

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER\*

2020-00001036

PHOTOS TAKEN  
 SECONDARY CRASH  
 PRIVATE PROPERTY

OH-2  
 OH-3  
 OH-1P  
 OTHER

LOCAL INFORMATION  
**KENTWAY**  
REPORTING AGENCY NAME\*  
**City of Kent Police**  
NCTC\*  
**06703**

HIT/SKIP  
1 - SOLVED  
2 - UNSOLVED  
**0 2**

NUMBER OF UNITS  
**0 2**

UNIT IN ERROR  
98 - ANIMAL  
99 - UNKNOWN  
**0 2**

COUNTY\* **6 7** LOCALITY\* **1** LOCATION: CITY, VILLAGE, TOWNSHIP\*  
**Kent**

CRASH DATE / TIME\*  
**01152020/1536**

CRASH SEVERITY  
1 - FATAL  
2 - SERIOUS INJURY SUSPECTED  
3 - MINOR INJURY SUSPECTED  
4 - INJURY POSSIBLE  
5 - PROPERTY DAMAGE ONLY  
**3**

ROUTE TYPE ROUTE NUMBER PREFIX LOCATION ROAD NAME ROAD TYPE  
**3** **SUMMIT** **S T**

LATITUDE DECIMAL DEGREES  
**41.150076**

ROUTE TYPE ROUTE NUMBER PREFIX REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) ROAD TYPE  
**WILLOW** **S T**

LONGITUDE DECIMAL DEGREES  
**-81.353084**

REFERENCE POINT FROM REFERENCE  
1 - INTERSECTION  
2 - MILE POST  
3 - HOUSE #  
**1**

DIRECTION FROM REFERENCE  
1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

ROUTE TYPE  
IR - INTERSTATE ROUTE (TP)  
US - FEDERAL US ROUTE  
SR - STATE ROUTE  
CR - NUMBERED COUNTY ROUTE  
TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE  
AL - ALLEY  
AV - AVENUE  
BL - BOULEVARD  
CR - CIRCLE  
CT - COURT  
DR - DRIVE  
HE - HEIGHTS  
HW - HIGHWAY  
LA - LANE  
MP - MILEPOST  
OV - OVAL  
PK - PARKWAY  
PI - PIKE  
PL - PLACE  
RD - ROAD  
SQ - SQUARE  
ST - STREET  
TE - TERRACE  
TL - TRAIL  
WA - WAY

INTERSECTION RELATED  
 WITHIN INTERSECTION OR ON APPROACH  
 WITHIN INTERCHANGE AREA  
NUMBER OF APPROACHES  
**4**

ROADWAY  
 ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT  
1 - ON ROADWAY  
2 - ON SHOULDER  
3 - IN MEDIAN  
4 - ON ROADSIDE  
5 - ON GORE  
6 - OUTSIDE TRAFFIC WAY  
7 - ON RAMP  
8 - OFF RAMP  
**1 0**

MANNER OF CRASH COLLISION/IMPACT  
1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT  
2 - REAR-END  
3 - HEAD-ON  
4 - REAR-TO-REAR  
5 - BACKING  
6 - ANGLE  
7 - SIDESWIPE, SAME DIRECTION  
8 - SIDESWIPE, OPPOSITE DIRECTION  
9 - OTHER / UNKNOWN  
**1**

DIRECTION OF TRAVEL  
1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

MEDIAN TYPE  
1 - DIVIDED FLUSH MEDIAN (<4 FEET)  
2 - DIVIDED FLUSH MEDIAN (≥4 FEET)  
3 - DIVIDED, DEPRESSED MEDIAN  
4 - DIVIDED, RAISED MEDIAN (ANY TYPE)  
9 - OTHER/UNKNOWN

WORK ZONE RELATED  
WORKERS PRESENT  
LAW ENFORCEMENT PRESENT  
ACTIVE SCHOOL ZONE

WORK ZONE TYPE  
1 - LANE CLOSURE  
2 - LANE SHIFT/CROSSOVER  
3 - WORK ON SHOULDER OR MEDIAN  
4 - INTERMITTENT OR MOVING WORK  
5 - OTHER

LOCATION OF CRASH IN WORK ZONE  
1 - BEFORE THE 1ST WORK ZONE WARNING SIGN  
2 - ADVANCE WARNING AREA  
3 - TRANSITION AREA  
4 - ACTIVITY AREA  
5 - TERMINATION AREA

CONTOUR  
**2**

CONDITIONS  
**1**

SURFACE  
**1**

LIGHT CONDITION  
1 - DAYLIGHT  
2 - DAWN/DUSK  
3 - DARK - LIGHTED ROADWAY  
4 - DARK - ROADWAY NOT LIGHTED  
5 - DARK - UNKNOWN ROADWAY LIGHTING  
9 - OTHER / UNKNOWN  
**1**

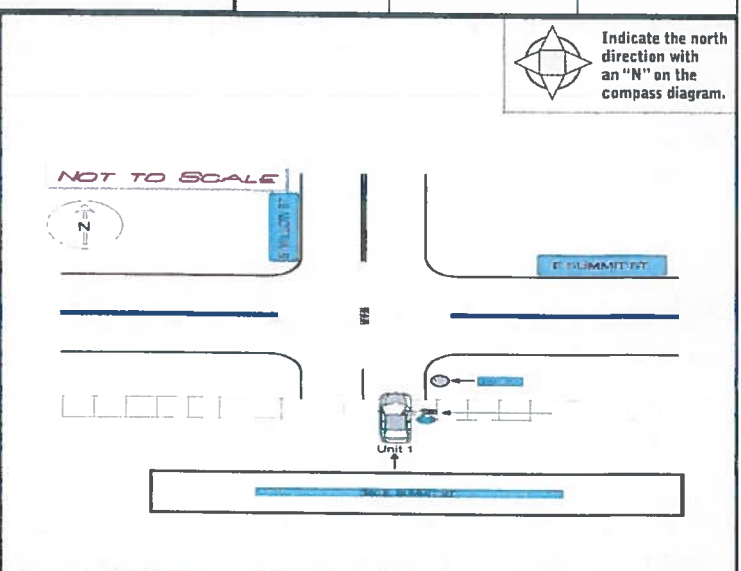
WEATHER  
1 - CLEAR  
2 - CLOUDY  
3 - FOG, SMOG, SMOKE  
4 - RAIN  
5 - SLEET, HAIL  
6 - SNOW  
7 - SEVERE CROSSWINDS  
8 - BLOWING SAND, SOIL, DIRT, SNOW  
9 - FREEZING RAIN OR FREEZING DRIZZLE  
99 - OTHER / UNKNOWN  
**0 2**

1 - DRY  
2 - WET  
3 - SNOW  
4 - ICE  
5 - SAND, MUD, DIRT, OIL, GRAVEL  
6 - WATER (STANDING, MOVING)  
7 - SLUSH  
9 - OTHER/UNKNOWN

1 - CONCRETE  
2 - BLACKTOP, BITUMINOUS, ASPHALT  
3 - BRICK/BLOCK  
4 - SLAG, GRAVEL, STONE  
5 - DIRT  
9 - OTHER/UNKNOWN

NARRATIVE

UNIT 1 WAS TRAVELING N/B INTO THE INTERSECTION OF E. SUMMIT ST. AND S. WILLOW ST. UNIT 1 WAS LEAVING THE PROPERTY OF 360 E. SUMMIT ST. AND HAD A GREEN TRAFFIC LIGHT. UNIT 2 WAS A PEDESTRIAN RIDING ON A LONG BOARD W/B ON THE SIDEWALK IN FRONT OF 360 E. SUMMIT ST. UNIT 2 FAILED TO YIELD TO UNIT 1 AND STRUCK THE RIGHT SIDE OF UNIT 1. UNIT 2 CAUSED A MINOR INJURY CRASH. UNIT 1 ORIGINALLY CONTINUED ON



CRASH REPORTED DATE / TIME: **01152020/1536** DISPATCH DATE / TIME: **01152020/1538** ARRIVAL DATE / TIME: **01152020/1541** SCENE CLEARED DATE / TIME: **01152020/1619**

REPORT TAKEN BY  
 POLICE AGENCY  
 MOTORIST  
 SUPPLEMENT (CORRECTION IN ADDITION TO AN EXISTING REPORT SENT TO CPS)

TOTAL TIME ROADWAY CLOSED: **0 0 0** OTHER INVESTIGATION TIME: **0 4 0** TOTAL MINUTES: **0 8 1**

OFFICER'S NAME\*: **Fuller, James** OFFICER'S BADGE NUMBER\*: **2 2 1**

CHECKED BY OFFICER'S NAME\*: **Ennemoser, Jennifer** CHECKED BY OFFICER'S BADGE NUMBER\*: **2 2 9**

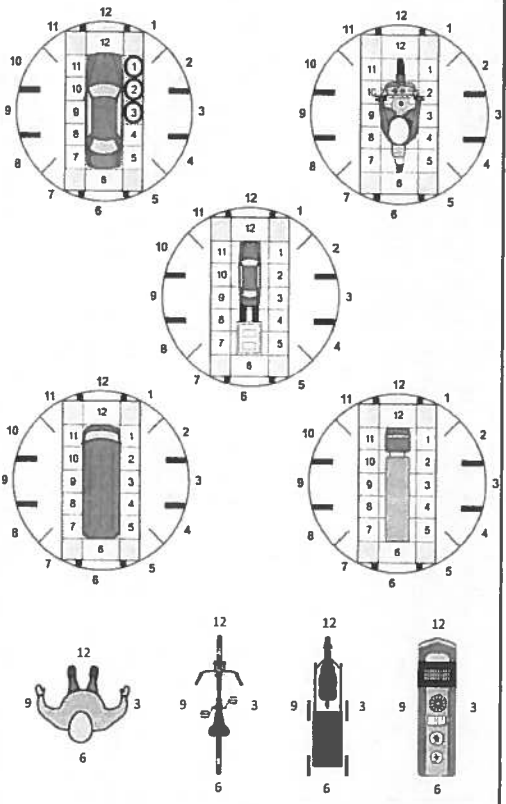
LOCAL REPORT NUMBER  
**2020-00001036**

**OWNER**  
 UNIT # **01** OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER)  
**MILLS, RALPH, W** OWNER PHONE: ( ) OF AREA CODE (X SAME AS DRIVER)  
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)  
**360 SUMMIT ST 204, Kent, OH 44240**  
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  
 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**DAMAGE**  
**DAMAGE SCALE**  
**3** 1 - NONE 3 - FUNCTIONAL DAMAGE  
 2 - MINOR DAMAGE 4 - DISABLING DAMAGE  
 9 - UNKNOWN

**VEHICLE**  
 LP STATE **OH** LICENSE PLATE # **FXQ1740** VEHICLE IDENTIFICATION # **2T1BR32E17C751598** VEHICLE YEAR **2007** VEHICLE MAKE **Toyota**  
 INSURANCE VERIFIED INSURANCE COMPANY **PROGRESSIVE** INSURANCE POLICY # **902081372** COLOR **RED** VEHICLE MODEL **COROLLA**  
 COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME \_\_\_\_\_  
 INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT #OCCUPANTS **01** VEHICLE WEIGHT GVWR/GCWR  
 1 - <10K LBS  
 2 - 10,001 - 26K LBS  
 3 - >26K LBS  
 MATERIAL RELEASED HAZARDOUS MATERIAL CLASS # PLACARD ID #  
 PLACARD \_\_\_\_\_

**DAMAGED AREA(S)**  
 INDICATE ALL THAT APPLY



**UNIT TYPE**  
**01**  
 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 (6+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)  
 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST  
 4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE  
 5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN  
 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HITS/SKIP  
**00** # OF TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?  
**2** 1 - YES 2 - NO 9 - OTHER / UNKNOWN  
 AUTONOMOUS MODE LEVEL  
**0**  
 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN  
 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION  
 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

**SPECIAL FUNCTION**  
**01**  
 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER  
 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN  
 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL  
 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING  
 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL

**CARGO BODY TYPE**  
**01**  
 1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER  
 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10 - FLAT BED 13 - AUTO TRANSPORTER  
 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99 - OTHER / UNKNOWN

**VEHICLE DEFECTS**  
**01**  
 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN  
 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT  
 3 - TAIL LAMPS 6 - TIRE BLOWOUT

**NON-MOTORIST LOCATION AT IMPACT**  
**01**  
 1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE  
 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN  
 5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS

**ACTION**  
**4**  
 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE  
 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING  
 3 - STRIKING 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST  
 4 - STRUCK PRE-CRASH ACTIONS 5 - OVERTAKING/PASSING 10 - PARKED 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE  
 5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN  
 9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS

**CONTRIBUTING CIRCUMSTANCES**  
**01**  
 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY  
 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE  
 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY  
 4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION  
 5 - UNSAFE SPEED 11 - DROVE OFF ROAD 21 - IMPROPER CROSSING  
 6 - IMPROPER TURN 12 - IMPROPER BACKING

**SEQUENCE OF EVENTS**  
**1 4**  
 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT  
 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE  
 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT  
 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 25 - OTHER  
 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEJALCYCLE 21 - PARKED MOTOR VEHICLE

**COLLISION WITH FIXED OBJECT - STRUCK**  
 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT  
 26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL  
 27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING  
 28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL  
 29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT  
 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 99 - OTHER / UNKNOWN  
 49 - FIRE HYDRANT

NO DAMAGE [ 0 ]  UNDERCARRIAGE [ 14 ]  
 TOP [ 13 ]  ALL AREAS [ 15 ]  
 UNIT NOT AT SCENE [ 16 ]

**INITIAL POINT OF CONTACT**  
**02**  
 0 - NO DAMAGE 14 - UNDERCARRIAGE  
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
 13 - TOP 99 - UNKNOWN

**TRAFFIC**  
**TRAFFICWAY FLOW**  
**2** 1 - ONE-WAY 2 - TWO-WAY  
**TRAFFIC CONTROL**  
**2** 1 - ROUNDABOUT 4 - STOP SIGN  
 2 - SIGNAL 5 - YIELD SIGN  
 3 - FLASHER 6 - NO CONTROL

**# OF THROUGH LANES ON ROAD**  
**2**  
**RAIL GRADE CROSSING**  
**1**  
 1 - NOT INVOLVED  
 2 - INVOLVED-ACTIVE CROSSING  
 3 - INVOLVED-PASSIVE CROSSING

**UNIT / NON-MOTORIST DIRECTION**  
 FROM **2** TO **1**  
 1 - NORTH 5 - NORTH-EAST  
 2 - SOUTH 6 - NORTHWEST  
 3 - EAST 7 - SOUTHEAST  
 4 - WEST 8 - SOUTHWEST  
 9 - OTHER / UNKNOWN

**UNIT SPEED**  
**005**  
**POSTED SPEED**  
**25**  
**DETECTED SPEED**  
**1**  
 1 - STATED / ESTIMATED SPEED  
 2 - CALCULATED / EDR  
 3 - UNDETERMINED

**FIRST HARMFUL EVENT** **1** **MOST HARMFUL EVENT**

**OWNER**

UNIT # **02** OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**DAMAGE**

**DAMAGE SCALE**

**2** 1 - NONE 3 - FUNCTIONAL DAMAGE  
2 - MINOR DAMAGE 4 - DISABLING DAMAGE  
9 - UNKNOWN

**VEHICLE**

LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE

INSURANCE VERIFIED INSURANCE COMPANY **NATIONWIDE** INSURANCE POLICY # **9234J259098** COLOR VEHICLE MODEL

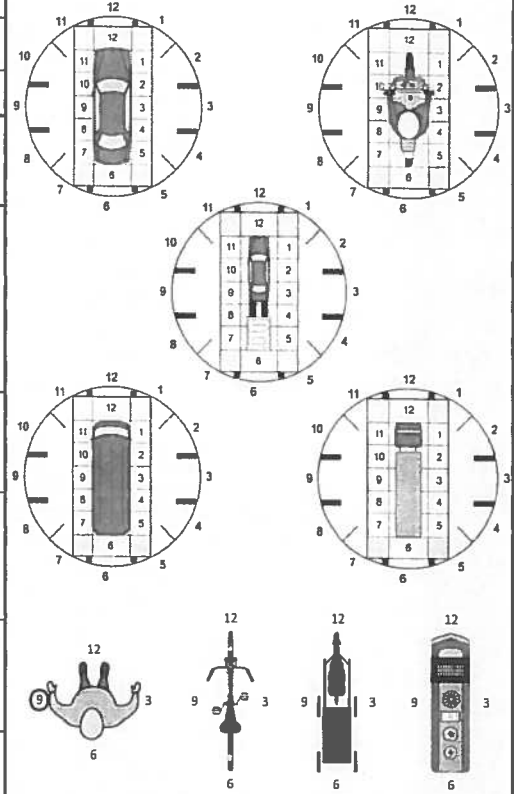
COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE TYPE OF USE

INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT #OCCUPANTS

US DOT # TOWED BY: COMPANY NAME

HAZARDOUS MATERIAL CLASS # PLACARD ID #

**DAMAGED AREA(S)**  
INDICATE ALL THAT APPLY



UNIT TYPE

1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER  
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3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST  
4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE  
5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN  
6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP

# OF TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?

1 - YES 2 - NO 9 - OTHER / UNKNOWN

AUTONOMOUS MODE LEVEL

0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN  
1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION  
2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

SPECIAL FUNCTION

1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER  
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5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL

CARGO BODY TYPE

1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER  
2 - BUS 4 - LOGGING 6 - CARGO VAN ENCLOSED BOX 9 - CARGO TANK 13 - AUTO TRANSPORTER  
7 - GRAINCHIPS/GRAVEL 11 - DUMP 10 - FLAT BED 14 - GARBAGE/REFUSE  
99 - OTHER / UNKNOWN

VEHICLE DEFECTS

1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN  
2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT  
3 - TAIL LAMPS 6 - TIRE BLOWOUT

NON-MOTORIST LOCATION AT IMPACT

**08**

1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE  
2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 14 - GARBAGE/REFUSE  
5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS 99 - OTHER / UNKNOWN

ACTION

**3**

1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE  
2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING  
3 - STRIKING 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST  
4 - STRUCK PRE-CRASH ACTIONS 4 - OVERTAKING/PASSING 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE  
5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE  
9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN

CONTRIBUTING CIRCUMSTANCES

**02**

1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY  
2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACCA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE  
3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY  
4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION  
5 - UNSAFE SPEED 11 - DROVE OFF ROAD 21 - VISION OBSTRUCTION 21 - LYING IN ROADWAY  
6 - IMPROPER TURN 12 - IMPROPER BACKING

SEQUENCE OF EVENTS

**15**

1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT  
2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE  
3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT  
4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE  
5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE IN TRANSPORT 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK

25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT  
26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL  
27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING  
28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL  
29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT  
30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 99 - OTHER / UNKNOWN  
49 - FIRE HYDRANT

FIRST HARMFUL EVENT **1** MOST HARMFUL EVENT **1**

- NO DAMAGE [ 0 ]  - UNDERCARRIAGE [ 14 ]  
 - TOP [ 13 ]  - ALL AREAS [ 15 ]  
 - UNIT NOT AT SCENE [ 16 ]

INITIAL POINT OF CONTACT

**09**

0 - NO DAMAGE 14 - UNDERCARRIAGE  
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
13 - TOP 99 - UNKNOWN

TRAFFIC

TRAFFICWAY FLOW

**2** 1 - ONE-WAY 2 - TWO-WAY

TRAFFIC CONTROL

**2** 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL

# OF THROUGH LANES ON ROAD

**2**

RAIL GRADE CROSSING

**1** 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION

FROM **3** TO **4**

1 - NORTH 5 - NORTHWEST  
2 - SOUTH 6 - WEST  
3 - EAST 7 - SOUTHWEST  
4 - WEST 8 - SOUTH  
9 - OTHER / UNKNOWN

UNIT SPEED

**005**

POSTED SPEED

**25**

DETECTED SPEED

**1** 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED



# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
2 0 2 0 - 0 0 0 0 1 0 3 6

UNIT # 0, 1	NAME: LAST, FIRST, MIDDLE MILLS, RALPH, W	DATE OF BIRTH 1 2 1 4 1 9 5 8	AGE 6 1	GENDER M
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ADDRESS: STREET, CITY, STATE, ZIP 360 E SUMMIT ST 204, Kent, OH 44240	CONTACT PHONE - INCLUDE AREA CODE
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INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0, 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
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OL STATE O, H	OPERATOR LICENSE NUMBER RD019353	OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION	CITATION NUMBER
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OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST STATUS TYPE VALUE			DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4		
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UNIT # 0, 2	NAME: LAST, FIRST, MIDDLE SHARP, SAMUEL, HARLAN	DATE OF BIRTH 0 3 0 4 1 9 9 9	AGE 2 0	GENDER M
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ADDRESS: STREET, CITY, STATE, ZIP 721 VINE ST, Kent, OH 44240	CONTACT PHONE - INCLUDE AREA CODE
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INJURIES 3	INJURED TAKEN BY 1	EMS AGENCY (NAME) Kent Fire	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 9, 9	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 1 5	AIR BAG USAGE	EJECTION	TRAPPED
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OL STATE O, H	OPERATOR LICENSE NUMBER UJ992699	OFFENSE CHARGED 371.01	LOCAL CODE <input checked="" type="checkbox"/>	OFFENSE DESCRIPTION Right of Way in Cros	CITATION NUMBER 66214
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OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST STATUS TYPE VALUE			DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4		
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UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
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ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE
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INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION	CITATION NUMBER
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OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION	ALCOHOL TEST STATUS TYPE VALUE			DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4		
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INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1- FATAL	1- FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1- NOT DEPLOYED	1- CLASS A	1- ALCOHOL INTERLOCK DEVICE	1- NOT DISTRACTED	1- NONE GIVEN
2- SUSPECTED SERIOUS INJURY	2- FRONT - MIDDLE	2- DEPLOYED FRONT	2- CLASS B	2- CDL INTRASTATE ONLY	2- MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2- TEST REFUSED
3- SUSPECTED MINOR INJURY	3- FRONT - RIGHT SIDE	3- DEPLOYED SIDE	3- CLASS C	3- CORRECTIVE LENSES	3- TALKING ON HANDS-FREE COMMUNICATION DEVICE	3- TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE
4- POSSIBLE INJURY	4- SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4- DEPLOYED BOTH FRONT / SIDE	4- REGULAR CLASS (OHIO = D)	4- FARM WAIVER	4- TALKING ON HAND-HELD COMMUNICATION DEVICE	4- TEST GIVEN, RESULTS KNOWN
5- NO APPARENT INJURY	5- SECOND - MIDDLE	5- NOT APPLICABLE	5- MC-MOPED ONLY	5- EXCEPT CLASS A BUS	5- OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5- TEST GIVEN, RESULTS UNKNOWN
<b>INJURED TAKEN BY</b>	6- SECOND - RIGHT SIDE	9- DEPLOYMENT UNKNOWN	6- NO VALID OL	6- EXCEPT CLASS A & CLASS B BUS	7- OTHER DISTRACTION INSIDE THE VEHICLE	<b>ALCOHOL TEST TYPE</b>
1- NOT TRANSPORTED / TREATED AT SCENE	7- THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	<b>EJECTION</b>	<b>OL ENDORSEMENT</b>	7- EXCEPT TRACTOR-TRAILER	8- OTHER DISTRACTION OUTSIDE THE VEHICLE	1- NONE
2- EMS	8- THIRD - MIDDLE	1- NOT EJECTED	H- HAZMAT	8- INTERMEDIATE LICENSE RESTRICTIONS	9- OTHER / UNKNOWN	2- BLOOD
3- POLICE	9- THIRD - RIGHT SIDE	2- PARTIALLY EJECTED	M- MOTORCYCLE	9- LEARNER'S PERMIT RESTRICTIONS	<b>CONDITION</b>	3- URINE
9- OTHER / UNKNOWN	10- SLEEPER SECTION OF TRUCK CAB	3- TOTALLY EJECTED	P- PASSENGER	10- LIMITED TO DAYLIGHT ONLY	1- APPARENTLY NORMAL	4- BREATH
<b>SAFETY EQUIPMENT</b>	11- PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT BUS, PICK-UP WITH CAP)	4- NOT APPLICABLE	N- TANKER	11- LIMITED TO EMPLOYMENT	2- PHYSICAL IMPAIRMENT	5- OTHER
1- NONE USED	12- PASSENGER IN UNENCLOSED CARGO AREA	<b>TRAPPED</b>	Q- MOTOR SCOOTER	12- LIMITED - OTHER	3- EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTRESSED)	<b>DRUG TEST TYPE</b>
2- SHOULDER BELT ONLY USED	13- TRAILING UNIT	1- NOT TRAPPED	R- THREE WHEEL MOTORCYCLE	13- MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	4- ILLNESS	1- NONE
3- LAP BELT ONLY USED	14- RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2- EXTRICATED BY MECHANICAL MEANS	S- SCHOOL BUS	14- MILITARY VEHICLES ONLY	5- FELL ASLEEP, FAINTED, FATIGUED, ETC.	2- BLOOD
4- SHOULDER & LAP BELT USED	99- OTHER / UNKNOWN	3- FREED BY NON-MECHANICAL MEANS	T- DOUBLE & TRIPLE TRAILERS	15- MOTOR VEHICLES WITHOUT AIR BRAKES	6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	3- URINE
5- CHILD RESTRAINT SYSTEM - FORWARD FACING			X- TANKER / HAZMAT	16- OUTSIDE MIRROR	9- OTHER / UNKNOWN	4- OTHER
6- CHILD RESTRAINT SYSTEM - REAR FACING			<b>GENDER</b>	17- PROSTHETIC AID		<b>DRUG TEST RESULT(S)</b>
7- BOOSTER SEAT			F- FEMALE	18- OTHER		1- AMPHETAMINES
8- HELMET USED			M- MALE			2- BARBITURATES
9- PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)			U- OTHER / UNKNOWN			3- BENZODIAZEPINES
10- REFLECTIVE CLOTHING						4- CANNABINOIDS
11- LIGHTING - PEDESTRIAN / BICYCLE ONLY						5- COCAINE
99- OTHER / UNKNOWN						6- OPIATES / OPIOIDS
						7- OTHER
						8- NEGATIVE RESULTS



# OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER  
2 0 2 0 - 0 0 0 0 1 0 3 6

OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH		AGE	GENDER		
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE					
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH		AGE	GENDER		
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE					
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH		AGE	GENDER		
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE					
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH		AGE	GENDER		
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE					
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED

INJURIES	SAFETY EQUIPMENT USED	SEATING POSITION	AIR BAG USAGE
1 - FATAL	1 - NONE USED - VEHICLE OCCUPANT	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED
2 - SUSPECTED SERIOUS INJURY	2 - SHOULDER BELT ONLY USED	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT
3 - SUSPECTED MINOR INJURY	3 - LAP BELT ONLY USED	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE
4 - POSSIBLE INJURY	4 - SHOULDER & LAP BELT USED	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT/SIDE
5 - NO APPARENT INJURY	5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	5 - SECOND - MIDDLE	5 - NOT APPLICABLE
	6 - CHILD RESTRAINT SYSTEM - REAR FACING	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN
	7 - BOOSTER SEAT	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	
	8 - HELMET USED	8 - THIRD - MIDDLE	
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	9 - THIRD - RIGHT SIDE	
	10 - REFLECTIVE CLOTHING	10 - SLEEPER SECTION OF TRUCK CAB	
	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK UP WITH CAP)	
	99 - OTHER / UNKNOWN	12 - PASSENGER IN UNENCLOSED CARGO AREA	
		13 - TRAILING UNIT	
		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	
		15 - NON-MOTORIST	
		99 - OTHER / UNKNOWN	

WITNESS	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH			AGE	GENDER	
	MACMILLAN, OWEN, PATRICK	0 6 1 3 1 9 9 8		2 1	M		
ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE			
335 E SUMMIT ST ,Kent, ,OH 44240							
WITNESS	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH			AGE	GENDER	
	GOELLNER, ALEXANDRIA, ROSE	0 1 3 1 1 9 9 8		2 1	F		
ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE			
328 S WILLOW ST ,Kent, ,OH 44240							
WITNESS	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH			AGE	GENDER	
	BLAKER, JAY, A	0 5 2 2 1 9 7 0		4 9	M		
ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE			
3609 NAUTILUS TRL ,Reminderville, ,OH 44202							

AND THOUGHT HE HAD STRUCK THE UTILITY  
POLE BUT RETURNED SOON AFTER.