OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*								
PHOTOS TAKEN OH-2 X OH-3	NT REPORT	2,0,2,0,-,0,0,0,1,0,3,6,							
SECONDARY CRASH OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR			
COUNTY* LOCALITY* LOCATION: CIT	City of Kent Police	.0,0	5,7,0,3	L 2 - UNSOLVED	0 2	0 2 98 - ANIMAL			
6 7 1 2-VILLAGE Kent	Y, VILLAGE, TOWNSHIP*			CRASH DATE /T		CRASH SEVERITY 1 - FATAL			
3-IOWNSHIP	LOCATION ROAD NAME	- 1	ROAD TYPE	0,1,1,5,2,0,2,0,		2 - SERIOUS INJURY SUSPECTED			
2- SOUTH 3 3- EAST	SUMMIT		ST	4,1,1,5,0,		3 - MINOR INJURY			
4-WE31	REFERENCE ROAD NAME (ROAD, MILEPOS	ST, HOUSE #)	ROAD TYPE	LONGITUDE DE		SUSPECTED 4 - INJURY POSSIBLE			
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	WILLOW		ST	-8,1 _a ,3 _. 5,3		5 - PROPERTY DAMAGE			
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE	0 1		NTERSECTION RE	ONLY			
1-INTERSECTION 1-NORTH IR	- INTERSTATE ROUTE(TP) AL - ALLEY - FEDERAL US ROUTE AV - AVENUE		- ROAD	Gard	RSECTION OR ON AP				
3-HOUSE # 3-EAST	I EDEIGHE GO MOOTE		- SQUARE - STREET	WITHIN INTER	RCHANGE AREA	NUMBER OF APPROACHES			
BICTANOF BYOMENON	- NUMBERED COUNTY ROUTE CT - COURT		-TERRACE		ROADWAY	A TROPOLES			
1 - MILES TR 2 - FEET	- NUMBERED TOWNSHIP DR - DRIVE	PI - PIKE W	A - WAY	ROADWAY DIV	IDED				
3-YARDS	HE - HEIGHTS			<u> </u>					
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVEI	1 - NOT COLLISIO	R ash collision/impac In 4 - Rear-to-Rear	Т	DIRECTION OF TRAVEL 1 - NORTH		EDIAN TYPE DED FLUSH MEDIAN			
	ALLEY ACCESS GRADE CROSSING BETWEEN TWO MOTOR	5 - BACKING 6 - ANGLE		2- SOUTH	(<4	FEET) DED FLUSH MEDIAN			
4 - ON ROADSIDE 12-SHARED U 5 - ON GORE TRAILS		7 - SIDESWIPE, SAME		3- EAST 4- WEST	(≥4	FEET)			
6-OUTSIDE TRAFFIC WAY 13-BIKE LANE	3 - 11EAD-014	B - SIDESWIPE, OPPOS 9 - OTHER / UNKNOW	//		4 - DIVI	DED, DEPRESSED MEDIAN DED, RAISED MEDIAN			
7 - ON RAMP 14-TOLL BOOT 8 - OFF RAMP 99-OTHER / U					1	Y TYPE) ER/UNKNOWN			
WORK ZONE RELATED	WORK ZONE TYPE LOCA	ATION OF CRASH IN WO	RK ZONE	CONTOUR	CONDITIONS	SURFACE			
WORKERS PRESENT	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST W WARNING SIGN	ORK ZONE	2	. 1	1			
	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNING	ADVANCE WARNING AREA 1 - STRAIGHT LEVEL 1 - DRY 1						
4-	INTERMITTENT OR MOVING WORK	3-TRANSITION AREA 4-ACTIVITY AREA		2 - STRAIGHT GRADE 2 - WET 3 - CURVE LEVEL 3 - SNOW		2 - BLACKTOP, BITUMINOUS,			
ACTIVE SCHOOL ZONE 5.	OTHER	5 - TERMINATION ARE	A	4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT 3 - BRICK/BLOCK			
LIGHT CONDITION 1 - DAYLIGHT	WEATHER 1-CLEAR 6-SNO	12/		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIR OIL, GRAVEL	T, 4 - SLAG, GRAVEL,			
1 2-DAWN/DUSK	.0.2 2-CLOUDY 7-SEVI	ERE CROSSWINDS	ROSSWINDS 6-WATER (STANDING. 5 PORT						
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3-FOG, SMOG, SMOKE 8-BLOV	WING SAND, SOIL, DIRT, EZING RAIN OR FREEZIN			MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN			
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL 99 - OTH	HER / UNKNOWN	7 UNKNOWN 9 - OTHER/UNKNOWN			۸N			
NARRATIVE						Indicate the north			
UNIT 1 WAS TRAVELING N	/R INTO THE				<	direction with an "N" on the			
						compass diagram.			
INTERSECTION OF E. SUN		no digrame d							
WILLOW ST. UNIT 1 WAS		NOT 7	0 80-	TE I					
PROPERTY OF 360 E. SUM		(7		Marion .					
A GREEN TRAFFIC LIGHT		-		'		E NUMBER TOTAL			
PEDESTRIAN RIDING ON	A LONG BOARD W/B				_				
ON THE SIDEWALK IN FR	CONT OF 360 E.				6				
SUMMIT ST. UNIT2 FAILE	D TO YIELD TO				2-1-1				
UNIT 1 AND STRUCK THE	RIGHT SIDE OF			Un	t 1				
UNIT 1. UNIT 2 CAUSED A MINOR INJURY									
CRASH. UNIT 1 ORIGINAL									
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED D	ATE/TIME	REPORT TAKEN BY			
[0,1,1,5,2,0,2,0,/,1,5,3,6,]	5,2,0,2,0,/,1,5,3,8,0,1,1	5,2,0,2,0,/,1,	5,4,1,0	1,1,5,2,0,2,0	,/,1,6,1,9,	X POLICE AGENCY			
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINU	AL OFFICER'S NAME*	Сн	CHECKED BY OFFICER'S NAME*						
	OFFICER'S BADGE NUM		Y OFFICER'S BADGE N	UMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS)				
0 0 0 0 4 0 0 8	1 2 2 1	1		9	1				

HSY8304 OH1U 1/19 [760-0820]

LOCAL REPORT NUMBER 2,0,2,0,-,0,0,0,0,1,0,3,6 OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER) OWNER PHONE: INTERPRETATION OF AREA CODE (TXI SAME AS DRIVER) DAMAGE 0 1 MILLS, RALPH, W DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 360 SUMMIT ST 204, Kent, OH 44240 J 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 2,T,1,B,R3,2,E1,7,C7,5,1,5,9,8 O H FXO1740 2 0 0 7 **Toyota** INSURANCE COMPANY INSURANCE POLICY # INSURANCE VERIFIED COLOR VEHICLE MODEL **PROGRESSIVE** 902081372 RED COROLLA 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 HIT/SKIP UNIT DEVICE RELEASED 2 - 10,001 - 26K LBS 0 1 PLACARD 1 3 - >26K LBS. 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18-LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) B - MOTORCYCLE 3-WHEELED 0.1 2 - PASSENGER VALLETY VEHICLE 9 - AUTOCYCLE 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 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 16-FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) 17-MOTORHOME ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP (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 AUTONOMOUS 2 - PARTIAL AUTOMATION MODE LEVEL 2 1-YES 2-NO 9-OTHER/UNKNOWN 5 - FULL AUTOMATION 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 0,1, 2-TAX 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 8 - POLE 12 - CONCRETE MIXER 0,1/NOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGOTANK 13-AUTOTRANSPORTER CARGO 2 - BUS 4 - LOCGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED BODY 14-GARRAGE/REFUSE 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 - STEERING **8 - TRAILER EQUIPMENT** 10-DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS DEFECTIVE 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 4 - MIDBLOCK ~ MARKED 7 - SHOULDER / ROADSIDE 10-DRIVEWAY ACCESS AT INCIDENT SCENE T-TOP [13] - ALL AREAS [15] NON-MOTORIST 2-INTERSECTION-UNMARKED CROSSWALK 99 - OTHER / UNKNOWN 8 - SIDEWALK 11 - 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 2 - NON-COLLISION 2 - BACKING B - ENTERING TRAFFIC LANE OR LEAVING VEHICLE 14 - ENTERING OR CROSSING 0 1 3 - CHANGING LANES 4 0 - NO DAMAGE 14 - UNDERCARRIAGE - 3-STRIKING 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 19-STANDING ACTION 4. STRUCK 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN JOGGING, PLAYING DIAGRAM 21 - STANDING OUTSIDE 99 - UNKNOWN 11-SLOWING OR STOPPED 16-WORKING 13-TOP & STRUCK DISABLED VEHICLE INTRAFFIC 6 - MAKING LEFT TURN 9-OTHER/UNKNOWN 17 - PUSHING VEHICLE 12-DRIVERLESS 99 - OTHER / UNKNOWN TRAFFIC 1-NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL 2 - FAILURE TO YIELD PARKED POSITION B-FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 3 - RAN RED LIGHT 14-STOPPED OR PARKED EQUIPMENT 9-IMPROPER LANE CHANGE $\lfloor 0 \rfloor 1 \rfloor$ 23 - OPENING DOOR INTO 2 - TWO-WAY ILLEGALLY 2 - SIGNAL 5 - YIELD SIGN 19-LOAD SHIFTING/FALLING/ 4 - RAN STOP SIGN 10-IMPROPER PASSING ROADWAY CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID 3 - FLASHER 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 SEQUENCE OF EVENTS 1 - NOT INVOLVED _ 2 2 - INVOLVED-ACTIVE CROSSING **EVENTS** 1 4 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -3 - INVOLVED-PASSIVE CROSSING 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE 2 - FIRE/EXPLOSION OPPOSITE DIRECTION OF 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM EQUIPMENT TRAVEL 23-STRUCK BY FALLING, 3 - IMMERSION UNIT / NON-MOTORIST DIRECTION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12-DOWNHILL RUNAWAY SHIFTING CARGO OR 1 4 - JACKKNIFE 19-ANIMAL - OTHER 9 - RAN OFF ROAD LEFT 1 - NORTH 5 - NORTHEAST ANYTHING SET IN MOTION 13-OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN 2 - SOUTH 6 - NORTHWEST BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT FROM 2 TO 1 LOSS OR SHIFT 3 - EAST 7 - SOUTHEAST 24 - OTHER MOVABLE GBJECT 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 UNIT SPEED DETECTED SPEED 26-BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 51 - WALL 45 - EMBANKMENT STRUCTURE 1 - STATED / ESTIMATED SPEED 34 - MEDIAN GUARDRAIL SUPPORT 52 - BUILDING 46-FENCE 0,0,5 27 - BRIDGE PIER OR ABUTMENT BARRIER 40 - UTILITY POLE 53-TUNNEL 47 - MAIL BOX 2 - CALCULATED / EDR 28-BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 48 - TREE 54 - OTHER FIXED OBJECT 1 29-BRIDGE RAIL BARRIER POSTED SPEED 3 - UNDETERMINED OR SUPPORT 49-FIRE HYDRANT 99-OTHER / LINKNOWN 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 2 5 MOST HARMFUL EVENT J FIRST HARMFUL EVENT

OHIO DEPARTMENT OF PUBLIC SAFETY WITH MARKE PROFESSION	UNIT

_							[2,0,2,0,-,0]	0.0.0.1.0.3.6			
	0 2	OWNER NAME: LAST, FIRS	T, MIDDLE (SANE AS ORIVER)		OWNER PHONE: (NO.	EDE AREA CODE (SAME AS DRIVER)					
OWNER		DORESS: STREET, CITY, STATE	ZIP (SAME AS DRIVER)				DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE				
N O	20111570	Ital Aspaten					2 2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
	COMMERC	CIAL CARRIER: NAME, ADDR	ESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE		- UNKNOWN			
2	LP STATE	LICENSE PLATE #	VEHICLE	IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		MAGED AREA(S) TE ALL THAT APPLY			
				<u>l-l-l-l-l-l-l-l-l-l-l-l-l-l-l-l-l-l-l-</u>			12				
Î	INSURA!	INSURANCE COMP		SURANCE POLICY #	COLOR	VEHICLE MODEL	11 12	11 12			
ŀ	CE VERTITE	TYPE OF USE	IDE 92	234J259098 US DOT #	TOWED BY: COMPANY	4 NAME	10 11 1 2	10 11 1 2			
	COMME		IN EMERGENCY RESPONSE	1 1 1 1	TOWER BY: COMPAN	YNAME	9 9 3 3	9 9 3 3			
	INTERL	OCK		IICLE WEIGHT GVWR/GCWR	MATERIAL A	US MATERIAL CLASS # PLACARD ID #					
	DEVICE	HIT/SKIP UNIT	Г	1 - ≤10K LBS 2 - 10,001 - 26K LBS	L DELEASED	LASS W FLACARD ID W	8 7 5 4	8 7 1 5 4			
ŀ		1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS	18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	7 6 11	12 7 6			
	. 2. 3.	2 - PASSENGER VAN (MINIVAN)	8 - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19 - BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10	12 2			
	UNIT TYPE	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14-SINGLE UNIT TRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST	<i>-</i>	10 2 -			
		5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15-SEMI-TRACTOR 16-FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYCLE 27 - TRAIN	9	8 1 3			
ഥ		6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 4			
101		# OF TRAILING UNITS					12 7	5 12			
VEHICLE		WAS VEHICLE OPERATING IN AU			3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	11 12	5 11 12			
1	1 1	MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNKN	IOURI L		4 - HIGH AUTOMATION 5 - FULL AUTOMATION		10 1 2	10 1 1 2			
			MODE LEVEL	- CANTIAC AUTOMATION	J - FOLL ACTUMATION		9 3 3	9 9 3			
			6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11-FIRE	16 - FARM	21 - MAIL CARRIER	1 7	8 4			
		3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE		12 - MILITARY 13 - POLICE	17 - MOWING 18 - Snow Removal	99-OTHER/UNKNOWN		8 6 7 4			
	FUNCTION		9 - BUS - OTHER	14-PUBLIC UTILITY	19 - TOWING		6 5	7 6 5			
ŀ		5 - BUS - TRANSIT/COMMUTER		15-CONSTRUCTION EQUIPMENT				12 12 12			
		1 - NO CARGO BODY TYPE /NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	CHARGIE	B - POLE 9 - CARGOTANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12				
	CARGO BODY	BODY 4 - LOGGING 6 - CARGO VA-WENCLOSED BOX				2 H 2					
	TYPE			7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99-OTHER/UNKNOWN	900	3 9 1 3 9 3			
			4 - BRAKES 5 - STEERING		9 - MOTOR TROUBLE	99-OTHER/UNKNOWN	6	000			
			6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT			6 6 6			
2	0.0	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER	- NO DAMAGE [0] - UNDERCARRIAGE [14]			
	U 8,	CROCCINALIA	4 - MIDBLOCK - MARKED	7 - SHOULDER / ROADSIDE	10 - DRIVEWAY ACCESS AT INCIDENT SCENE 11 - SHARED USE PATHS OR 99 - OTHER / UNKNOWN TRAILS		TOP [13]	-ALL AREAS [15]			
	LOCATION AT IMPACT	PROCESSAL V	CROSSWALK 5 -TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK			UNIT NOT AT SCENE [16]				
	er kmrMVI		1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE			ped City in a bi Sopue [10]			
	3 .	2 - NON-COLLISION	2 - RACKING	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	INITIAL 0 - NO DAMAGI	POINT OF CONTACT			
	ACTION	3-STRIKING PRE-CRASH	3 - CHANGING LANES 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST	0 0	E 14 - UNDERCARRIAGE TO UNIT 15 - VEHICLE NOT AT SCENE			
		5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 - STANDING OUTSIDE	DIAGRA				
		& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	IN TRAFFIC	16 - WORKING 17 - PUSHING VEHICLE	DISABLED VEHICLE 99 - OTHER / UNKNOWN	13 - TOP				
			7 - LEFT OF CENTER	12-DALTERELOG	17 - VISION OBSTRUCTION			TRAFFIC			
			8-FOLLOWING TOO CLOSE / ACDA	PARKED POSITION	18 - OPERATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN			
	0,2		9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING	14-STOPPED OR PARKED ILLEGALLY	EQUIPMENT 19 - LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 2 - TWO-WAY	2 2 - SIGNAL 5 - YIELD SIGN			
S)	CONTRIBUTING		11 - DROVE OF FROAD	15 - SWERVING TO AVOID 16 - Wrong way	SPILLING	99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
		6 - IMPROPER TURN	12-IMPROPER BACKING	AU THRUNG WAT	20 - IN PROPER CROSSING		# OF THROUGH LANES	RAIL GRADE CROSSING			
EVENT	SEQUENCE	OF EVENTS		EVENTS			2	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING			
	1 1 5		6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	22 - WCRK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
			7 - SEPARATION OF UNITS B - RAN OFF ROAD RIGHT	TRAVEL	17 - ANIMAL — FARM 18 - ANIMAL — DEER	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NON	-MOTORIST DIRECTION			
	2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	19-ANIMAL - OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST			
		5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14-PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE CRIECT	FROM 3 TO	2 - SOUTH 6 - VORTHWEST 4 1 3 - EAST 7 - SOUTHEAST			
	3		60117676	15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE	ET-UTHER MOVABLE COJEC	FROM 10	4 - WEST 8 - SOUTHWEST			
	41 1 1	LODACH CHCHICA	31 - GUARDRAIL END	WITH FIXED OBJECT 37-TRAFFIC SIGN POST	43-CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN			
	·	Of DRIDGE OVERWEAD	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	34 - MEDIAN GUARDRAIL	SUPPORT	46 - FENCE	52-BUILDING	,0,0,5,	1 - STATED / ESTIMATED SPEED			
		50 SPIRSE SIGNATE	BARRIER 35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE	47 - MAILBOX 48 - TREE	53 - TUNNEL 54 - OTHER FIXED OBJECT		2 - CALCULATED/ EDR			
	6	29-BRIDGE RAIL	BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99-OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED			
	1 1		1				2 5				
		FIRST HARMFUL EVEN	MOST H	ARMFUL EVENT							

LOCAL REPORT NUMBER

ONIO DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
We will be the state of the sta							2,0,2,0,-,0,0,0,1,0,3,6,							
UNIT #								DATE OF BIRTH AGE GENDER						
	MILLS, RALPH, W								1,2,1,4,1,9,5,8,6,1, M					
-	S: STREET, CITY, STATE, ZIP SUMMIT ST 204, Kent, OH 44240								CONTACT	PHONE - INCLUDE AREA C	300E			
INJURIES	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME CITY) SAFETY EQUIPME									SEATING POSITION	AIR BAG	USAGE EJECTION	TRAPPED	
INJURIES 5	TAKEN BY USED USED 0 4							DOT-COMPLIANT 0 1 1 1 1						
OL STATE	E OPERATOR LICENSE NUMBER OFFENSE CHARGED					RGED	LOCAL	OFFENSE DESC	RIPTION		CITAT	ION NUMBER		
OL STATE	RD019.	353									H.			
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	-	COHOL MAR		CONDITION	STATUS TYPE VALUE STATUS TYPE RESU				SELECT UPTO 4	
4			_	1	01	THER DRUG		1						
UNIT#	NAME: (AST, F	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER	
0,2	SHARP	, SAMUEL, HAR	RLAN						0 3	0 4 1 9	9,9	20	M	
ADDRESS:	STREET, CITY, STA								CONTACT	PHONE - INCLUDE AREA CO	ODE.			
9 721 V		Kent ,OH 44240												
ADDRESS: 721 V INJURIES 3	TAKEN	ems agency (name) Kent Fire		INJURED	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED 9 9	DOT-Co	COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED IELMET 1 5			TRAPPED	
	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAR	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION NUMBER			
OL STATE	UJ9926	599		371.0	01		CODE	Right of Way	in Cros		662	66214		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		HOL / DRUG SUSPI		CONDITION	ALC STATUS T	OHOL TEST	STATUS I	DRUG TEST(S)	SELECT UP TO 4	
4			BY	1		LCOHOL MAR THER DRUG	RIJUANA	1	1	1	1			
UNIT#	NAME: LAST, F	FIRST, MIDDLE				TIER BROG				DATE OF BIRTH		AGE	GENDER	
ADDRESS:	STREET, CITY, ST	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
ADDRESS:														
INJURIES	INJURED I	EMS AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-Co	SEATING POSITION	AIR BAG	USAGE EJECTION	TRAPPED	
<u> </u>	BŸ								MC HELMET					
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAR	RGED	D LOCAL OFFENSE DESCRIPTION CODE				CITAT	10N NUMBER		
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	UD TO 2 BDI	IVER	ALCC	HOL / DRUG SUSPI	FOTED	CONDITION	ΔLC	OHOL TEST		DRUG TEST(S)		
OF OFWOO	SELECT UP TO 2	NEOWING THE SELECT		TRACTED	-	COHOL MAS		CONDITION	STATUS T		STATUS		PETERS BASIN &	
لبيبا			ا اسا		01	THER DRUG						ــالــالــــا		
1- FATAL	JRIES	SEATING POSITION 1-FRONT-LEFT SIDE	1 - NOT DE	AIR BAG	92.4 Miles	OL CLASS 1-CLASS A	S	OL RESTRIC		DRIVER DISTRACT	The Parket of th	TEST STAT	rus	
The same of the sa	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOY	THE THE STATE OF STREET		· 2 - CLASS B		2 - CDL INTRASTAT	No. of the last of	2 - MANUALLY OPERATING	3 AN	2 - TEST REFUSED		
3 - SUSPECTED 4 - POSSIBLE IN	A STATE OF THE PARTY.	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOY	STREET, THE PAR	NT/SIDE	3 - CLASS C 4 REGULAR CLASS		3 - CORRECTIVE LE	DEVICE (TEXTING, TYPING, SAMPLE / L			3 TEST GIVEN, CONT SAMPLE / UNUSAE		
5 - NO APPAREN	The said of the sa	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	THE WEST	(OUTO D)			5 - EXCEPT CLASS	UIALING)			PVSEMME			
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOY	MENT UNKN	OWN	5 - M/C-MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS / & CLASS B BUS	1	COMMUNICATION DEVI	CE	5 TEST GIVEN, RESU UNKNOWN	ILTS	
1 - NOT TRANSP		6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	-	JECTION	100	OL ENDORSEI	MENT	7 - EXCEPT TRACTO	R-TRAILER	COMMUNICATION DEVI	CE	ALCOHOL TES	TTYPE	
2 - EMS	II SCLIVE	(MOTORCYCLE SIDE CAR)	1 - NOT EJE			H - HAZMAT	IN EIN I	8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY, WITH ELECTRONIC DEVICE		1 - NONE		
3 - POLICE	/Nations	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE,	200	LLY EJECTED		M - MOTORCÝČLE		9-LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER	A	2 - BLOOD 3 - URINE		
9-OTHER/UNK		10 - SLEEPER SECTION	3-TOTALLY			P - PASSENGER N - TANKER		10 - LIMITED TO DAY	LIGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE		4 - BREATH		
SAFETY E 1-NONE USED	QUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER	Ţ	RAPPED		Q - MOTOR SCOOTER	3	11 - LIMITED TO EMP 12 - LIMITED - OTHE		8 - OTHER DISTRACTION O THE VEHICLE	UTSIDE	5-OTHER		
Table NAZBURNIS	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT BUS,	1 - NOŢTRA	Manager Commission of the Comm		R-THREE WHEEL MO S-SCHOOL BUS	TORCYCLE	13 - MECHANICAL DI	VICES	9 - OTHER / UNKNOWN		DRUG TEST	TYPE	
3 - LAP BELT ON	NLY USED & Lap Belt USED	PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2 - EXTRIC	ATED BY NICAL MEANS		T - DOUBLE & TRIPLE		(SPECIAL BRAKI CONTROLS, OR O	THER	CONDITION	100	2 - BLOOD		
5 - CHILD REST	RAINT SYSTEM -	CARGO AREA 13-TRAILING UNIT	3 - FREED I	A STATE OF THE STA		X - TANKER / HAZMAT		ADAPTIVE DEVI		1 - AP.PARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN	Control of	3 - URINE 4 - OTHER		
	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR	THE STATE	and I		GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	TUOHTIW 2	3 - EMOTIONAL (E.G., DEPRE	SSED,		CIUTO	
REAR FACIN	IG	(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO	R	ANGRY, DISTURED) 4-ILLNESS	25 miles	DRUG TEST RES 1-AMPHETAMINES	SULT(S)	
8 - HELMET US		99 - OTHER / UNKNOWN			7	U - OTHER / UNKNOWN		17 - PROSTHETIC AIR)	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		2 - BARBITURATES		
9 - PROTECTIVE (ELBOW, KNI								10.01UEK		6- UNDER THE INFLUENCE		3 - BENZODIAZEPINE 4 - CANNABINOIDS	S	
10 - REFLECTIVE	E CLOTHING									OF MEDICATIONS / DRU / ALCOHOL	៤ ۵	5 - COCAINE		
11 - LIGHTING - / BICYCLE OF										9-OTHER/UNKNOWN		6 - OPIATES / OPIOIDS 7 - OTHER		
99 - OTHER/UNK											10000	B - NEGATIVE RESULT	TS	

	DISCOURANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER						
								2 0 2 0 - 0 0 0 0 1 0 3 6					
	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER					
l I													
AN	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
OCCUPAN													
o I	JURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR RAG USAGE	EJECTION	TRADDED	
		TAKEN BY				, , , , , , , , , , , , , , , , , , , ,	USED	DOT-COMPLIANT		ATT BAG GOAGE	ESCUTION	INAFFED	
	UNIT #	NAME LAS	Y SIRES AVERAGE							بـــــــ			
	OMII #	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
<u>-</u> L													
IPA	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE			
OCCUPAN													
ľ	VJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
L		BY					0350	MC HELMET	ļ.,,				
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
I,									L O. DIKIII		AGE	GENDER	
F -	DDRESS:	STREET, CITY,	STATE, 7IP					L. I I					
OCCUPAN		, , , , , ,						CONTACT PHONE	INCLUDE AREA CO	DE			
9 ,	VILIDIES	INJURED	EMS AGENCY (NAME)		IN HUDED TAKEN TO SE. F.		I at a second						
•	WONIES	TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
								MC HELMET	سيسا				
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
L									1 1 1				
OCCUPAN	DDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE			
0.00													
I	JURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
١,		TAKEN BY				i isi	USED	DOT-COMPLIANT MC HELMET		ALK BAG GOAGE	Coconton	INAFFED	
		INJU	JRIES	SAFET	' EQUIPMENT USED		SEATING POS			AIR BAG U	CACE		
8	1 - FATA	L		1 - NONE US	ED-		T - LEFT SIDE			Getti, un ti	AND		
8	2 - SUSI	PECTED SE	RIOUS INJURY	VEHICLE	OCCUPANT		ORCYCLE DRIV	ER) 2 DEDLOYED FRONT					
3	3 - SUSI	PECTED MI	NOR INJURY	2 - SHOULDE	R BELT ONLY USED		T - MIDDLE	2 - DEPLOYED FRONT					
2	4 - POSS	SIBLE INJU	RY	3 - LAP BELT	ONLY USED	3 - FRONT - RIGHT SIDE 3 - DEPLOYED SIDE 4 - SECOND - LEFT SIDE 4 - DEPLOYED BOTH							
	5 - NO A	PPARENT I	INJURY	4 - SHOULDE	R & LAP BELT USED	4 - SECOND - LEFT SIDE 4 - DEPLOYED BOTH (MOTORCYCLE PASSENGER) FRONT/SIDE							
2	al para			The second secon	STRAINT SYSTEM -	5 - SECO	ND - MIDDLE	5 - NOT APPLICABLE					
100		A Park Table	TAKEN BY	FORWARI			ND – RIGHT SIC	9 - DEPLOYMENT UNKNOWN					
		TRANSPOR ATED AT S		6 - CHILD RE	STRAINT SYSTEM -		D – LEFT SIDE ORCYCLE SIDE						
8	2 - EMS			7 - BOOSTER		District Contracts	D - MIDDLE	EJECTION					
1	3 - POLI	ĊE		8 - HELMET		9 - THIR	D - RIGHT SIDE						
1		ER / UNKNO	IWN		IVE PADS USED	TO STREET LEADING	PER SECTION O	맛이 있다면 살아 다른 아니라 사람이 가는 것으로 가고 있었다.					
6					KNEES, ETC.)		ENGER IN OTHI O AREA (NON-TR	ER ENCLOSED 3 - TOTALLY EJECTED					
17	10 - 17		IDER	10 - REFLECT	IVE CLOTHING		ICK UP WITH CAP						
110	F-FEMA			11- LIGHTING	- PEDESTRIAN		ENGER IN UNE O AREA	NCLOSED TRAPPED					
100	Contract of	R / UNKNO	WN	/ BICYCL			LING UNIT	1 - NOTTRAPPED					
1				99 - OTHER /	JNKNOWN		IG ON VEHICLE	EXTERIOR 2 - EXTRICATED BY MECHANICAL				AL	
4							TRAILING UNIT)	MEANS 3 - FREED BY NON-MECHANICAL					
13							MOTORIST		3 - FREED MEANS		CHANICA	1L	
	IAME-1AG	ST, FIRST, MIDD	I F			77 - UI HE	R/UNKNOWN			13.88 EAR		portal de la companya	
				ATRICK					E OF BIRTH	0 0	AGE	GENDER	
P4-	MACMILLAN, OWEN, PATRICK ADDRESS: STREET, CITY, STATE, ZIP							0 6 1			2.1	_M_	
3	335 E SUMMIT ST ,Kent, ,OH 44240							SOM ING I PHUNE	- INCLUDE AREA COI	Jt.			
_		T, FIRST, MIDD		77270				1	F OF PURT			- 1 - 1	
								DATE OF BIRTH AGE GENDER					
_	ADDRESS: STREET, CITY, STATE, ZIP							ONTACT PHONE - INCLUDE AREA CODE					
3	328 S WILLOW ST ,Kent, ,OH 44240							CONTACT PHONE	- INCLUDE AREA COI	DE			
_	•	T, FIRST, MIDD		,011 77470								1	
		ŒR, JA							E OF BIRTH	7 0	AGE	GENDER	
		STREET, CITY,						0 5 2 2 1 9 7 0 4 9 M					
3				minderville	OH 44202			CONTACT PHONE - INCLUDE AREA CODE					
L	3609 NAUTILUS TRL ,Reminderville, ,OH 44202											1	



CONTINUES SAFETY Narrative Continuation

LOCAL REPORT NUMBER

2,0,2,0,-,0,0,0,1,0,3,6,

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