OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*								
PHOTOS TAKEN OH-2 OH-3	2,0,2,1,-,0,0,0,1,8,4,6,7,								
SECONDARY CRASH X OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR					
PRIVATE PROPERTY	City of Kent Police	. 0	6 7 0 3	1 - SOLVED 2 - UNSOLVED	0 2 0	2 98 - ANIMAL 99 - UNKNOWN			
1-CHY	TY, VILLAGE, TOWNSHIP*			CRASH DATE /T	IME* CRA	SH SEVERITY			
6 7 1 2-VILLAGE Kent				111101512101211	/.1.5.2.1.1. 4	- FATAL - SERIOUS INJURY			
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DEC		SUSPECTED			
E - EAST W - WEST	LOWELL		D R	4110156	9 1 6	- MINOR INJURY SUSPECTED			
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH	REFERENCE ROAD NAME (ROAD,	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES 4	INJURY POSSIBLE			
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	216				2 8 2	PROPERTY DAMAGE			
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE			INTERSECTION RELATED				
1-INTERSECTION N-NORTH IS			D - ROAD	WITHIN INTER	RSECTION OR ON APPROA	сн			
3-HUUSE # L- E-EAST	TESTINE GO KOOTE								
DISTANCE DISTANCE	- NUMBERED COUNTY ROUTE CR		E - TERRACE L - TRAIL						
1-MILES T	MHMREDED TOWARDID		VA - WAY	ROADWAY DIVIDED					
1 5 3 3-YARDS		- HEIGHTS PL - PLACE		ROADWAY DIV	IDED	·			
LOCATION OF FIRST HARMFUL EVE 1 - ON ROADWAY 9 - CROSSOVI		NER OF CRASH COLLISION/IMPA COLLISION 4 - REAR-TO-REAR	CT	DIRECTION OF TRAVEL	MEDIA	TYPE			
1 2-ON SHOULDER 10-DRIVEWA	Y/ALLEY ACCESS BETY	WEEN 5-BACKING		N - NORTH , , S - SOUTH	1 - DIVIDED F	LUSH MEDIAN			
3-IN WEDIAN II-RAILWAY	GRADE CROSSING WEHI	ICLES IN 6-ANGLE NSPORT 7-SIDESWIPE, SAME	DIDECTION	E - EAST	2 - DIVIDED F	LUSH MEDIAN			
5 - ON GORE TRAILS	2 - REAF			W-WEST		EPRESSED MEDIAN			
6-OUTSIDE TRAFFIC WAY 13-BIKE LAN 7-ON RAMP 14-TOLL BOO) - NEAL	D-ON 9 - OTHER / UNKNOV	VN		4 - DIVIDED, R	AISED MEDIAN			
8-OFF RAMP 99-OTHER/I	NKNOWN				9 - OTHER/UN	KNOWN			
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WO	RK ZONE	CONTOUR	CONDITIONS	SURFACE			
WORKERS BRESENT	- LANE CLOSURE - LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST V WARNING SIGN	BEFORE THE 1ST WORK ZONE 2 1						
	- WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNIN		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE			
4	- INTERMITTENT OR MOVING WORK	3 - TRANSITION AREA 4 - ACTIVITY AREA			2-WET	2 - BLACKTOP, BITUMINOUS,			
X ACTIVE SCHOOL ZONE 5	- OTHER	5 - TERMINATION ARE	EΑ		3 - SNOW 4 - ICE	ASPHALT			
LIGHT CONDITION	WEATHE	R			5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,			
1 - DAYLIGHT 1 2 - DAWN/DUSK	1-CLEAR 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS			OIL, GRAVEL 6 - WATER (STANDING,	STONE STONE			
3 - DARK - LIGHTED ROADWAY	3-FOG, SMOG, SMOKE	8 - BLOWING SAND, SOIL, DIRT,			5 - DIRT 9 - OTHER/UNKNOWN				
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTIN	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FREEZI 99 - OTHER / UNKNOWN	NG DRIZZLE		7 - SLUSH	7-OTHEROUNKNOWN			
9 - OTHER / UNKNOWN					9 - OTHER/UNKNOWN				
NARRATIVE Indicate the nor									
Unit #1 was making a right h					A	an "N" on the compass diagram.			
on to Lowell Dr. Unit #2 was	making a left hand t	turn			 				
from N Prospect to Lowell D	r. Both units were					/,			
attempting to get in front of	the other on Lowell.		_	Davey					
Unit #2 did not yield to the r	ight of way vehicle								
while making a left turn cau	sing an accident.		ETG	COLD S	White				
			4	nun 3	Not	To Scale			
					, ,,,,,				
					N Prospect				
				1 11					
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED D	ATC /TIMP	PARTY AVEN S			
					120	PORT TAKEN BY POLICE AGENCY			
TOTAL TIME OTHER TOT			5 3 8 1	8 1 1 1 1 0 5 2 0 2 1 1 / 1 6 1 5 1 5 MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINU			elson, Jo			SUPPLEMENT			
	OFFICER'S BAD	IGE NUMBER*	CHECKED BY	OFFICER'S BADGE NI	UMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS)			
	4 2 4 7		2 3	2					

LP STATE | LICENSE PLATE #

OH

INSURANCE VERIFIED

INTERLOCK

UNIT TYPE 4 - PICK UP

DEVICE

HWC5488

1 - PASSENGER CAR

0 1 3 - SPORT UTILITY VEHICLE

5 - CARGO VAN

1 - NONE

FUNCTION 4 - SCHOOL TRANSPORT

2 - BUS

VEHICLE 2 - HEAD LAMPS

DEFECTS 3 - TAIL LAMPS

0 1 2 - TAXI

0 1 CARGO

RODY

TYPE

LOCATION

5

 $\lfloor 0 \mid 1 \rfloor$

6 - VAN (9-15 SEATS)

00 # OFTRAILING UNITS

INSURANCE COMPANY

PROGRESSIVE

COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

X HIT/SKIP UNIT

WAS VEHICLE OPERATING IN AUTONOMOUS

MODE WHEN CRASH OCCURRED?

___ 1-YES 2-NO 9-OTKER/UNKNOWN

SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE

1 - NO CARGO BODY TYPE

/ NOT APPLICABLE

1 - TURN SIGNALS

CROSSWALK

NON-MOTORIST 2-INTERSECTION - UNMARKED

CROSSWALK

1 - NON-CONTACT

2 - NON-COLLISION

& STRUCK

9 - OTHER / UNKNOWN

2 - FAILURE TO YIELD

3 - RAN RED LIGHT

4 - RAN STOP SIGN

6 - IMPROPER TURN

2 - FIRE/EXPLOSION

5 - CARGO / EQUIPMENT

25 - IMPACT ATTENUATOR

/ CRASH CUSHION

27 - BRIDGE PIER OR ABUTMENT

26 - BRIDGE OVERHEAD

STRUCTURE

28 - BRIDGE PARAPET

30 - GUARDRAIL FACE

_ 29 - BRIDGE RAIL

LOSS OR SHIFT

3 - IMMERSION

3 - STRIKING

1 - NONE

CONTRIBUTING 5 - UNSAFE SPEED

SEQUENCE OF EVENTS

1 2 0 1 - OVERTURN/ROLLOVER

ACTION 4- STRUCK

1 - INTERSECTION - MARKED

5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE

2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED

TYPE OF USE

0 | 1 | MORGAN, ROBERT, H OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 918 CARLISLE CT 104, Kent, OH 44240 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)

#OCCUPANTS

7 - MOTORCYCLE 2-WHEELED

10 - MOPED OR MOTORIZED

11 - ALL TERRAIN VEHICLE

6 - BUS - CHARTER/TOUR

7 - BUS - INTERCITY

MOTOR VEHICLE

9 - BUS - OTHER

4 - LOGGING

4 - BRAKES

5 - STEERING

6 - TIRE BLOWOUT

CROSSWALK

1 - STRAIGHT AHEAD

6 - MAKING LEFT TURN

7-LEFT OF CENTER

B-FOLLOWING TOO CLOSE / ACDA

9-IMPROPER LANE CHANGE

10-IMPROPER PASSING

12 - IMPROPER BACKING

6 - EQUIPMENT FAILURE

7 - SEPARATION OF UNITS

B - RAN OFF ROAD RIGHT

9 - RAN OFF ROAD LEFT

10 - CROSS MEDIAN

31 - GUARDRAIL END

32 - PORTABLE BARRIER

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

BARRIER

BARRIER

33 - MEDIAN CARLE BARRIER

36 - MEDIAN OTHER BARRIER

11 - DROVE OFF ROAD

2 - BACKING

PRE-CRASH 4 - OVERTAKING/PASSING

0 15 3 - CHANGING LANES

5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN

3 - INTERSECTION - OTHER

4 - MIDBLOCK - MARKED

5 - TRAVEL LANE - OTHER LOCATION

0

AUTONOMOUS

MODE LEVEL

9 - AUTOCYCLE

BICYCLE

(ATV / UTV)

VEHICLE IDENTIFICATION #

 $\begin{array}{l} [1_{1}G_{1}1_{1}Z_{1}E_{1}5_{1}S_{1}T_{1}4_{1}G_{1}F_{1}2_{1}9_{1}6_{1}8_{1}9_{1}5 \\ \end{array}$

945551467

INSURANCE POLICY #

US DOT #

VEHICLE WEIGHT GVWR/GCWR

3 - >26K LBS

12-GOLF CART

13-SNOWMOBILE

15-SEMI-TRACTOR

17 - MOTORHOME

0 - NO AUTOMATION

11-FIRE

12 - MILITARY

13 - POLICE

3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER

14 - PUBLIC UTILITY

CHASSIS

6 - CARGO VAN/ENCLOSED BOX

7 - GRAIN/CHIPS/GRAVEL

7 - WORN OR SLICKTIRES

8 - TRAILER EQUIPMENT

7 - SHOULDER / ROADSIDE

DEFECTIVE

6 - BICYCLE LANE

7 - MAKING U-TURN

8 - ENTERING TRAFFIC LANE

9 - LEAVING TRAFFIC LANE

11 - SLOWING OR STOPPED

13 - IMPROPER START FROM A

PARKED POSITION

14-STOPPED OR PARKED

15 - SWERVING TO AVOID

NON-COLLISION

OPPOSITE DIRECTION OF

COLLISION WITH FIXED OBJECT - STRUCK

11 - CROSS CENTERLINE -

12 - DOWNHILL RUNAWAY

13-OTHER NON-COLLISION

ILLEGALLY

16 - WRONG WAY

TRAVEL

14 - PEDESTRIAN

15-PEDALCYCLE

SUPPORT

40 - UTILITY POLE

41 - OTHER POST, POLE

OR SUPPORT

42 - CULVERT

1 MOST HARMFUL EVENT

37 - TRAFFIC SIGN POST

38-DVERHEAD SIGN POST

39-LIGHT/LUMINARIES

INTRAFFIC

12 - DRIVERLESS

B - SIDEWALK

10-PARKED

1 - DRIVER ASSISTANCE

2 - PARTIAL AUTOMATION

16-FARM EQUIPMENT

14-SINGLE UNIT TRUCK

1 - ≤10K LBS 2 - 10,001 - 26K LBS

OWNER PHONE: INCLIDE AREA CODE (TISAN

COMMERCIAL CARRIER PHONE: INCLUDE AR

HAZARDOUS MATERIAL

VEHICLE YEAR

2 0 1 6

COLOR

TOWED BY: COMPANY NAME

GRY

MATERIAL RELEASED

PLAÇARD

18 - LIMO (LIVERY VEHICLE)

19-BUS (16+ PASSENGERS)

20-OTHER VEHICLE

21 - HEAVY EQUIPMENT

4 - HIGH AUTOMATION

5 - FULL AUTOMATION

16-FARM

17 - MOWING

19-TOWING

8 - POLE

9 - CARGOTANK

9 - MOTOR TROUBLE

ACCIDENT

10 - DISABLED FROM PRIOR

9 - MEDIAN/CROSSING ISLAND

10 - DRIVEWAY ACCESS

TRAILS

16 - WORKING

11 - SHARED USE PATHS OR

13 - NEGOTIATING A CURVE

14 - ENTERING OR CROSSING

SPECIFIED LOCATION

15 - WALKING, RUNNING,

17 - PUSHING VEHICLE

17 - VISION OBSTRUCTION

EQUIPMENT

SPILLING

18-OPERATING DEFECTIVE

19-LOAD SHIFTING/FALLING/

20 - IMPROPER CROSSING

16-RAILWAY VEHICLE

17 - ANIMAL - FARM

18-ANIMAL - DEER

19-ANIMAL - OTHER

20 - MOTOR VEHICLE IN

21 - PARKED MOTOR VEHICLE

TRANSPORT

45 - EMBANKMENT

49-FIRE HYDRANT

43 - CURB

44 - DITCH

46 - FENCE

48-TREE

47 - MAILBOX

JOGGING, PLAYING

10-FLAT BED

11 - DUMP

15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL

18 - SNOW REMOVAL

22 - ANIMAL WITH RIDER OF

ANIMAL-DRAWN VEHICLE

3 - CONDITIONAL AUTOMATION 9 - UNKNOWN

	2 1 0 2 1 1 - 1 0 1 0 1 1 8 4 6 7								
ACTION THE TOUR (LACT OF THE WALL BINE BY	DAMAGE DAMAGE SCALE								
	2 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE								
ER PHONE: INCLUDE AREA CODE	9 - UNKNOWN								
EAR VEHICLE MAKE	DAMAGED AREA(S) INDICATE ALL THAT APPLY								
6 Chevrolet	12	12							
VEHICLE MODEL	0	11 12							
MALIBU	10 11 1	2 10 11 1 2							
NY NAME	9 9 3	3 9 9 1							
OUS MATERIAL	_	- '- 							
CLASS # PLACARD ID #	8 7 5	4 B 7 5 4							
		12 7 6 5							
23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)		12							
25 - OTHER NON-MOTORIST	10 11 1 2								
26-BICYCLE	9	9 8 3 3							
27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	7	7 5 7							
. Summer of the party		6							
N. O. Marketon	11 12 1	6 11 12 1							
N 9 - UNKNOWN	10 11 1	2 10 11 1 2							
	9 10 2 -	10 2							
21 - MAIL CARRIER	8 3 4	3 9 9 3							
99-OTHER/UNKNOWN	B 7 5	4 8 7 5 4							
	7 6 5	7 6 5							
	6	6							
12 - CONCRETE MIXER	ĺ	12 12 12							
13-AUTOTRANSPORTER	12								
14-GARBAGE/REFUSE	98 493	9 3 9 3 9 3							
99-OTHER / UNKNOWN									
99 - OTHER / UNKNOWN	6	0							
	_	6 6							
12-FIRST RESPONDER	☐ - NO DAMAGI	E[0] - UNDERCARRIAGE [14]							
AT INCIDENT SCENE	-TOP [13] -ALL AREAS [15]								
99 - OTHER / UNKNOWN	UNIT NOT AT SCENE [16]								
18-APPROACHING									
OR LEAVING VEHICLE	INITIAL POINT OF CONTACT								
19-STANDING 20-OTHER NON-MOTORIST	0 - NO DAMAGE 14 - UNDERCARRIAGE 1 1 1 1-12 - REFERTO UNIT 15 - VEHICLE NOT AT SCENE								
21 - STANDING OUTSIDE	DIAGRAM 99 - UNKNOWN								
DISABLED VEHICLE 99 - OTHER / UNKNOWN	13 - TOP								
		TRAFFIC							
21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW	TRAFFIC CONTROL							
23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN							
ROADWAY 99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL							
TO CONTRACT OF THE PARTY OF THE	# of THROUGH LANES	RAIL GRADE CROSSING							
	ON ROAD	1 - NOT INVOLVED							
22 - WORK ZONE MAINTENANCE	_2_	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING							
EQU!PMENT									
23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT/N	ION-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST							
ANYTHING SET IN MOTION By a motor vehicle	_	2 - SOUTH 6 - NORTHWEST							
24 - OTHER MOVABLE OBJECT	FROM 5 TO 6 3-EAST 7-SOUTHEAST								
		4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN							
50 - WORK ZONE MAINTENANCE EQUIPMENT	HNIT COEED								
51 - WALL	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED							
52-BUILDING 53-Tunnel	0 0 2	2 - CALCULATED / EDR							
54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED							
99 - OTHER / UNKNOWN									
	2 5	1 1							

$2 \cdot 0 \cdot 2 \cdot 1 \cdot - \cdot 0 \cdot 0 \cdot 0 \cdot 1 \cdot 8 \cdot 4 \cdot 6 \cdot 7$ UNIT # OWNER NAME: LAST, FIRST, MIDDLE (X)SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (X) SAME AS DRIVER) DAMAGE 0 | 2 | GREEN, APRIL, MICHELLE DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER! 1 - NONE 3 - FUNCTIONAL DAMAGE 1307 LAWRENCE CT 202 ,Kent ,OH 44240 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) LP STATE LICENSE PLATE # INDICATE ALL THAT APPLY **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE O H JNU7063 $K_1\,N_1\,A_1\,D_1\,C_1\,1_1\,2_1\,5_1\,0_1\,4_1\,6_1\,2_1\,9_1\,4_1\,6_1\,2_1\,2$ 2 0 0 4 Kia Motors Corr INSURANCE COMPANY INSURANCE VERIFIED INSURANCE POLICY # COLOR VEHICLE MODEL **GEICO** 6030754672 BLU RIO TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE HAZARDOUS MATERIAL **VEHICLE WEIGHT GVWR/GCWR** #OCCUPANTS INTERLOCK MATERIAL CLASS # PLACARD ID # 1 - ≤10K LBS 2 - 10,001 - 26K LBS DEVICE HIT/SKIP UNIT 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-SNOWMOBILE 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 BICYCLE 5 - CARGO VAN 16-FARM EQUIPMENT 22 - ANIMAL WITH RIDER OF 27 - TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) ANIMAL-DRAWN VEHICLE 17-MOTORHOME 99 - UNKNOWN OR HIT/SKIE (ATV / UTV) 00 # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 0 4 - HIGH AUTOMATION 2 J 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION AUTONOMOUS 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 0 1 2 - TAXL 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 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER B - POLE 12 - CONCRETE MIXER O 1 CARGO / NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13 - AUTO TRANSPORTER 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY 7 - GRAIN/CHIPS/GRAVEL TYPE 11_BUMP 99-OTHER/UNKNOWN 00 1 - TURN SIGNALS 4 - RRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT ACCIDENT -NO DAMAGE [0] - UNDERCARRIAGE [14] 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER CROSSWALK 4 - MIDBLOCK - MARKED AT INCIDENT SCENE 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 LOCATION 5 - TRAVEL LANE - OTHER LOCATION AT IMPACT TRAILS - UNIT NOT AT SCENE [16] 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT 2 - NON-COLLISION 2 - BACKING B - ENTERING TRAFFIC LANE OR LEAVING VEHICLE 5 3-STRIKING 14 - ENTERING OR CROSSING 0 6 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE SPECIFIED LOCATION 19-STANDING 9 - LEAVING TRAFFIC LANE PRE-CRASH 4 - OVERTAKING/PASSING 1-12 - REFERTO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED 0 | 3 | DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 21 - STANDING OUTSIDE 99 - UNKNOWN 11-SLOWING OR STOPPED 13 - TOP 16-WORKING DISABLED VEHICLE & STRUCK IN TRAFFIC 4 - MAKING LEFT TURN 17 - PUSHING VEHICLE 9 - OTHER / UNKNOWN 99 - 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 PARKED POSITION 2 - FAILURE TO YIELD 18-OPERATING DEFECTIVE 8-FOLLOWING TOO CLOSE / ACDA 22 - NOT DISCERNIBLE 1 - ON E-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14-STOPPED OR PARKED 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE EQUIPMENT 23 - OPENING DOOR INTO L0 | 2 | ILLEGALLY 2 - TW0-WAY 2 - SIGNAL 5 - YIELD SIGN 4 - RAN STOP SIGN 19-LOAD SHIFTING/FALLING/ 10-IMPROPER PASSING ROADWAY CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID SPILLING 3 - FLASHER 6 - NO CONTROL 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING 6 - IMPROPER TURN 12 - IMPROPER BACKING # OF THROUGH LANES RAIL GRADE CROSSING ON ROAD SEQUENCE OF EVENTS 1 - NOT INVOLVED 2 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -3 - INVOLVED-PASSIVE CROSSING 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF 7 - SEPARATION OF UNITS 17 - AHIMAL - FARM EQUIPMENT TRAVEL 23-STRUCK BY FALLING UNIT / NON-MOTORIST DIRECTION 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 4 - JACKKNIFF 9 - RAN OFF ROAD LEFT 19-ANIMAL - OTHER 1 - NORTH 5 - NORTHEAST 13-OTHER NON-COLLISION ANYTHING SET IN MOTION 5 - CARGO / EQUIPMENT 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - NORTHWEST 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN LOSS OR SHIFT TRANSPORT FROM 2 TO 6 3 - EAST 7 - SOUTHEAST 24-OTHER MOVABLE OBJECT 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - 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 EQUIPMENT 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 51 - WALL 39-LIGHT/LUMINARIES 45 - EMBANKMENT 27 - BRIDGE PIER OR ABUTMENT 34 - MEDIAN GUARDRAIL STRUCTURE 1 - STATED / ESTIMATED SPEED SUPPORT 46-FENCE 52 - BUILDING 1010101 40 - UTILITY POLE 53-TUNNEL ☐ 2 - CALCULATED / EDR 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OBJECT 48 - TREE 3 - UNDETERMINED 29 - BRIDGE RAIL BARRIER OR SUPPORT POSTED SPEED 99-OTHER/UNKNOWN 49 - FIRE HYDRANT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT

J FIRST HARMFUL EVENT

MOST HARMFUL EVENT

, 2 , 5 ,

CHIO DEPARTMENT MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER								
						2,0	2.0.2.10.0.0.1.8.4.6.7							
UNIT							DATE OF BIRTH AGE GENDER							
O ADDRE	1 DOW, SAMANTHA, RAE SS: STREET, CITY, STATE, ZIP							0 6 / 0 2 / 1 9 9 0 3 1 F						
918	CARLISI	ARLISLE CT 104, Kent, OH 44240							L - 1	T PHONE - INCLUDE AREA	CODE			
INJURI	ES INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDTA	KEN TO	: MEDICAL FACILITY	(NAME, CITY	SAFETY EQUIPMENT	DOT-0	T-COMPLIANT SEATING POSITION AIR (R BAG USAGE EJECTION TRAPPED		
OL STA		LICENSE NUMBER	DISTRACTED			COHOL / DRUG SUSPECTED		OFFENSE DES	ALCOHOL TEST		CITATIO	CITATION NUMBER DRUG TEST(S) STATUS TYPE RESULT SELECTUPTO4		
OL CLA	= + -	T RESTRICTION SELEC						CONDITION						
_ 4			BY	1	=	LCOHOL MA THER DRUG	RIJUANA	1	1	1	1	1	C. SEELOT BY TO 4	
UNIT		, FIRST, MIDDLE							DATE OF BIRTH AGE G				GENDER	
0,		N, APRIL, MICI	HELLE					0 4 / 2, 4, / 1 9 7, 1, 5, 0 F						
	SS: STREET, CITY, S 7 LAWRE	tate,zip ENCE CT 202 ,Ke	nt ,OH	44240)				CONTAC	T PHONE - INCLUDE AREA	CODE			
INJURI	ES INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TA	KEN TO	N TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN USED			D01-0	SEATING POSITION TO THE PROPERTY OF THE PROPER	ON AIR BAG U	AIR BAG USAGE EJECTION TRAPPED		
	TE OPERATOR	LICENSE NUMBER		OFFENSE	CHAI	RGED	LOCAL	OFFENSE DESC			CITATIO	CITATION NUMBER		
OL STA	H,	_		331.1	7		CODE	Right of	Way when Tu 23090					
OL CLA	SELECT UP TO 2	T RESTRICTION SELEC		VER TRACTED				CONDITION	STATUS	COHOL TEST TYPE VALUE		DRUG TEST(S) TATUS TYPE RESULT SELECT UPTD4		
4				1	_	THER DRUG			1	1	1	1		
UNIT	# NAME: LAST,	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER	
ADDRE	SS: STREET, CITY, S	TATE 710					_							
ADDRE	33. 31 KEE1, CII 1, 3	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
E INJURI	ES INJURED TAKEN	EMS AGENCY (NAME)		INJURED TA	KEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED					
	BY	LICENSE NUMBER		OFFENSE	CHAR	RGED LOCAL CODE		OFFENSE DESC	MC HELMET		CITATIO	ON NUMBER	ـــــا	
OL STA								1			CITATIO	OTTATION NOMBER		
≥ OL CLA	SELECT UP TO 2	RESTRICTION SELECT		RACTED	ALCOHOL / DRUG SUSPECTED ALCOHOL MARLUANA		CONDITION	ALCOHOL TEST STATUS TYPE VALUE S			DRUG TEST(S) TATUS TYPE RESULT SECECIOPION			
L	_			i	01	THER DRUG						ے ا		
1 - FATAL	JURIES	SEATING POSITION 1-FRONT-LEFT SIDE	A 1 - NOT DEP	IR BAG		OL CLASS		OL RESTRIC		DRIVER DISTRAC		TEST ST		
2 - SUSPEC	TED SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYE					2 - CDL INTRASTAT	ONLY 2 - MANUALLY OPERATING		IGAN 2	1 - NONE GIVEN AN 2 - TEST REFUSED		
3 - SUSPEC 4 - POSSIBL	TEO MINOR INJURY .e injury	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE			(OHIO = D)		3 - CORRECTIVE LE 4 - FARM WAIVER	DEVICE (TEXTING, TYP			CATION 2 TEST CIVEN CONTAMINATED		
1/45/1007±05	RENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)						5 - EXCEPT CLASS	A BUS	DIALING) 3 - TALKING ON HANDS-FI	REE 4	-TEST GIVEN, RE		
INJUR	ED TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOYA	MENT UNKNOW!	N	5 - MAC MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS	١	COMMUNICATION DEV 4 - TALKING ON HAND-HE	ICE 5.	-TEST GIVEN, RE UNKNOWN	SULTS	
1 - NOT TRA	NSPORTED D AT SCENE	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	EJ	ECTION		OL ENDORSEM	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		COMMUNICATION DEV 5 - OTHER ACTIVITY WITH	ICE A	ALCOHOL TE	ST TYPE	
2 - EMS		(MOTORCYCLE SIDE CAR) 8-THIRD – MIDDLE	1 - NOT EJEC			H - HAZMAT		RESTRICTIONS		ELECTRONIC DEVICE	1	- NONE		
RESIDENCE POR	O THIRD DICHT SING			P-PARTIALLY EJECTED M - MOTORCYCLE 3-Totally ejected P - Passenger				9 - LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER 7 - OTHER DISTRACTION		2 - BL00D 3 - URINE		
SAFETY	10. SI FEDED SECTION		4 - NOT APPI	LICABLE N-TANKER			10 - LIMITED TO DAYLIGHT ONLY		ILY INSIDE THE VEHICLE		4 - BREATH			
DA STREET HOLD	1 - NONE USED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA			RAPPED R-THREE WHEEL MOTORCYCLE 12.			12 - LIMITED - OTHER TH		THE VEHICLE	THE VEHICLE		TVDE		
No Orbitalis	DIGW HE WITH CAR		1 - NOTTRAF 2 - EXTRICA	APPED S - SCHOOL BUS			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND		IAND		DRUG TEST TYPE 1-NONE			
Hard-Cattlement	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARGO AREA		MECHANI 3 - FREED BY	MECHANICAL MEANS 1 - DOUBLE & TRIPLE TRAILERS			CONTROLS, OR OTHER ADAPTIVE DEVICES)		CONDITION 1 - APPARENTLY NORMAL		2 - BLOOD 3 - URINE			
FORWAR	5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 13 - TRAILING UNIT			N-MECHANICAL MEANS GENDER			14 - MILITARY VEHICLE		S ONLY 2 - PHYSICAL IMPAIRMENT		4 - OTHER			
6 - CHILD RESTRAINT SYSTEM - 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			F-FEMALE				AIR BRAKES		3 - EMOTIONAL (E.G., DEPRI ANGRY, DISTURGED)	DI	RUG TEST RI	According to the second		
Could Wilder	7 - BOOSTER SEAT 15 - NON-MOTORIST 8 - HEL MET USED 99 - OTHER / UNKNOWN					M - MALE U - OTHER / UNKNOWN		17 DOGGETHERE		5 - FELL ASLEEP, FAINTED,		1 - AMPHETAMINES 2 - BARBITURATES		
9 - PROTECT	TIVE PADS USED							18-OTHER		FATIGUED, ETC. 6- UNDER THE INFLUENCE		BENZODIAZEPIN	IES	
2007/01/12/07/19	KNEES, ETC.) FIVE CLOTHING							b.		OF MEDICATIONS / DRUGS		4 - CANNABINOIDS 5 - COCAINE		
11 - LIGHTIN	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY								9- OTHER / UNKNOWN	THER / UNKNOWN 6-OPIATES / OPIOIDS		DS		
99 - OTHER / UNKNOWN												-OTHER -NEGATIVE RESU	LTS	

OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER							
							2.0.2.10.0.0.1.8.4.6.7							
	UNIT#		ST, FIRST, MIDDLE	DATE OF BIRTH AGE GENDER										
Ž	DO ADDRESS	STEV	VART, JARMI	0 5 / 2 4 / 1 9 8 2 3 9 M										
OCCUPANT			ENCE CT 202	.Kent OH	1 44240			CONTACT PHONE - INCLUDE AREA CODE						
00		INJURED	EMS Agency (NAME)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	INJURED TAKEN TO: MEDICAL FACE	SAFETY EQUIPMENT	L	SEATING POSITION	ATD DAC HEAD	E FIFETION	TDARRER			
	4	TAKEN 9			Other		USED 0 1	DOT-COMPLIANT	0 4	1 1	E EJECTION	I 1		
ľ	UNIT#	NAME: LAS	ST, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
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OCCUPAN	AUURESS:	STREET, CITY	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA C	DDE		V 1		
00	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME CITY)	SAFETY EQUIPMENT		CEATING BACKYON	1 1 1				
		TAKEN BY	37 800				USED	DOT-COMPLIANT MC HELMET	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION MC HELMET					
ľ	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
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CCUPAN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFET		SAFETY EQUIPMENT		SEATING POSITION	AID BAO HOCO	F FIRATION			
		TAKEN BY	2 22			arr times, arry	USED	DOT-COMPLIANT MC HELMET	SEATING PUSITION	AIK BAG USAG	F FTECITON	TRAPPED		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH	<u> </u>	AGE	GENDER		
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CCUPAN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
<u> </u>	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME CITY)	SAFETY EQUIPMENT		SEATING POSITION	LATE BAD HOAD	E E E E E			
		TAKEN BY	117 04-009			arr commey arres	USED	DOT-COMPLIANT MC HELMET	SCALING POSITION	AIR BAG USAG	E EJECTION	IRAPPED		
			RIES	SAFETY	EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	JSAGE			
ı	1 - FATA		DIQUE INCLIDA	1 - NONE US VEHICLE	ED - OCCUPANT		T - LEFT SIDE ORCYCLE DRIV	1 - NOT DEPLOYED						
ı	2-303FECTED 3EKIOUS INJURY			ER BELT ONLY USED 2 - FRONT - MIDDLE				2 - DEPLOYED FRONT						
1	4 - POSS				T ONLY USED 3 - FRONT - RIGHT SIE 4 - SECOND - LEFT SIE				3 - DEPLOYED SIDE 4 - DEPLOYED BOTH					
J- NO AFFARENT INJURT				R & LAP BELT USED STRAINT SYSTEM –	(MOT	DRCYCLE PASS		FRONT	FRONT/SIDE					
			TAKEN BY	FORWARD			ND – MIDDLE ND – RIGHT SID	5 - NOT APPLICABLE 9 - DEPLOYMENT UNK			CHICHAN			
			6 - CHILD RE	STRAINT SYSTEM –	CAR)	7- DEFEO								
2 - EMS 7 - BOOSTER			SEAT		1 - NOT EJ	EJECTI	UN							
3 - POLICE 8 - HELMET				9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 2 - PARTIALLY EJEC					ED					
(ELBOW.				(VE PADS USED (NEES, ETC.)	11 - PASSI	ASSENGER IN OTHER ENCLOSED 3 - TOTALLY EJECTED ARGO AREA (NON-TRAILING UNIT, 4 NOT A PRI SCAPLE								
GENDER 10- REFLECTIVE F-FEMALE						BUS, P	ICK-UP WITH CAP)	4 - NOT AP	4 - NOT APPLICABLE				
M - MALE 11 - LIGHTING				11 - LIGHTING / BICYCLE	- PEDESTRIAN ONLY		ENGER IN UNEI O AREA	IN UNENCLOSED TRAPPED 1 - NOTTRAPPED						
U - OTHER / UNKNOWN 99 - OTHER /				13 - TRAIL	2 EVIDICATED DV MICHANIO				AL					
				(NON-TRAILING UNIT) MEANS					/ NO.					
							5 - NON-MOTORIST 9 - OTHER / UNKNOWN			3 - FREED BY NON-MECHANICAL MEANS				
25	NAME: LAST	, FIRST, MIDDL	E					DATI	OF BIRTH		AGE	GENDER		
<u> </u>	ADDRESS: S	STREET, CITY, S	STATE, ZIP	 				CONTACT PHONE	1					
3			170					OUNTAUT PHONE	• INCLUDE AREA COE	E	, ,			
20	NAME: LAST	, FIRST, MIDDL	E					DATE	OF BIRTH		AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP					CONTROL OF SURVIVE									
\$						CONTACT PHONE - INCLUDE AREA CODE								
NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER							
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ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE	NTACT PHONE - INCLUDE AREA CODE							
														