURY	(MOTORCYCLE DRIVER)  2 - FRONT - MIDDLE	2 - DEPLOYI 3 - DEPLOYI			2 CLASS B 3 - CLASS C		2 - CDL INTRASTATI		2 - MANUALLY OPERATIN ELECTRONIC COMMUN	INCATION	TESTREFUSED		
4-POSSIBLE I		3 - FRONT - RIGHT SIDE		ED BOTH FRO	NT/SIDE	4 - REGULAR CLASS		3 - CORRECTIVE LE	NPEP	DEVICE (TEXTING, TY)		TEST GIVEN CO SAMPLE / UNU		
5 - NO APPARE	NT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	LICÁBLE		(OH10 = D)		5 - EXCEPT CLASS	A BUS	3 -TALKING ON HANDS-F	KEE		ESULTS KNOWN	
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 DEPLOY	MENT UNKNO	NWC	5 M'G MOPED ONLY 6 NO VALID OL		6 - EXCEPT CLASS / & CLASS B BUS	1	4 TALKING ON HAND-HE		TESTGIVEN R	ESULTS	
1 - NOT TRANS		6 SECOND - RIGHT SIDE			100			7 - EXCEPT TRACTO	R-TRAILER	COMMUNICATION DEV	ICE	LCOHOLTI	EST TYPE	
/TREATED	AT SUENE	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR	1 NOTEJE	CTED	100	OL ENDORSEM H HAZMAT	WENT	8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 OTHER ACTIVITY WITH ELECTR NIC DEVICE	I AN	NONE		
3 - POLICE		8 THIRD - MIDDLE		LY EJECTED		M. MOTOR / LE		9 - LEARNER S PER	MIT	6 PASSENGER	2	BLOOD		
O OTHER UN	IKNO '/N	9-THIRD - RIGHT SID 1 - SLEEPEP SE TION		EJECTED		EN		RESTRICTI NS	LI T N	TH I TION	4	BREATH		
SAFETY	EQUIPMENT	-9- TRI	4 -4	LICAB _		N-T'K		1 : I'm 70 EM		1 1 2 6 17 5 10%	JU LIDE 1 5	OTH .		
1 - NONE USED		11- PASSENGER IN E ENGLOSED JARJOAREA	Print of the Committee of	RAPPED		PE'HE W	R / E	1 - LIMITED - THE		THE √		DRUG TES	TTYPE	
3-LAP BELTO	DELITIONLY USED	NON TRAILING UNIT BUS, PICK UP WITH CAP)	VOTTRA 2 - EXTRICA			5 H	70.1" 50	MECH NIT I (SPECIAL BRAK	ES HAND		T			
Annual Continues and	& LAP BELT USED	12 - PASSENGER IN UNENCLOSED	MECHAN	IICAL MEANS	S	T DOUBLE & TRIPLE X-TANKER HAZMAT	IKAILER	CONTROLS, OR O		CONDITION  1 - APPARENTLY NORMAL		DIM		
5 - CHILD REST	TRAINT SYSTÉM – FACING	CARGO AREA 13-TRAILING UNIT	3 - FREED B	IY Chanical M	EANS		8. 2	14 - MILITARY VEHIC	CLES ONLY	2 PHYSICAL IMPAIRMEN		RIN The		
6 - CHILD RES	TRAINT SYSTEM-	14 - RIDING ON VEHICLE EXTERIOR				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (		RUG TEST I	RESULTAS	
7 - BOOSTER S		(NON-TRAILING UNIT)  15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO		4 - ILLNESS	THE RESERVE OF THE PARTY OF THE	AMPHETAMINI		
8 - HELMET U		99 - OTHER / UNKNOWN				U OTHER/UNKNOWN		17 - PROSTHETIC AN	)	5 - FELL ASLEEP FAINTEI	2	BARBITURATE	S	
9-PROTECTIV	/E PADS USED NEES, ETC.)							18 - OTHER		FATIGUED ETC - UNDER HE INFLUENCE	E ,	BENZODIAZEP	A STATE OF THE PARTY	
WWW. Harton Street, or College								1-1-1-1		OF MEDICATIONS ' DRI	103	CANNABINOID	是自己	
10 - REFLECTIV	/E CLOTHING									/ALCOHOL	Table 1.	COCAINE	The state of the state of	
10 - REFLECTIV 11 - LIGHTING - / BICYCLE	- PEDESTRIAN									- OTHER UNKNOWN	6	OPIATES / OPIC	2010	

OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER						
~		JOOI AIII 7	****	O ADDLINDON	,,		2 0 2 0	0.0	0.0.0	1.2	.5.	
UNIT#							DATE OF BIRTH AGE GENDER					
_01_	GREEN, MASON, SHALLING						0 4 2 5 1 9 9 9 9 2 0 M					
ADDRESS:	SS: STREET, CITY, STATE, ZIP							- INCLUDE AREA CO				
182 D	ALE D	R 103, Kent,	OH 44240									
INJURIES	INJURED TAKEN	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
5	BY					0 4	MC HELMET	0,3	1 1	1 ,	1 ,	
UNIT#	NAME: LAS	T FIRST MIDDLF					DAT	E OF BIRTH		AGE	GENDER	
								1 1 1			ļ	
ADDRESS:	STREET, CITY,	STATE 71P					CONTACT PHONE	- INCLUDE AREA CO	DE		<u>                                     </u>	
ADDRESS								1 1				
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	BY					USED	MC HELMET		ļ. ,			
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH	<u> </u>	AGE	GENDER	
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ADDRESS	: STRFET, CLTY,	STATE, ZIP	-				CONTACT PHONE	- INCLUDE AREA CO				
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	POT 5	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
l 1	BY					USED	DOT-COMPLIANT					
UNIT#	NAME: LAS	T, FIRST, MIDDLE			-		DA1	E OF BIRTH		AGE	GENDER	
								L OI DIKIII		AGE	GENDER	
ADDRESS	: STREET, CITY	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
								THOUGH AIREN CO	DE.			
ADDRESS Injuries		EMS AGENCY (NAME)		INJURED TAKEN 10: MEDICAL FAC	CILITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	TAKEN BY					USED	DOT-COMPLIANT			-	I KAI T CD	
	INJ	JRIES	SAFET	EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE		
1 - FAT	AL		1 - NONE US		1 - FRON	IT - LEFT SIDE		1 - NOT DE	Partie Harris		74117/737	
2 - SUS	PECTED SE	RIOUS INJURY		OCCUPANT		ORCYCLE DRIV	ER)	2 - DEPLO	YED FRONT			
3 - SUS	PECTED M	INOR INJURY		R BELT ONLY USED		IT – MIDDLE IT – RIGHT SIDI		3 - DEPLOYED SIDE				
4 - POS	SIBLE INJU	JRY	3 - LAP BEL			ND-LEFT SID	4 - DEPLOYED BOTH					
5 - NO A	APPARENT	INJURY		ER & LAP BELT USED ESTRAINT SYSTEM –		ORCYCLE PASS						
200	INJURED	TAKEN BY		D FACING	5 - SECOND - MIDDLE 5 - NOT APPLICABLE 6 - SECOND - RIGHT SIDE 9 - DEPLOYMENT UNK				*********			
	TRANSPOR			RESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE			Latings to the street of					
Beginstern	EATED AT S	CENE	REAR FA	O TUIDD MIDDLE			CAR)	CARL TAX	EJECTI	0 N		
2 - EMS 3 - POL			7 - BOOSTER 8 - HELMET		D - RIGHT SIDE		1 - NOT EJ					
1	ER / UNKN	OWN		IVE PADS USED		PERSECTION			LLY EJECTI			
		NDER		KNEES, ETC.)		ENGER IN OTH O AREA (NON-TI			LY EJECTED			
F-FEM	(CT (2)=U \ = 2	NUER	10 - REFLECT	IVE CLOTHING	BUS, I	PICK UP WITH CA.	P)	4 - NOT AP	PLICABLE			
M-MAL			11 - LIGHTIN / BICYCL	G - PEDESTRIAN		12 - PASSENGER IN UNENCLOSED CARGO AREA			TRAPPED			
U - OTHE	ER/UNKNO	WN	99 - OTHER /			LING UNIT		1 - NOTTRAPPED 2 EXTRICATED BY MECHAN			CAL	
			77 OTHER	OTTAL		NG ON VEHICLE TRAILING UNIT)	EXTERIOR	MEANS		CUTANI	CAL	
						MOTORIST			BY NON ME	CHANIC	AL	
					99 OTHE	ER UNKNOWN		MEANS	5			
NAME	1						DAT	E OF BIRTH		AGE	GENDER	
	eipri - un	A CIAIL HAD						1	است			
ADDRES	S: SIR(     '   '	STAFE ZIP					CONTACT PHONE	- INCLUDE AREA OF	DE			
MAME	AST, FIRST, MID	Di C							<del></del>			
	sai, rik51, MiD	DT. T					DA	TE OF BIRTH		AGE	GENDER	
ADDRESS: STREET, CITY, STATE, 71P					CONTACT PHONE							
					CONTACT PHONE - INCLUDE AREA CODE							
NAME: L	AST, FIRST, MID	DLE	-		- No 1946		DAT	TE OF BIRTH	1	AGE	GENDER	
							JA.	- OF DIKIM		AUE	GEMDEK	
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE					
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