OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*							
PHOTOS TAKEN OH-2 OH-3	LOCAL INFORMATION			$2 \cdot 0 \cdot 2 \cdot 3$	- <sub>1</sub> <b>0</b> <sub>1</sub> <b>0</b> <sub>1</sub> <b>0</b> <sub>1</sub>	$10 \cdot 1 \cdot 4 \cdot 4 \cdot 7 \cdot 7$		
SECONDARY CRASH	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 L 2 - UNSOLVED	0_2	0 1 98 - ANIMAL 99 - UNKNOWN		
1 - CITY	, VILLAGE, TOWNSHIP*			CRASH DATE /1	00000000000000000000000000000000000000	1 - FATAL		
6,7 1 2-VILLAGE Kent				2 - SERIOUS INJURY				
S-SOUTH	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		SUSPECTED  3 - MINOR INJURY		
M - ME21	WATER		ST	41,1,14,0		SUSPECTED		
S-SOUTH	REFERENCE ROAD NAME (ROAD,	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE D		4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE		
E - EAST W-WEST	1412		ســــا	-8 <sub>1</sub> ,3 <sub>5</sub> 6	8,6,0	ONLY		
REFERENCE POINT DIRECTION  1 - INTERSECTION FROM REFERENCE N NORTH IR -	ROUTE TYPE INTERSTATE ROUTE(TP) AL	- ALLEY HW- HIGHWAY	RD - ROAD		INTERSECTION REL			
3 2-MILE POST S-SOUTH US-			SQ - SQUARE	WITHIN INTE	RSECTION OR ON AP	PROACH		
	STATE ROUTE		ST - STREET TE - TERRACE	WITHIN INTE	RCHANGE AREA	NUMBER OF APPROACHES		
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE CT		TL - TRAIL		ROADWAY			
2-FEET	ROUTE	- DRIVE PI - PIKE - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	IDED			
LOCATION OF FIRST HARMFUL EVENT		NER OF CRASH COLLISION/IMPA	LCT.	DIRECTION OF TRAVE		FRIANTVOF		
1 - ON ROADWAY 9 - CROSSOVER	1 - NOT	COLLISION 4 - REAR-TO-REAR		N - NORTH		EDIAN TYPE DED FLUSH MEDIAN		
0 1 2- ON SHOULDER 10-DRIVEWAY/	TWO	WEEN 5-BACKING MOTOR ICLES IN 6-ANGLE		S-SOUTH	1 1	FEET ) DED FLUSH MEDIAN		
4 - ON ROADSIDE 12-SHARED US	E PATHS OR TRAI	NSPORT 7 - SIDESWIPE, SAN		E - EAST W - WEST	(≥4	FEET)		
5-ON GORE TRAILS 6-OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAF 3 - HEAI	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]			4 - DIVII	DED, DEPRESSED MEDIAN DED, RAISED MEDIAN		
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99-OTHER / UN						TYPE) :R/UNKNOWN		
D-SIT KAMP	WORK ZONE TYPE	LOCATION OF CRASH IN W	NDK ZONE	CONTOUR	CONDITIONS	SURFACE		
	LANE CLOSURE	1 - BEFORE THE 1ST		1 1	1	2		
	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING SIGN 2 - ADVANCE WARNI	NG AREA	1 - STRAIGHT LEVEL	1 - DRY	1-CONCRETE		
LAW ENFORCEMENT PRESENT	OR MEDIAN	3 - TRANSITION ARE	A	2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP,		
The state of the s	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AREA 5 - TERMINATION AR	ŧΕΑ	3 - CURVE LEVEL	3 - SNOW	ASPHALT		
LIGHT CONDITION	WEATHE	FR		4 - CURVE GRADE 4 - ICE 3 - BRICK/BL 9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, 4 SLAC CR				
1 - DAYLIGHT	1-CLEAR	6 - SNOW		7 - OTHEROGNICIOWIN	OIL, GRAVEL	4 - SLAG, GRAVEL, STONE		
1 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	0 1 2-CLOUDY	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIR	r. snow		6 - WATER (STANDI MOVING)	NG, 5 - DIRT		
4 - DARK – ROADWAY NOT LIGHTED	4 - RAIN	9 - FREEZING RAIN OR FREEZ			7 - SLUSH	9 - OTHER/UNKNOWN		
5 - DARK — UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOW	'N		
NARRATIVE						Indicate the north		
UNIT 1 WAS LEAVING 1412 S	WATED ST				1	direction with an "N" on the		
						compass diagram.		
ENTERING THE ROADWAY	OF S WATER ST.							
UNIT 2 WAS ALREADY TRAV	ELING SB ON S		_	1 ! [	1	(\$Z		
WATER ST IN THE LEFT LA	NE. UNIT 1	1412SWATER	RST.(SR43)	UNIT	SWAT			
PULLED OUT ONTO S WATE	R ST TO GO SB				SWATERST (SR43)			
AND STRUCK UNIT 2. UNIT	1 WAS CITED				1 5			
FOR FTY - ENTERING ROAI								
FOR FIT - ENTERING ROAL	JWAI.			1 1	RE	ELLIMDR.		
					· ·	81 <u>\$2</u>		
					^	lot To Scale		
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	.	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY		
0.9.1.0.2.0.2.3./.1.5.0.6.0.9.1.	0,2,0,2,3,/,1,5,0,8	0,9,1,0,2,0,2,3,/,1	5,1,2,0	9,1,0,2,0,2,3	3 <sub>1</sub> / <sub>1</sub> 1 <sub>1</sub> 6 <sub>1</sub> 0 <sub>1</sub> 4 <sub>1</sub>	X POLICE AGENCY		
TOTAL TIME OTHER TOTAL	OFFICER'S NAME*	С	HECKED BY OFFI	CER'S NAME*		MOTORIST		
ROADWAY CLOSED INVESTIGATION TIME MINUT	widdle, wiatthe	000 000	aydosh,	•	WARE &	SUPPLEMENT (CORRECTION OR ADDITION		
		DGE NUMBER*	2 1 1	SY OFFICER'S BADGE N	IUMBER*	TO AN EXISTING REPORT SENT TO ODPS)		

LOCAL REPORT NUMBER 2 . 0 . 2 . 3 . - . 0 . 0 . 0 . 1 . 4 . 4 . 7 . 7 DAMAGE OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) OWNER PHONE: INCLUDE ASEA CODE ( SAME AS Redacted per ORC 149.43(A)(1) RIDDLE, ROSILEE, M DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP ( SAME AS DRIVER) 3 - FUNCTIONAL DAMAGE 1 - NONE 2 5526 5 ,Ravenna Twp ,OH 44266 □ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) INDICATE ALL THAT APPLY **VEHICLE IDENTIFICATION #** VEHICLE MAKE LP STATE LICENSE PLATE # VEHICLE YEAR 2 0 1 8 Honda 7, F, AR, W2, H, 5, 9, J, E 1, 0, 2, 1, 9, 4 O H HPL5422 INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MODEL INSURANCE VERIFIED PROGRESSIVE SIL CRV TYPE OF USE US DOT# TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK DEVICE EQUIPPED MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS RELEASED HIT/SKIP UNIT 2 - 10.001 - 26K LBS  $0_{\perp}1$ 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 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNITTYPE 4 - PICKUP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 -TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV/UTV) 0 # of TRAILING UNITS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION AUTONOMOUS 2 - PARTIAL AUTOMATION 1-YES 2-NO 9-0THER/UNKNOWN 5 - FULL AUTOMATION MODE LEVEL 16-FARM 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 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 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER 0.1 / NOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY \* 7 - GRAIN/CHIPS/GRAVEL 11-DUMP 99-OTHER / UNKNOWN 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR VEHICLE 2 - HEAD LAMPS 5 - STEERING DEFECTIVE ACCIDENT **DEFECTS 3-TAIL LAMPS** 6 - TIRE BLOWOUT - NO DAMAGE [ 0 ] - UNDERCARRIAGE [14] 3 - INTERSECTION - OTHER 9 - MEDIAN/CROSSING ISLAND 1 - INTERSECTION - MARKED 6 - BICYCLE LANE 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE ☐-TOP [13] - ALL AREAS [ 15 ] 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS NON-MOTORIST 2-INTERSECTION - UNMARKED 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11-SHARED USE PATHS OR LOCATION CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS 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 0 5 3 - CHANGING LANES 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 3\_\_ 0 - NO DAMAGE 14 - UNDERCARRIAGE 19-STANDING SPECIFIED LOCATION 3-STRIKING 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13-TOP 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS TRAFFIC 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY 1-NONE 7 - LEFT OF CENTER TRAFFIC CONTROL TRAFFICWAY FLOW PARKED POSITION 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED EQUIPMENT 23 - OPENING DOOR INTO 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 0 2 2 - TWO-WAY 2 - SIGNAL 5 - YIELD SIGN 2 ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # of THROUGH LANES RAIL GRADE CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 4 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 1 2 0 1 - OVERTURNIROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE 11 - CROSS CENTERLINE -EQUIPMENT OPPOSITE DIRECTION OF 17 - ANIMAL - FARM 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS TRAVEL 23 - STRUCK BY FALLING, **UNIT / NON-MOTORIST DIRECTION** 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGOOR 1 - NORTH 5 - NORTHEAST

2 		4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24-OTHER MOVABLE OBJECT	FROM 4 TO 2	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
l			COLLISIO	N WITH FIXED OBJE	CT - STRUCK			9 - OTHER / UNKNOWN
4	$\perp$	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE - EQUIPMENT	UNIT SPEED	DETECTED SPEED
5	ш	26-BRIDGE OVERHEAD STRUCTURE 27-BRIDGE PIER ORABUTMENT	DANNILN	39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE	45 - EMBANKMENT 46 - FENCE 47 - MAILBOX	51 - WALL 52 - BUILDING 53 - TUNNEL		3 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR
6∟		28-BRIDGE PARAPET 29-BRIDGE RAIL 30-GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	48-TREE 49-FIRE HYDRANT	54-OTHER FIXED OBJECT 99-OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED
<u>L</u>		FIRST HARMFUL EVEN	NT 1 MOST F	IARMFUL EVENT			2 5	
L	1		1				2 5	DACE 2 OF

LOCAL REPORT NUMBER 2 . 0 . 2 . 3 . - . 0 . 0 . 0 . 1 . 4 . 4 . 7 . 7 OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER OWNER PHONE: INCLUDE AFEA CODE ( SAME AS DE DAMAGE Redacted per ORC 149.43(A)(1) ALENAZI, MARAM, FAWAZ DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 2 6095 PEBBLEBROOK LN 4, Franklin Twp, OH 44240 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE 1,B3,CC4,F,B3,A,N1,1,3,9,0,5 2 0 1 0 Dodge O H JZS5995 INSURANCE POLICY # INSURANCE VERIFIED INSURANCE COMPANY COLOR VEHICLE MODEL GENERAL AVENGER 1G-OH-6106830 GLD TYPE OF USE US DOT# TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK DEVICE EQUIPPED MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS. HIT/SKIP UNIT 2 - 10,001 - 26K LBS. 0,2PLACARD 」 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-RUS (16+ PASSENGERS) 24 - WHEFI CHAIR (ANY TYPE) 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 -TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - LINKNOWN 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? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION AUTONOMOUS 2 - PARTIAL AUTOMATION 1-YES 2-NO 9-0THER/UNKNOWN 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN 0 1 2 - TAXI 7 - BUS - INTERCITY 13 - POLICE 18-SNOW REMOVAL 19-TOWING 9 - BUS - OTHER 14 - PUBLIC UTILITY 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 1 - NO CARGO BODY TYPE 8 - POLE 12 - CONCRETE MIXER 0.1 / NOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER CARGO 2 - RUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY \* 7 - GRAIN/CHIPS/GRAVEL 11-DUMP 99-OTHER / UNKNOWN 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR 5 - STEERING DEFECTIVE ACCIDENT 6 - TIRE BLOWOUT -NO DAMAGE [ 0 ] - UNDERCARRIAGE [14] 3 - INTERSECTION - OTHER 9 - MEDIAN/CROSSING ISLAND 1 - INTERSECTION - MARKED 6 - BICYCLE LANE 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE ☐-TOP [13] - ALL AREAS [ 15 ] 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11 - SHARED USE PATHS OR CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS 1-NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 14 - ENTERING OR CROSSING 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 0 1 3 - CHANGING LANES 14 - UNDERCARRIAGE 0 - NO DAMAGE 4 19-STANDING SPECIFIED LOCATION 3-STRIKING 9 - LEAVING TRAFFIC LANE 0 5 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13-TOP 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 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 TRAFFIC CONTROL TRAFFICWAY FLOW PARKED POSITION 18-OPERATING DEFECTIVE 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED EQUIPMENT 2 - TWO-WAY 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL 15 - SWERVING TO AVOID SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # of THROUGH LANES RAIL GRADE CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED

OFF DEPARTMENT MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER									
Washington IAIOIOKI21 / IAON-IAIOIOKI21						2 . 0 . 2 . 3 0 . 0 . 0 . 1 . 4 . 4 . 7 . 7									
UNIT#	and the control and the same. We as imposed company of the control							DATE OF BIRTH AGE GENDER							
0,1	RIDDLE, ROSILEE, M							0 4 0 1 1 9 4 2 8 1 F							
ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE Redacted per ORC 149.43(A)(1)							
0		,Ravenna Twp ,O	H 4420	66					Reda						
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED1	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	USED	Прот-с∘	MPLIANT	SITION AIR B	AG USAGE	EJECTION	TRAPPED	
	BY						T	0,4		LMET 0	1	1	1_1_	<u> </u>	
OL STATE	REDAC	LICENSE NUMBER OTED PER ORC 450	1:1-12	OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC			26277				
O H		-					X	Driving onto	Roadway  ALCOHOL TEST			DRUG TEST(S)			
OL CLASS	SELECT UP TO 2			TRACTED		CHOL / DRUG SUSPI	RIJUANA	CONDITION	STATUS T		STATUS			SELECTUPTO4	
4				1	=	THER DRUG		1	1	1	1	1	عاتات	لــالــالــ	
UNIT #	NAME: LAST	FIRST, MIDDLE								DATE OF BIRT	Н		AGE	GENDER	
0,2	ALEN	AZI, MARAM, F	AWAZ						0 5 1 7 1 9 9 3 3 0 F					F	
ADDRESS:	STREET, CITY, S	STATE, ZIP							7.5	PHONE - INCLUDE A					
6095 I	PEBBLI	EBROOK LN 4 ,F	rankli	in Tw	O, o	H 44240			Red	acted per	ORC	149	9.43(A)	۱ (1)(۸	
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED1	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	□ DOT-C	SEATING PO	SITION AIR B	AG USAGE	EJECTION	TRAPPED	
2 5	BY							0,4	<b>Ш</b> мс не	LMET 0	1	1 1 1			
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OH			1.1-12												
OL CLASS	SELECT UP TO 2		DIS	VER TRACTED	_	CHOL / DRUG SUSP	ECTED RIJUANA	CONDITION	STATUS T	YPE VALUE	STATUS		G TEST(S RESULT	SELECTUPTO4	
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UNIT#	NAME: LAST	FIRST, MIDDLE								DATE OF BIRT	<u> </u>		AGE	GENDER	
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ADDRESS:	STREET, CITY, S	STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
TOR									1 1	1 1 1	1	1	1 1		
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	SEATING PO	SITION AIR B	AG USAGE	EJECTION	TRAPPED	
	BY					USED L. I			MC HELMET					نـــــا	
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CIT	ATION N	IUMBER		
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OL CLASS	SELECT UP TO 2		DIS	VER TRACTED	_	CHOL / DRUG SUSP	ECTED RIJUANA	CONDITION	STATUS T	YPE VALUE	STATUS		RESULT	SELECTOPIO4	
			BY	- 1	=	THER DRUG	NOONIA		l	_ •	ılı.	ılı.		11 11 1	
INJU	RIES	SEATING POSITION	A	IR BAG		OL CLAS	s	OL RESTRIC	TION(S)	DRIVER DIST	RACTION		TEST STA		
1 - FATAL	ernioue iniliny	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP			1 - CLASS A		1 - ALCOHOL INTER		1 - NOT DISTRACTED			NE GIVEN		
3 - SUSPECTED	SERIOUS INJURY Minor injury	2 - FRONT - MIDDLE	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPER ELECTRONIC COM	MUNICATION	3-TES	ST REFUSED ST GIVEN, CON		
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		ED BOTH FRO	NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DEVICE (TEXTIN DIALING)	G, IYPING,		MPLE / UNU SA ST GIVEN, RES		
5 - NO APPAREN	TINJURY	(M0TORCYCLE PASSENGER)	5 - NOTAPP 9 - DEPLOYE	LICABLE MENT UNKNO	WN	5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 - TALKING ON HAN COMMUNICATION		5 - TES	T GIVEN, RES		
	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS		4 - TALKING ON HAN COMMUNICATION		UNI	KNOWN		
1 - NOT TRANSP /TREATED AT	Programme and the second	7 - THIRD - LEFT SIDE	EJ	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		5 - OTHER ACTIVITY	WITH AN	ALC 1 - NO	OHOL TES	ST TYPE	
2 - EMS		(MOTORCYCLE SIDE CAR) 8-THIRD – MIDDLE	1 - NOTEJE			H - HAZMAT		RESTRICTIONS 9-LEARNER'S PER	MIT	6 - PASSENGER	/ICE	2 - BL0			
3 - POLICE 9 - OTHER / UNK	NOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY	LY EJECTED EJECTED		M - MOTORCYCLE P - PASSENGER		RESTRICTIONS	MII	7 - OTHER DISTRACT		3 - URI			
SAFETY F	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP	LICABLE		N - TANKER		10 - LIMITED TO DAY		INSIDE THE VEHI		4 - BRI 5 - OTH			
1 - NONE USED	3011 111 2111	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	T	RAPPED		Q - MOTOR SCOOTER  R - THREE-WHEEL MC	TORCYCLE	12 - LIMITED - OTHE		THE VEHICLE	an a	D	RUG TEST	TYPE	
2 - SHOULDER B		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA			S - SCHOOL BUS		13 - MECHANICAL DI (SPECIAL BRAK		9 - OTHER / UNKNOW	YN	1 - NOI		ALC: U	
3 - LAP BELT ON 4 - SHOULDER &		12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	IICAL MEANS		T - DOUBLE & TRIPLE X - TANKER / HAZMAT		CONTROLS, OR O	THER	1 - APPARENTLY NO	Althor comme	2 - BL0			
5 - CHILD RESTE FORWARD FA		CARGO AREA 13 - TRAILING UNIT	3- FREED B NON-ME	IY Chanical Mi	EANS		hien hip	14 - MILITARY VEHI	CLES ONLY	2 - PHYSICAL IMPAI		3 - URI 4 - OTH			
6 - CHILD RESTE	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G., ANGRY, DISTURBED)	DEPRESSED,	DRU	G TEST RE	SULT(S)	
7 - BOOSTER SE		(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16-OUTSIDE MIRRO		4 - ILLNESS		D07-8140-00-0	PHETAMINES		
8 - HELMET USI		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER		5 - FELL ASLEEP, FAI FATIGUED, ETC.	NTED,		RBITURATES NZODIAZEPIN	E¢.	
9 - PROTECTIVE (ELBOW, KNE								The state of the s		6 - UNDER THE INFL OF MEDICATIONS			NZODIAZEPIN NNABINOIDS	L3	
10 - REFLECTIVE	CLOTHING									/ALCOHOL		5 - 000			
11 - LIGHTING - F / BICYCLE ON										9-OTHER/UNKNOW	N	6 - OPI 7 - OTH	ATES / OPIOID HER	)\$	
99 - OTHER / UNK													GATIVE RESUI	LTS	

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OHIO D OF PUB SAFETY - SE	OCCUPANT / WITNESS ADDENDUM					LOCAL REPORT NUMBER							
	TOTAL TOTAL TOTAL TOTAL THE TOTAL TO						$2 \cdot 0 \cdot 2 \cdot 3$		0,1,4				
UNIT #	130000000000000000000000000000000000000						DATE OF BIRTH AGE GENDER						
	02 ALENAZI, ASEEL, HANI							1,1,0,1,2,0,2,1,0,1, M					
ADDRESS: STREET, CITY, STATE, ZIP 6095 PEBBLEBROOK LN 4 ,Franklin Twp ,OH 44240						CONTACT PHONE - INCLUDE AREA CODE							
3			4 ,Franki			Tax ==== = =				I I	Ivacanea		
<u></u>	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facil	LITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGI	EJECTION	TRAPPED		
5_						0,5		0,4	L		L		
UNIT #	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
							CONTACT PURPLE						
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE								
TNIIIDIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL		SEATING POSITION	AID DAG HEAGI	EJECTION	TRAPPED				
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ONII #	NAME: LAS	I, FIRST, WIDDLE					DAI	E OF BIKTH		AUE	GENDER		
ADDRESS	S: STREET, CITY,	STATE 7IP					CONTACT PHONE	- INCLUDE AREA CO	DE L				
ADDRESS	, , , , , , , , , , , , , , , , , , , ,							mocooc mo.					
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	TAKEN					USED	DOT-COMPLIANT MC HELMET			, ,	, ,		
UNIT #	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
ADDRESS	S: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
ADDRESS													
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	BY					USED	MC HELMET			ر ا			
	INJU	JRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG L	SAGE			
1 - FAT			1 - NONE US	ED - OCCUPANT		T – LEFT SIDE ORCYCLE DRIV	FR)	1 - NOT DE	PLOYED				
10 TO	2 - SUSPECTED SERIOUS INJURY			ER BELT ONLY USED 2 - FRONT – MIDDLE			2 - DEPLOYED FRONT						
100000		INOR INJURY		LT ONLY USED 3 - FRONT - RIGHT SIDE									
	SIBLE INJU APPARENT		4 - SHOULDI	ER & LAP BELT USED 4 - SECOND - LEFT SID (MOTORCYCLE PASS			- FRANKIOTE						
3-110		所 <b>国际</b> 进制 民		ESTRAINT SYSTEM - 5 - SECOND - MIDDLE				5 - NOT AP	PLICABLE	BLE			
1 NOT		TAKEN BY		RD FACING 6 - SECOND - RIGHT SIZ ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE			7 DEL COTWIENT ONKNOWN						
BETTER 1000 1000 1000 1000 1000 1000 1000 10	TRANSPOR EATED AT S		REAR FA	ACING (MOTORCYCLE SIDE			CAR) EJE			ECTION			
2 - EM	S		7 - BOOSTER	R SEAT 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SI				1 - NOT EJ	EJECTED				
3 - P0L	ICE		8 - HELMET	T USED 10 - SLEEPER SECTION (			2 - PARTIALLY			/ EJECTED			
9 - OTH	IER / UNKNO	OWN		TIVE PADS USED KNEES, ETC.)		ENGER IN OTH	ALL THE LINET						
Total States		NDER		TIVE CLOTHING		PICK-UP WITH CAF							
F - FEM M - MAL				G – PEDESTRIAN		ENGER IN UNE O AREA							
100	ER / UNKNO	WN	/ BICYCL			LING UNIT	1 - NOT TRAPPED				241		
			99 - OTHER /	UNKNOWN	14 - RIDING ON VEHICLE (NON-TRAILING UNIT)		EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS			JAL		
						MOTORIST		3 - FREED BY NON-MECI		CHANIC	AL		
					99 - OTHE	R / UNKNOWN		MEANS					
200000000000000000000000000000000000000	AST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
ADDRESS							DONALOZ BUONE						
ADDRESS	S: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
NAME	AST, FIRST, MIDD	u E					DAT	E OE BIRTH	<del></del>	AGE	GENDER		
	wi, rikai, midu	The table					DATE OF BIRTH AGE GENDI						
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
	NAME: LAST, FIRST, MIDDLE						DAT	E OF BIRTH		AGE	GENDER		
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE						

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