OF PURISHED SAFETING TRAFFIC CRASH	REPORT *DENOTES MAI	NDATORY FIELD FOR SUPPLEME	ENT REPORT	L	OCAL REPORT NUM	BER*
PHOTOS TAKEN OH-2 OH-3	LOCAL INFORMATION			2,0,2,0,	. , 0 , 0 , 0 , 0	4,2,2,0,
SECONDARY CRASH			NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
PRIVATE PROPERT	City of Kent Police	.0 ,0	6,7,0,3	1 - SOLVED	0,2	0 1 98-ANIMAL
1-CITY	CITY, VILLAGE, TOWNSHIP*			CRASH DATE /T		CRASH SEVERITY 1 - FATAL
6 7 1 2-VILLAGE Kent				0,2,2,3,2,0,2,0,		2 - SERIOUS INJURY
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORT 2-SOUTI S R 59 3-EAST 4-WEST	H		ROAD TYPE	LATITUDE DEC		SUSPECTED 3 - MINOR INJURY
1 11201			ST	4,1,1,5,3,		SUSPECTED
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORT 2-SOUT	H	MILEPOST, HOUSE #)	ROADTYPE	LONGITUDE DE		4 - INJURY POSSIBLE
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORT 2-SOUTI 3-EAST 4-WEST	LINCOLN		ST	-81,35,1	1,7,7	5 - PROPERTY DAMAGE ONLY
REFERENCE POINT DIRECTION 1 - INTERSECTION 1 - INTERSECTION	ROUTE TYPE R - INTERSTATE ROUTE(TP) AL -	ROAD TYPE - ALLEY HW- HIGHWAY R	D - ROAD		NTERSECTION REL	ATED
1 2-MILE POST 2-SOUTH			Q - SQUARE	WITHIN INTER	RSECTION OR ON APP	PROACH
3- HOUSE # 3- EAST 4-WEST 5	R-STATE ROUTE		T - STREET	WITHIN INTER	RCHANGE AREA	NUMBER OF APPROACHES
FROM REFERENCE UNIT OF MEASURE	CR - NUMBERED COUNTY ROUTE CT -		E - TERRACE L - TRAIL		ROADWAY	
2-FEET	ROUTE		/A - WAY	ROADWAY DIV	IDED	
3-YARDS		- HEIGHTS PL - PLACE				
LOCATION OF FIRST HARMFUL EV 1 - ON ROADWAY 9 - CROSSON	/ER 1-NOT	NER of CRASH COLLISION/IMPA COLLISION 4 - REAR-TO-REAR	eT	DIRECTION OF TRAVEL 1 - NORTH		EDIAN TYPE DED FLUSH MEDIAN
	V CDADE COCCESS 2 TWO	WEEN 5-BACKING		2-SOUTH	(<4 F	EET)
4 - ON ROADSIDE 12-SHARED	VEHI	ICLES IN 6-ANGLE NSPORT 7-SIDESWIPE, SAME	DIRECTION	3- EAST 4- WEST		ED FLUSH MEDIAN EET)
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LA	2 - REAR ANE 3 - HEAD			4-10-51		ED, DEPRESSED MEDIAN DED, RAISED MEDIAN
7 - ON RAMP 14-TOLL BO	ОТН	SON 3-UINER/UNKNOV	V 14		(ANY	TYPE)
8-OFF RAMP 99-OTHER		1				R/UNKNOWN
WORK ZONE RELATED	WORK ZONE TYPE 1 - LANE CLOSURE	LOCATION OF CRASH IN WO		CONTOUR	CONDITIONS	SURFACE
WORKERS PRESENT	2 - LANE SHIFT/CROSSOVER	WARNING SIGN 2 - ADVANCE WARNIN		1	2	2
LAW ENFORCEMENT PRESENT	3-WORK ON SHOULDER OR MEDIAN	3-TRANSITION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,
ACTIVE SCHOOL ZONE	4 - INTERMITTENT OR MOVING WORK 5 - OTHER	4 - ACTIVITY AREA 5 - TERMINATION ARI	FΛ	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT
Panis .			-M	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK
LIGHT CONDITION 1 - DAYLIGHT	1-CLEAR	ER 6-SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT OIL, GRAVEL	4 - SLAG, GRAVEL, STONE
1 2-DAWN/DUSK	.0.4 2-CLOUDY	7 - SEVERE CROSSWINDS			6 - WATER (STANDI	
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOKE 4 - RAIN	8 - BLOWING SAND, SOIL, DIRT, 9 - FREEZING RAIN OR FREEZI			MOVING) 7 - SLUSH	9 - OTHER/UNKNOW!
5 - DARK – UNKNOWN ROADWAY LIGHTI 9 - OTHER / UNKNOWN	NG 5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOW	N
NARRATIVE					1	Indicate the north direction with
Unit 2 was stopped in the lef	t through lane on E M	Lain				an "N" on the compass diagram.
St. at the intersection of Li	acoln St. Unit 1 was					
stopped behind Unit 2. Uni	t 1 stated her foot			1		
slipped off the brake and sl				T DRUCK		
* *	and the second s			3	~	DT YO BEALE
Unit 1 was cited for ACDA					-11012	-Unit 1
				9	3 /2	MC COUNTY
						T (SR 59)
	10.0000					
				15 N GCM II		
				Mile		
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED		REPORT TAKEN BY
$0_{1}2_{1}2_{1}6_{1}2_{1}0_{1}2_{1}0_{1}/1_{1}6_{1}1_{1}0_{1}2_{1}$		0,2,2,6,2,0,2,0,/,1	6,1,3	0,2,2,6,2,0,2	0/1632	POLICE AGENCY
	otal officer's name* Nutes Schmitt, Benjar			TCER'S NAME*		MOTORIST
MI		MIN E.		er, Jennifer	инмосож	SUPPLEMENT (CORRECTION OF ADDITION TO AN EXISTING REPORT SENT TO COPY
0 0 0 0 3 0 0	5,1,2,3,3	1 I	2 2		NJOBEK .	the man same reputation and a side of the

	UNIT #	OWNER NAME: LAST, FIR WARREN, SI	USAN, MARI	E.	OWNER PHONE-IN	IT HOF AREA CODE (IX SAME AS DRIVER)		DAMAGE			
四日日	OWNER A	DDRESS: STREET, CITY, STATE	E, ZIP (X SAME AS DRIVER)		4000		1 - NONE 3 - FUNCTIONAL DAMAGE				
<u>∧</u>		CIAL CARRIER: NAME, ADD		ga Falls ,OH 4		ER PHONE: INCLUDE AREA CODE	2-MINOR DAN	MAGE 4 - DISABLING DAMAGE - UNKNOWN			
						THE		MAGED AREA(S)			
		DVZ1507	3. I. No. I. 5. F	F.9.2, HR6, 5, 6,	9,2,4, VEHICLE VI			TE ALL THAT APPLY			
	INSURA VERIFI	NCE INSURANCE COMP		NSURANCE POLICY #	COLOR	7 Lincoln-Co		11 12			
	VERIFI		K	3693699	RED	MKZ	10 11 1 2	10 11 1 2			
	COMME	TYPE OF USE RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPA	NY NAME	9 9 3	9 9 3			
	INTER	LOCK		HICLE WEIGHT GVWR/GCWR 1 - <10K LBS.		OUS MATERIAL CLASS # PLACARD ID #		├ • • • • • •			
	EQUIP	E HIT/SKIP UNI	0,1	2 - 10,001 - 26K LBS 3 - >26K LBS	MATERIAL RELEASED PLACARD	and it is a second to it	1	7 7 5			
		1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12-GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 5	12 7 6 5			
	0.1	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE	13-SNOWMOBILE 14-SINGLE UNIT TRUCK	19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - Other Non-Motorist	10	11 1 2			
	UNIT TYPE	4 - PICK UP	10-MOPED OR MOTORIZED BICYCLE	15-SEMI-TRACTOR	21 - HEAVY EQUIPMENT	26 - BICYCLE	9	9 3 3			
		5 - CARGO VAN 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.	8 4 7			
CLE		# OF TRAILING UNITS	(ATV/UTV)				12 7	B 5 12			
VEHICL		WAS VEHICLE OPERATING IN AU		0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	11 12	6 11 12 1			
>	2	MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK		1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	4 - HIGH AUTOMATION 5 - Full Automation		10 11 1 2	10 11 1 2			
			MODE LEVEL				9 9 3 3	9 9 3			
	, 0, 1,	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11-FIRE 12-MILITARY	16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	74	7 5 7			
	SPECIAL	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	8 - BUS - SHUTTLE 9 - BUS - OTHER	13 - POLICE	18-SNOW REMOVAL		5	7 5			
	FUNCTION	5 - BUS - TRANSIT/COMMUTER		14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPMENT	19-TOWING 20-SAFETY SERVICE PATROL		6	6			
	, 0, 1,	1 - NO CARGO BODY TYPE	3 - VEHICLE TOWING ANOTHER		8 - POLE	12 - CONCRETE MIXER	12	12 12 12			
		/NOT APPLICABLE 2 - BUS	MOTOR VEHICLE 4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	9 - CARGOTANK 10-FLAT BED	13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE	a Ma				
	TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP	99 - OTHER / UNKNOWN	, 3 ,	3 9 1 3 9 3			
	بــــــا	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6				
	VEHICLE DEFECTS	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	B - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT			6 6 6			
			3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER	- NO DAMAGE [D]UNDERCARRIAGE [14]			
	NOH-MOTORIST	CROSSWALK 2 - INTERSECTION – UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER / ROADSIDE 8 - SIDEWALK	10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	AT INCIDENT SCENE 99 - OTHER / UNKNOWN	TOP [13]	-ALL AREAS [15]			
	AT IMPACT	CROSSWALK	5 -TRAVEL LANE - OTHER LOCATION		TRAILS	77-010EIT BITAING III	□- инл	NOT AT SCENE [16]			
		1 - NON-CONTACT 2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE	INITIAL	POINT OF CONTACT			
	3	3-STRIKING	3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19-STANDING	0 - NO DAMAGE	E 14 - UNDERCARRIAGE			
	ACTION	4 - STRUCK PRE-GRASH	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	10-PARKED 11-SLOWING OR STOPPED	15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST 21 - Standing Outside	1-12 - REFERT	O UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN			
		& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	INTRAFFIC	16 - WORKING 17 - PUSHING VEHICLE	DISABLED VEHICLE 99 - OTHER / UNKNOWN	13 - TOP				
			7-LEFT OF CENTER		17 - VISION OBSTRUCTION			TRAFFIC			
		2 - FAILURE TO YIELD	B - FOLLOWING TOO CLOSE / ACDA	BARKER BRETTING	18 - OPERATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN			
	0 0	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9-IMPROPER LANE CHANGE 10-IMPROPER PASSING	HLLEGALLY	EQUIPMENT 19 - LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 2 · TWO-WAY	2 2 - SIGNAL 5 - YIELD SIGN			
(8)	CONTRIBUTING	3 - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - Wrong Way	SPILLING 20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
FNH		6-IMPROPERTURN OF EVENTS	12 - IMPROPER BACKING				# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED			
E			4 - FORIOMENT CAN HAT	EVENTS	1/ Ballanouseus a		4 .	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
	i Z U	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT					
	2	3 - IMMERSION 4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	18-ANIMAL - DEER 19-ANIMAL - OTHER	23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / NON	-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST			
		5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	13-OTHER NON-COLLISION 14-PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	ANYTHING SET IN MOTION By a motor vehicle	FROM 1 3 TO 1	2 - SOUTH 6 - NORTHWEST			
	3	ross on suit i	884118	15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE GBJECT	FROM L 3 TO L	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST			
	41_ 1 1	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	N WITH FIXED OBJECT 37-TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN			
		/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38-OVERHEAD SIGN POST 39-LIGHT/LUMINARIES	44 - DITCH 45 - EMBANKMENT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED			
	5	STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	SUPPORT 40-UTILITY POLE	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL	0,0,5	1 - STATED / ESTIMATED SPEED			
	61 I I	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	4B - TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
	4	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	49-FIRE HYDRANT	99 - OTHER / UNKNOWN					
		FIRST HARMFUL EVEN	IT MOST H	ARMFUL EVENT			3 5				



2,0,2,0,-,0,0,0,0,4,2,2,0, OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER OWNED BUOME. AT APP. AMP. TOTAL PROPERTY OF THE PROPERTY DAMAGE 0, 2 BALCERAK, SAMUEL, SIGMUND DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 9 MIDWAY DR 301 ,KENT ,OH 44243 ☐ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ABORESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE 1, V, WC, V, 7, A, 3, 3, F, C, 0, 6, 5, 2, 8, 3,M D 1DP2290 2.0.1.5 Volkswagen **INSURANCE COMPANY** INSURANCE POLICY # INSURANCE VERIFIED COLOR **VEHICLE MODEL** OHIO CASUALTY FP002335002 **BLK** PASSAT TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED CLASS # PLACARD ID # - ≤10K LBS HIT/SKIP UNIT DEVICE 2 - 10.001 - 26K LBS PLACARD J 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 0,1 3-SPORT UTILITY VEHICLE 19-BUS (16+ PASSENGERS) 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 5 - CARGO VAN BICYCLE 16 - FARM FOILIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 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? 4 - HIGH AUTOMATION 0 1 - DRIVER ASSISTANCE 2 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 0,1, 2-TAXI 7 - BUS - INTERCITY 12-MILITARY 17 - MOWING 99 - OTHER / UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13-POLICE 18 - SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14-PUBLIC UTILITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLETOWING ANOTHER 5 - INTERMODAL CONTAINER B - POLE 12 - CONCRETE MIXER 0,1 INOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTO TRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOY 10-FLAT BED 14-GARBAGE/REFUSE BODY 7 - GRAIN/CHIPS/GRAVEL TYPE 11-DUMP 99 - OTHER / UNKNOWN 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEFRING 8 - TRAILER FOUIPMENT 10-DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE ACCIDENT - NO DAMAGE [0] - UNDERCARRIAGE [14] 3 - INTERSECTION - OTHER 1 - INTERSECTION - MARKED 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 CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS - UNIT NOT AT SCENE [16] AT IMPACT 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING B - ENTERING TRAFFIC LANE 14-ENTERING OR CROSSING 1 1 3 - CHANGING LANES 4__ 3-STRIKING 0 - NO DAMAGE 14 - UNDERCARRIAGE SPECIFIED LOCATION 19-STANDING 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 0,6, ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING. 10-PARKED 20 - OTHER NON-MOTORIST JOGGING, PLAYING DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN 21 - STANDING OUTSIDE 99 - UNKNOWN 11 - SLOWING OR STOPPED 13 - TOP 16-WORKING **DISABLED VEHICLE** & STRUCK IN TRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99-OTHER/UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS TRAFFIC 1 - NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 19-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDAROUT 4 - STOP SIGN 14-STOPPED OR PARKED 3 - RAN RED LIGHT EQUIPMENT 9-IMPROPER LANE CHANGE 23-OPENING DOOR INTO 0,1, 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 19 - LOAD SHIFTING/FALLING/ 4 - RAN STOP SIGN 10-IMPROPER PASSING ROADWAY 15 - SWERVING TO AVOID 3-FLASHER CONTRIBUTING 5 - UNSAFE SPEED 6 - NO CONTROL SPILLING 11 - DROVE OFF ROAD 99 - OTHER IMPROPER ACTION 16 - WRONG WAY 20 - IMPROPER CROSSING 6 - IMPROPERTURN 12 - IMPROPER BACKING # of THROUGH LANES RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING 4 EVENTS 1 2 0 1 - OVERTURN/ROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - FOURPMENT FAILURE 11 - CROSS CENTERLINE -OPPOSITE DIRECTION OF 16-RAILWAY VEHICLE 22 - WCRK ZONE MAINTENANCE 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM **EQUIPMENT** TRAVEL UNIT / NON-MOTORIST DIRECTION 23-STRUCK BY FALLING 3 - IMMERSION 18-ANIMAL - DEER 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 5 - NORTHEAST 19-ANIMAL - OTHER 1 - NORTH 1 4 - JACKKNIEF 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13-OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - NORTHWEST 5 - CARGO / EQUIPMENT 10-CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT FROM 3 TO 4 LOSS OR SHIFT 7 - SOUTHEAST 24-OTHER MOVABLE CBJECT 3 - EAST 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 44 - DITCH EQUIPMENT HNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 51-WALL STRUCTURE 1 - STATED / ESTIMATED SPEED 34 - MEDIAN GUARDRAIL SUPPORT 52-BUILDING 46-FENCE 27 - BRIDGE PIER OR ABUTMENT , 0 , 0 , 0 , AT- HTH ITY POLE BARRIER 53-TUNNEL 2 - CALCULATED / EDR 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OBJECT 4R. TREE 3 - UNDETERMINED 29-BRIDGE RAIL BARRIER POSTED SPEED OR SUPPORT 99-OTHER / UNKNOWN 49 - FIRE HYDRANT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 3 5 1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER

OFFICE SAFETY MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER									
						2,0,2,0,-,0,0,0,0,4,2,2,0,										
	UNIT#	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER							
		WARREN, SUSAN, MARIE							0,4,2,2,1,9,6,0,5,9, F							
		STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
0		CEDAR HILL RD ,Cuyahoga Falls ,OH 44223														
N-N-0		INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED USED														
Ž L		ВҮ							0,4	DOT-COMPLIANT 0 1 1				_1_		
RIS	OL STATE		ICENSE NUMBER			SE CHAI	RGED	LOCAL		OFFENSE DESCRIPTION			CITATION NUMBER			
101	O, H,	RJ7106	RESTRICTION SELECT	unzan Innt	333.0			X	Maximum Sp				61561			
	JE GENSS	SELECT UP TO 2	MESTRICTION SELECT		TRACTED	RACTED ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA			CONDITION	ONDITION ALCOHOL TEST STATUS TYPE VALUE			STATUS TYPE RESULT SELECT UP TO 4			
١	4	ــابــا			1		THER DRUG		1	1	1	1				
	UNIT#	NAME: LAST, F	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER		
	0,2	BALCE	ERAK, SAMUEL	, SIGI	MUNI	D				0.2	0,9,2,0	0.1	1.9	M		
IST	ADDRESS:	STREET, CITY, ST.	ATE, ZIP								PHONE - INCLUDE AREA O			1 11		
NON-MOTORIS	9 MID	WAY D	R 301 ,KENT ,O	H 4424	3					1 1 1						
ž.	NJURIES	INJURED I	EMS AGENCY (NAME)		INJURED 1	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)		DOT-Co	SEATING POSITIO	N AIR BAG US	AGE EJECTION	TRAPPED		
0N L		BY L							USED 0 4	MC HE	LMET 0 1	1	1	, 1		
IST	L STATE		ICENSE NUMBER		OFFENS	SE CHAP	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATIO	N NUMBER			
010	M D		758-766-106													
∑ (L CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	party.	HOL / DRUG SUSPE		CONDITION	ALC STATUS TY	OHOL TEST		RUG TEST(S	T SELECT UPTO 4		
	4			BY	1	=	LCOHOL MAF	ANAULIS	. 1	1	1	1				
	UNIT#	NAME: LAST, F	FIRST, MIDDLE				THER DRUG		-		DATE OF BYDY			اللاللال		
			THO I MIDDEL								DATE OF BIRTH		AGE	GENDER		
ST	ADDRESS:	STREET, CITY, ST	ATE. ZIP					_		CONTACT PHONE - INCLUDE AREA CODE						
ORI										CUNTACT	PHUNE - INCLUDE AREA O	300E				
/ NON-MOTORIS	NJURIES	INJURED	EMS AGENCY (NAME)		INJUREDT	TAKEN TO	MEDICAL FACILITY	NAME CITY	SAFETY EQUIPMENT		SEATING POSITIO	N AIR RAD US	405 515051011			
NON		TAKEN BY			I I I I I I I I I I I I I I I I I I I	AKEN 10	INCOLORE MOLEST	MAINE, GETT)	USED	DOT-Con		AIR BAG US	AGE EJECTION	TRAPPED		
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TORIST					CODE						OTTATIO	WONDER				
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		SELECT UPTO 2		BA	TRACTED	☐ AL	COHOL MAR	ANAULIS		STATUS TY	PE VALUE	STATUS T	YPE RESUL	T SELECT UP 104		
L						01	THER DRUG					ے اِسے				
11	FATAL	RIES	SEATING POSITION 1-FRONT-LEFT SIDE	A 1 - NOT DEP	IR BAG		OL CLASS		OL RESTRIC		DRIVER DISTRAC	and the second second	TEST STA	TUS		
100	Transfer Library	ERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT	A CONTRACTOR OF STREET	1 - NOT DISTRACTED 2 - MANUALLY OPERATING	The state of the state of the	NONE GIVEN TEST REFUSED			
2000	SUSPECTED N		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYE	D SIDE		3-CLASS C		3 - CORRECTIVE LE	and the second	ELECTRONIC COMMUN DEVICE (TEXTING, TYP	ICATION 3-	TEST GIVEN, CON			
S/Deb	POSSIBLE INJ NO APPARENT	The second second	4-SECOND-LEFT SIDE	4 - DEPLOYE 5 - NOT APP	D BOTH FROM	NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DIALING)		SAMPLE / UNUS/ Test given, res			
N.	POLICAL		(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE	P. A. S. Parker	JENT UNKNO	WN	5 - MAC MOPED ONLY		5 - EXCEPT CLASS	CHARLES TO THE REAL PROPERTY.	3 -TALKING ON HANDS-FR COMMUNICATION DEVI	(LL	TEST GIVEN, RES	AFFLIROW AND		
1000	NJURED T	errole and cities	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS		4 - TALKING ON HAND-HEL	D	UNKNOWN			
H	/TREATED AT		7-THIRD - LEFT SIDE	EJ	ECTION		OL ENDORSEM	IENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE	The state of the s	COMMUNICATION DEVI	AN	LCOHOL TES	ST TYPE		
635	EMS		(MOTORCYCLE SIDE CAR) B-THIRD – MIDDLE	I - NOT EJE			H - ḤAZMAŢ		RESTRICTIONS		ELECTRONIC DEVICE	5 - 4.75	NONE BLOOD	40.5		
15400	POLICE OTHER / UNKN	vown	9-THIRD-RIGHT SIDE	2 - PARTIAL 3 TOTALLY			M - MOTORCYCLE P - PASSENGER		9-LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER 7 - OTHER DISTRACTION		URINE			
2			10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP			N-TANKER		10-LIMITED TO DAY	LIGHT ONLY	INSIDE THE VEHICLE	4.	BREATH			
10000	AFETY E O	UIPMENT	11 - PASSENGER IN OTHER	T	RAPPED	1.4	Q - MOTOR SCOOTER		11 - LIMITED TO EMP	25 CHIEF CO. 12-12-12	8-OTHER DISTRACTION OF	UTSIDE 5-	OTHER			
12012	ALEGE MEDICA	ELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAJLING UNIT BUS,	1 - NOTTRAI	PAGE ALL NAMED IN		R-THREE WHEEL MOT S-SCHOOL BUS	TORCYCLE	12 - LIMITED - OTHE 13 - MECHANICAL DE		9-OTHER/UNKNOWN		DRUG TEST	TYPE		
500	LAP BELT ONL		PICK-UP WITH CAP)	2 - EXTRICA			T - DOUBLE & TRIPLE 1	TRAILERS	(SPECIAL BRAKI CONTROLS, OR O	ES, HAND	CONDITION	100	NONE BLOOD	100		
13000	ATTY AND RESIDENCE	LAP BELT USED AINT SYSTEM –	12 - PASSENGER IN UNENCLOSED CARGO AREA	3- FREED B	ICAL MEANS Y		X-TANKER/HAZMAT		ADAPTIVE DEVI	CES)	1 - APPARENTLY NORMAL	NEW TOTAL PROPERTY.	URINE			
40	FORWARD FAC	ING	13-TRAILING UNIT		HANICAL ME	ANS	GENDER	Figure 5	14 - MILITARY VEHICLE	A STATE OF THE STA	2 - PHYSICAL IMPAIRMEN	T 4	OTHER			
	CHILD RESTRA		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE	THE STATE OF	AIR BRAKES		3 - EMOTIONAL (E.G., DEPRE ANGRYDIS (RBFD)		UG TEST RE	SULT(S)		
7 -	BOOSTER SEA	J .	15 - NON-MOTORIST				M - MALE		16-OUTSIDE MIRRO	Married Married Street	4- ILLNESS		DRUG TEST RESULT(S) 1-AMPHETAMINES			
15-80	HELMET USE		99-OTHER/UNKNOWN		2 01		U - OTHER / UNKNOWN		17-PROSTHETIC AID 18-OTHER		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		2 BARBITURATES			
	PROTECTIVE I (Elbow, Knee					100				ntol is t	6- UNDER THE INFLUENCE		BENZODIAZEPINI Cannabinoids	La		
1000	REFLECTIVE (27 7 12 13 15 15 15 15 15		7.13		-			7. 1. 1.	100	OF MEDICATIONS / DRU /ALCOHOL	49	COCAINE			
п-	LIGHTING - PI / Bicycle onl	EDESTRIAN Ly			25-20 T					10 12	9-OTHER/UNKNOWN	The second second	OPIATES/OPIOID	S		
HEIGH	THE RESERVE THE PARTY NAMED IN	IOWN		525					YEAR THE			A STATE OF THE PARTY OF THE PAR	THER Negative resul			

SOURCE SAFETY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER							
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UNIT#		T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
02								0,9,1,9,2,0,0,1,1,8, M					
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
ADDRESS:	ANIK I)R 218 ,Kent ,	OH 44243	<u> </u>					1 1				
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
5	ВҮ					0.4	MC HELMET	0 3	1	, 1	1		
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DOE				
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INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
	ВУ					0359	MC HELMET			11			
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
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INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT	207.0	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		
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ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	one l				
ADDRESS:								MOCOUL AREA OF					
INJURIES		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	ATR RAG USAG	FERTION	TRAPPED		
	TAKEN BY				U		DOT-COMPLIANT	SCATTION OF THE	NIK BAG GSAG	LUEBIION	IRAFFED		
	INJE	RIES	SAFET	Y EQUIPMENT USED	1	SEATING POS	ITION		AIR BAG I	ISACE			
1 - FATA	(L		1 - NONE US	ED-		T - LEFT SIDE		1 - NOT DE	SERVICE CONTRACT				
2 - SUSF	PECTED SE	RIOUS INJURY	VEHICLE	OCCUPANT		ORCYCLE DRIV	ER)		YED FRONT				
3 - SUSF	PECTED MI	NOR INJURY		ER BELT ONLY USED	THE STANS COM	T – MIDDLE T – RIGHT SIDE		3 - DEPLO					
4 - POSS	SIBLE INJU	RY		T ONLY USED	Control of the last	ND – LEFT SIDI		4 - DEPLO	YED BOTH				
5 - NO A	PPARENT	NJURY		ER & LAP BELT USED	A 25 4	ORCYCLE PASS	ENGER)	FRONT					
distance addition to the	INJURED	TAKEN BY		ESTRAINT SYSTEM – D FACING		ND – MIDDLE ND – RIGHT SIC)E		PLICABLE				
Bullion of a Committee of	TRANSPOR	AND RESIDENCE OF THE PARTY OF T	6 - CHILD RI	ESTRAINT SYSTEM =		D - LEFT SIDE		9 - DEPLOYMENT UNKNOWN EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED					
Read Value of the	ATED AT S	CENE	REAR FA		and the second second second	ORCYCLE SIDE D – MIDDLE	CAR)						
2 - EMS			7 - BOOSTER			D - MIDDLE D - RIGHT SIDE							
3 - POLI			8 - HELMET			PER SECTION							
9-01HE	ER / UNKNO		The second section of the second section is the second section of the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is the second section in the second section in the second section is section in the section in the section in the section is section in the section in the section is section in the section in the section in the section is section in the section in the section is section in the section in the section in the section is section in the section in the section in the section is section in the section in the section in the section is section in the section in the section in the section is section in the se	TVE PADS USED KNEES, ETC.)	the state of the state of the	ENGER IN OTH	and the second s	3 - TOTALLY EJECTED					
	in the second	IDER	10 - REFLECT	TVE CLOTHING		ICK UP WITH CA		4 - NOT AF	PPLICABLE				
F-FEMA M-MALE				G – PEDESTRIAN		ENGER IN UNE	NCLOSED	and the second second second second	TRAPP	ED	Li Complete Comp		
PROPERTY AND ADDRESS OF THE PARTY OF THE PAR	R/UNKNO	WN		/BICYCLE ONLY CARGO A 13 - TRAILIN				1 - NOTTRAPPED					
			99 - OTHER /	UNKNOWN	14 - RIDING ON VEHICLE			2 - EXTRICATED BY MECHANICAL MEANS			CAL		
						TRAILING UNIT) MOTORIST		THE STEEL	BY NON-M	ECHANIC	Δ1		
						R / UNKNOWN		MEANS	Francisco (Sautopertosiero espar				
	ST, FIRST, MIDD	LE				21 _ 2h	DAT	E OF BIRTH	a the public part to	AGE	GENDER		
ADDRESS:									, ,				
ADDRESS:	STREET, CITY,	STATE, ZIP			1 4		CONTACT PHONE	- INCLUDE AREA CO	DE		1		
	ST, FIRST, MIDD	LE					DAT	E OF BIRTH	17-11	AGE	GENDER		
		V II. III.											
ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
Fueres								1-1		11	1		
	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER					
ADDRESS:	STREET, CITY,	STATE 710					CONTACT PHONE - INCLUDE AREA CODE						
במטענבסט:	. SIREEI, CHTY,	SIMIE, LIP					CONTACT PHONE	- INCLUDE AREA CO	OE 30				
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