OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*									
X PHOTOS TAKEN X 0H-2 X 0H-3	2 0 2 1 - 0 0 0 1 5 2 5 5									
SECONDARY CRASH OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR 98 - ANIMAL				
PRIVATE PROPERTY	City of Kent Police	<u>0 t</u>	5 7 0 3	9 9 - UNKNOWN						
1-CITY 2-VILLAGE Kont	TY, VILLAGE, TOWNSHIP*			CRASH DATE /T		CRASH SEVERITY 1 - FATAL				
3-10WNSHIP	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		2 - SERIOUS INJURY SUSPECTED				
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	CUYAHOGA		$\mathbf{S} \cdot \mathbf{T}$			3 - MINOR INJURY				
	REFERENCE ROAD NAME (ROAD, MILEPOS	ST, HOUSE #)	ROAD TYPE	LONGITUDE DE		SUSPECTED 4 - INJURY POSSIBLE				
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	MANTUA		$\mathbf{S} \cdot \mathbf{T}$	- - - 8 1 3 5 9	2 . 9 . 3 .	5 - PROPERTY DAMAGE ONLY				
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE			INTERSECTION REL					
1-INTERSECTION N-NORTH IR	- INTERSTATE ROUTE(TP) AL - ALLEY - FEDERAL US ROUTE AV - AVENUE		- ROAD - SQUARE	X WITHIN INTER	RSECTION OR ON APP					
3-HOUSE # E-EAST	- STATE ROUTE BL - BOULEV	ARD MP-MILEPOST ST	-STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES						
FROM REFERENCE UNIT OF MEASURE	- NUMBERED COUNTY ROUTE CR - CIRCLE CT - COURT		DOLOWAY							
1 0 2 2-FEET 3-YARDS	-NUMBERED TOWNSHIP ROUTE ROUTE DR - DRIVE HE - HEIGHT		A - WAY	ROADWAY DIV	IDED	DED				
LOCATION OF FIRST HARMFUL EVEL		RASH COLLISION/IMPAC	Ţ	DIRECTION OF TRAVE	ME	DIAN TYPE				
1-ON ROADWAY 9-CROSSOVE 2-ON SHOULDER 10-DRIVEWAY	R 1 - NOT COLLISIC VALLEY ACCESS BETWEEN	ON 4-REAR-TO-REAR 5-BACKING		N - NORTH	1 - DIVID	ED FLUSH MEDIAN				
3-IN MEDIAN 11-RAILWAY	GRADE CROSSING TWO MOTOR VEHICLES IN			S - SOUTH E - EAST		ED FLUSH MEDIAN				
4 - ON ROADSIDE 12-SHARED U 5 - ON GORE TRAILS	2 - REAR-END	7 - SIDESWIPE, SAME 8 - SIDESWIPE, OPPOS		W - WEST	(≥4 F 3 - DIVID	EET) ED, DEPRESSED MEDIAN				
6 - OUTSIDE TRAFFIC WAY 13-BIKE LAND 7 - ON RAMP 14-TOLL BOOT	J-11LAU-011	9 - OTHER / UNKNOW	N			ED, RAISED MEDIAN TYPE)				
8-OFF RAMP 99-OTHER/U	NKNOWN				9 - OTHE	R/UNKNOWN				
WORK ZONE RELATED	WORK ZONE TYPE LOCAL LANE CLOSURE		N OF CRASH IN WORK ZONE CONTOUR CONDITIONS BEFORE THE 1ST WORK ZONE							
WORKERS PRESENT 2	LANE SHIFT/CROSSOVER	WARNING SIGN	WARNING SIGN							
LAW ENFORCEMENT PRESENT 3	OR MEDIAN	3-TRANSITION AREA	TRANSITION AREA 2-STRAIGHT GRADE 2-WET							
	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AREA 5 - TERMINATION ARE	ACTIVITY AREA							
LIGHT CONDITION	WEATHER		4 - CURVE GRADE 4 - ICE 3 - I							
1 - DAYLIGHT	1-CLEAR 6-SNO			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE				
2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY	0 1 2-CLOUDY 7-SEV 3-FOG, SMOG, SMOKE 8-BLO	ERE CROSSWINDS WING SAND, SOIL, DIRT, !	SNOW		6-WATER (STANDIN MOVING)	י ט-טואון				
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4-RAIN 9-FRE	EZING RAIN OR FREEZIN HER / UNKNOWN			7 - SLUSH	9 - OTHER/UNKNOWN				
9 - OTHER / UNKNOWN					9 - OTHER/UNKNOWN	V				
NARRATIVE				1000	G	Indicate the north				
Unit #1 was stopped at a Stop	Sign on Cuyahoga St at				7	an "N" on the compass diagram.				
N Mantua St. Unit #2 was or	a bicycle that was									
traveling NB on a sidewalk f	or N Mantua St at	milliodelina del partir del companyo del com								
Cuyahoga St. Unit #1 started	d to make a right turn			p 14	ř.					
onto N Mantua St as Unit #2	was riding across	N-⇒ Ma	eler	Civil 1	Curenage 31					
Cuyahoga St. Unit #1 struck				Une 2 Diesele	School	Bue 15				
sustained a scratch to both o		managaran			0 / 0]					
at fault is undetermined.			T.	1ĝ.						
				N Mentue	51					
Ofc. D. Oldham #218	The state of the s									
OIC. D. OIUHAIII #218										
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	T	SCENE CLEARED D	ATE / TIME	REPORT TAKEN BY				
	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		7.2.2 0			X POLICE AGENCY				
TOTAL TIME OTHER TOTAL	AL OFFICER'S NAME*	Сне	CKED BY OFFI	CER'S NAME*	1 0 7 4 2	MOTORIST				
ROADWAY CLOSED INVESTIGATION TIME MINU	Darrah, Benjamin OFFICER'S BADGE NUM		elson, Jo	── (CORRECTION OR)						
0 2 5 1 2 0 1 4		i .	_	Y OFFICER'S BADGE N	OMRFK.	TC AM EXISTING REPORT SENT TO COPS)				



2 + 0 + 2 + 1 + - + 0 + 0 + 0 + 1 + 5 + 2 + 5 + 5OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (X) SAME AS DRIVERS DAMAGE 0 1 KOHER, MELISSA, ANN DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 5701 ASHTON CIR, RAVENNA, OH 44266 LI 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 LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE FMB8023 $5_{\perp}J_{\perp}8_{\perp}Y_{\perp}D_{\parallel}4_{\perp}H_{\parallel}3_{\perp}0_{\perp}J_{\perp}L_{\parallel}0_{\perp}0_{\parallel}0_{\perp}2_{\parallel}8_{\parallel}6_{\parallel}$ O H 2 0 1 8 Acura INSURANCE COMPANY INSURANCE VERIFIED **INSURANCE POLICY #** COLOR VEHICLE MODEL Allstate 980 201 274 GRY MDX TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE HAZARDOUS MATERIAL INTERLOCK **VEHICLE WEIGHT GVWR/GCWR** #OCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - ≤10K LBS. 2 - 10,001 - 26K LBS HIT/SKIP UNIT RELEASED EQUIPPED PLACARD 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18-LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) B - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24-WHEELCHAIR (ANY TYPE) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14-SINGLE UNITTRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26-BICYCLE 5 - CARGO VAN BICYCLE 16-FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) ANIMAL-DRAWN VEHICLE 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / UTV) 1 0 # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 0 4 - HIGH AUTOMATION 2 __ 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 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 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER 0 . 1 I NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY * 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99-OTHER/UNKNOWN 00 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-DISARI FO FROM PRIOR DEFECTS 3 - TAIL LAMPS ACCIDENT 6 - TIRE BLOWOUT -NO DAMAGE [0] - UNDERCARRIAGE [141 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER CROSSWALK AT INCIDENT SCENE 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS -TOP [13] - ALL AREAS [15] NON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99-OTHER / UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION 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 OR LEAVING VEHICLE 8 - ENTERING TRAFFIC LANE 14-ENTERING OR CROSSING 3 0 5 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE ☐ 3-STRIKING SPECIFIED LOCATION 19-STANDING 9 - LEAVING TRAFFIC LANE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED 1 | 2 | DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 21 - STANDING DUTSIDE 99 - UNKNOWN 11 - SLOWING OR STOPPED 13 - TOP 16-WORKING & STRUCK DISABLED VEHICLE IN TRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 9 - OTHER / UNKNOWN 99 - OTHER / UNKNOWN 12 - DRIVERLESS TRAFFIC 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 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14-STOPPED OR PARKED 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE EQUIPMENT 23 - OPENING DOOR INTO 2 2 ILLEGALLY 2 - TW0-WAY 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** 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IM PROPER CROSSING 6 - IMPROPER TURN # OF THROUGH LANES 12 - IMPROPER BACKING RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2__ 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 1 1 5 1 - OVERTURN/ROLLGVER 6 - EQUIPMENT FAILURE 3 - INVOLVED-PASSIVE CROSSING 11 - CROSS CENTERLINE -16 - RAIL WAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF 2 - FIRE/EXP_OSION 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM EQUIPMENT. TRAVEL 23 - STRUCK BY FALLING UNIT / NON-MOTORIST DIRECTION 3 - IMMERSION 18-ANIMAL - DEER B - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST J 4 - JACKKNIFF 9 - RAN OFF ROAD LEFT 19-ANIMAL - OTHER 13-OTHER NON-COLLISION ANYTHING SET IN MOTION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - NORTHWEST 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT FROM 4 TO 2 LOSS OR SHIFT 3 - EAST 7 - SOUTHEAST 24-OTHER MOVABLE OBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43-CURB 50 - WORK ZONE MAINTENANCE / CRASH CUSHION 32 - PORTABLE BARRIER 38-OVERHEAD SIGN POST **EQUIPMENT** 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51 - WALL 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT STRUCTURE 1 - STATED / ESTIMATED SPEED SUPPORT 34 - MEDIAN GUARDRAIL 46-FENCE 52 - BUILDING 27 - BRIDGE PIER OR ABUTMENT <u>0</u>0,3, BARRIER 40 - UTILITY POLE ☐ 2 - CALCULATED / EDR 51-TIINNEL 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54-OTHER FIXED OBJECT 48-TREE 29 - BRIDGE RAIL 3 - UNDETERMINED BARRIER OR SUPPORT POSTED SPEED 99 - OTHER / UNKNOWN 49-FIRE HYDRANT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT , 2 , 5 , MOST HARMFUL EVENT → FIRST HARMFUL EVENT

LOCAL REPORT NUMBER

OF PU	UBLIC SAFETY UNIT					1	CAL REPORT NUMBER
						2,0,2,1,-	0,0,0,1,5,2,5,5,
UNIT #	OWNER NAME: LAST, FIR Faiz, Khalil	RST, MIDDLE (SAME AS DRIVER	9	OWNER PHONE: IN:	CLUCE AREA CODE (SAME AS DRIVER)		DAMAGE
OWNER A	DDRESS: STREET, CITY, STAT					2 1-NONE	3 - FUNCTIONAL DAMAGE
$\overline{}$	H ST ,Kent ,OH 442					3 2- MINOR D	
COMMEN	CIAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	R PHONE: INCLUDE AREA CODE		9 - UNKNOWN
LP STATE	LICENSE PLATE #	VEHICL	LE IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		DAMAGED AREA(S) ICATE ALL THAT APPLY
لبب	THE UDANCE COM				Shimano	12	12
INSURA VERIFI		PANY	INSURANCE POLICY #	BLK	VEHICLE MODEL	10 12	2 10 12 1
	TYPE OF USE	IN EMERCENCY	US DOT #	TOWED BY: COMPAN	IY NAME	10 1 2	10 2 2
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	TUTAL T WEIGHT CHAND COMP	HAZARD	OUS MATERIAL	9 9 3	3 9 9 3
INTER	E HIT/SKIP UNI	#ULCUPANIS	EHICLE WEIGHT GVWR/GCWR 1 - <10K LBS.	MATERIAL	CLASS # PLACARD ID #	B 7 5	
EQUIP	PED -	0,1	2 - 10,001 - 26K LBS J 3 - >26K LBS	S PLACARD	<u></u>	7 6 5	12 7 5
	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED B - MOTORCYCLE 3-WHEELED	12 - GOLF CART 13 - SNOWMOBILE	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6	11 12
2 6	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE		19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - Other Non-Motorist	1	10 1 2
UNIT TYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPED OR MOTORIZED Bicycle		21 - HEAVY EQUIPMENT	26-BICYCLE	9 (9 3
	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.	7 6 7
0	# OF TRAILING UNITS					12	7 6 12
	WAS VEHICLE OPERATING IN AL	ITONOMOUS	O - NO AUTOMATION	2 - CONDITIONAL AUTOMATION	O THINNWAN	11 12 1	6 5 11 12 1
	MODE WHEN CRASH OCCURREN	D?	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION	7 - UNATUWIT	10 11 1	2 10 11 1 2
	1-YES 2-NO 9-OTHER/UNK	11-ALL TERRAIN VEHICLE (ATV / UTV) S ULTONOMOUS DITONOMOUS DITONOMOUS 1 - ORIVER ASSISTANCE 4 - HIGH AUTOMATION 1 - ORIVER ASSISTANCE 4 - HIGH AUTOMATION 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION 5 - FUL					
7	1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	8 4 -	
0,1	2 - TAXI 3 - ELECTRONIC RIDE SHARING				99 - OT-LER / UNKNOWN	8 7 6 5	4 8 7 5 4
	4 - SCHOOL TRANSPORT	9 - BUS - OTHER				7 6	1 6
		10 - AMBULANCE	15-CONSTRUCTION EQUIPMENT	20-SAFETY SERVICE PATROL			17 17 17
1011	1 - NO CARGO BODY TYPE / NOT APPLICABLE		PUACCIC			12	i 📻
CARGO BODY	2 - BUS	US_TRANSIT/COMMUTER 10-AMBULANCE 15-CONSTRUCTION EQUIPMENT 23-SAFETY SERVICE PATROL 0 CARGO BODY TYPE NOT APPLICABLE NOTOR VEHICLE CHASSIS 9-CARGO TANK 13-AUTOTRANSPORTER US 4-LOGGING 6-CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE 9-CARGO TANK 13-AUTOTRANSPORTER		†			
TYPE			7 COATHICUIDCICDAVICI			, C	D g = 3 9 1 3 9 🗯 3
10141	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTORTROUBLE	99-OTHER/UNKNOWN	6	
VEHICLE	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE	10-DISABLED FROM PRIOR ACCIDENT		-	6 6 6
041 LU.C		6 - TIRE BLOWOUT				- NO DAMAGE	[0] - UNDERCARRIAGE [14]
0,1	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED		9 - MEDIAN/CROSSING ISLAND 10-DRIVEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE		_
HOH-MOTORIST LOCATION	2 - INTERSECTION – UNMARKED CROSSWALK	CROSSWALK	8 - SIDEWALK	11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN		-ALL AREAS [15]
AT IMPACT		5 - TRAVEL LANE - OTHER LOCATION		TRAILS		ווח∙חו	IIT NOT AT SCENE [16]
	1 - NON-CONTACT 2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING		13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING	18 - APPROACHING Or Leaving Vehicle		AL POINT OF CONTACT
	3-STRIKING 20	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANDING	0 - NO DAMA	
ACTION	4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTIONS	4 - OVERTAKING/PASSING	10 THINES	15 - WALKING, RUNNING, JOGGING, PLAYING	20-OTHER NON-MOTORIST 21-STANDING OUTSIDE	0 9 1-12 - REFE	RTO UNIT 15 - VEHICLE NOT AT SCENE RAM 99 - UNKNOWN
	& STRUCK	6 - MAKING LEFT TURN	14 (180) (10	16-WORKING	DISABLED VEHICLE	13-TOP	//- WHINI WHIT
	9 - OTHER / UNKNOWN		32 01(7216200	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC
	1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACD/	DARKED BREITION	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL
2,2	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - 0NE-WAY 2 - TW0-WAY	1 - ROUNDABOUT 4 - STOP SIGN
	4 - RAN STOP SIGN	10 - IMPROPER PASSING	ILLEGALLY 15-swerving to avoid	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY	2 - TW0-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
CIRCUMSTANCES	5 - UNSAFE SPEED 6 - IMPROPERTURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	# OF THROUGH LANES	RAIL GRADE CROSSING
SEQUENCE	OF EVENTS					ON ROAD	1 - NOT INVOLVED
2.0	1 - OVERTURN/ROLLGVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE —	N BAH WAVVELINGE	on those there statements	3	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
1 4 0		7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		
	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	12 - DAWNHILL BILNAWAY	18-ANIMAL — DEER 19-ANIMAL — OTHER	23-STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / NO	ON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST
	4 - JACKKNIFE 5 - CARGO / EQUIPMENT	9 - RAN OFF ROAD LEFT 10-cross median	13-OTHER NON-COLLISION	20 - MOTOR VEHICLE IN	ANYTHING SET IN MOTION BY A MOTOR VEHICLE	2	2 - SOUTH 6 - NORTHWEST
3	LOSS OR SHIFT	AN CONTRACTOR	14-PEDESTRIAN 15-PEDALCYCLE	TRANSPORT 21 - PARKED MOTOR VEHICLE	24-OTHER MOVABLE OBJECT	FROM 2 TO	
	CT INC. OT ATTROUNDING		N WITH FIXED OBJECT	F - STRUCK			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
4	/ CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER		43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE - EQUIPMENT	UNIT COEED	
	24 DRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER	39 - LIGHT / LUMINARIES	45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED
	27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	40 HTH ITM BOLE	46-FENCE 47-MAILBOX	52 - BUILDING 53 - TUNNEL		2 - CALCULATED / EDR
	28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 29 - BRIDGE RAIL BARRIER OR SUPPORT			48-TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED
	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	49-FIRE HYDRANT	99 - OTHER / UNKNOWN		
1	FIRST HARMFUL EVEN	IT 1 MOSTH	ARMFUL EVENT			3 5	

CHIO DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER								
							2 0 2 1 - 0 0 0 1 5 2 5 5								
UNIT#									DATE OF BIRTH AGE GENDER						
422222		R, MELISSA, AN	NN						0 8 / 2 9 / 1 9 8 0 4 1 F						
5701 A	5701 ASHTON CIR ,RAVENNA ,OH 44266									CONTACT PHONE - INCLUDE AREA CODE					
INJURIES	S INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIP							SAFETY EQUIPMENT	DOT-COMPLIANT DOTTED						
OL STATE	BY	LICENSE NUMBER		OFFEN	05.044		·	0 4	MC HE	LMET 0			1_	_1_	
O, H,				UFFEN	OFFENSE CHARGED LOCAL CODE			OFFENSE DESC	RIPTION	TON NUMI	BER				
OL CLASS	SELECT UP TO 2	T RESTRICTION SELECT	DIS	VER Tracted		OHOL / DRUG SUSPI		CONDITION	AL STATUS T	YPE VALUE	STATUS	DRUG TE		SELECT UP TO 4	
4			. BY	8		THER DRUG	MINDUM	, 1	1	1	1	1		H N 1	
UNIT #	NAME: LAST,	, FIRST, MIDDLE								DATE OF BIRTH	الــــااد	A	GE.	GENDER	
0,2	Faiz, K	Chalil							0 9	/ 1, 2, / ,2	00	6 1	5	M	
ADDRESS:	STREET, CITY, S								CONTACT	PHONE - INCLUDE AR					
312 H		Kent ,OH 44240)								L.,, 1	-	1		
312 H INJURIES	INJURED TAKEN BY 3	EMS AGENCY (NAME)		1				SAFETY EQUIPMENT USED 0 , 1 ,	DOT-COMPLIANT SEATING POSITION AT			IR BAG USAGE EJECTION TRAPPED			
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	SE CHAF	RGED	LOCAL	OFFENSE DESC	RIPTION		CITAT	ITATION NUMBER			
OL CLASS	ENDORSEMEN	T RESTRICTION SELECT		VER	ALCI	OHOL / DRUG SUSPE	ECTED	CONDITION		OHOL TEST		DRUG TE			
	SECECT OF 102		BA	TRACTED		LCOHOL MAP	ANAULIS		STATUS	YPE VALUE	STATUS	TYPE	RESULT	SELECT UP TO 4	
			<u> </u>	OTHER DRUG			1						بالا		
UNIT#	NAME: LAST,	, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
ADDRESS	STREET CITY S	TATE 210							CONTACT PHONE						
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE								
INJURIES	INJURED	EMS AGENCY (NAME)		TINJURED	TAKEN IO	MEDICAL FACILITY	NAME CITY	SAFETY EQUIPMENT							
INJURIES	TAKEN BY						CHANNE, CITT	USED	DOT-CO	MPLIANT	I AIK BAG	USAGE EJE	FCITON	IRAPPED	
OL STATE	OPERATOR	LICENSE NUMBER					OFFENSE DESC	RIPTION		CITAT	ION NUME	BER			
							CODE								
OL CLASS	ENDORSEMENT SELECT UP TO 2	T RESTRICTION SELECT		VER TRACTED	ALCO	DHOL / DRUG SUSPE	CTED	CONDITION	ALC STATUS T	OHOL TEST	STATUS	DRUG TE		SELECT UP TO 4	
			BY	11010120		LCOHOL MAF	ANAULIS		JINIOS ,	TI VALUE	311/103	TIPE N	(E3ULI	SELECT UP TO 4	
INJU	RIES	SEATING POSITION		IR BAG	L 01	THER DRUG OL CLASS		OL RESTRIC		DDIVED DISTO	OZION				
1-FATAL		1-FRONT-LEFT SIDE	1 - NOT DEP			1-CLASS A		OL RESTRIC	A THE RESERVE	1-NOT DISTRACTED	CITUN	1 - NONE GIV	T STAT /EN	us	
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYE			2 - CLASS B		2 - COL INTRASTATI		2 - MANUALLY OPERA ELECTRONIC COMM		2 - TEST REF			
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE	3 - DEPLOYE 4 - DEPLOYE		ONT / SIDE	3 - CLASS C 4 - REGULAR CLASS		3 - CORRECTIVE LE	NSES	DEVICE (TEXTING, DIALING)		3 - TEST GIVI SAMPLE			
5 - NO APPAREN	T INJURY	4 - SECOND – LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP			(OHIO = D) 5 - MAC MOPED ONLY		5 - EXCEPT CLASS A	BUS	3 -TALKING ON HAND		4 - TEST GIVI	31,400,00	University of P.	
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOY!	MENT UNKN)WN	6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS		COMMUNICATION C		5 - TEST GIVI UNKNOWI		ETS	
1 - NOT TRANSP		6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	F.	ECTION		OL ENDORSEM	MENT	7 - EXCEPT TRACTO		COMMUNICATION D	EVICE	ALCOHO	L TES	TTYPE	
2 - EMS		(MOTORCYCLE SIDE CAR)	1 - NOT EJE	To the could be used		H - HAZMAT		8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY W ELECTRONIC DEVI	E	1 - NONE			
3-POLICE 9-OTHER/UNK	'ANONAI	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	2 - PARTIAL	KING COLOR		M - MOTORCYCLE		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER		2 - BLOOD 3 - URINE			
		10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY 4 - NOT APP			P - PASSENGER N - TANKER		10 - LIMITED TO DAY	LIGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE	0	4 - BREATH			
1-NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	T	RAPPED	12	Q - MOTOR SCOOTER		11 - LIMITED TO EMP		8 - OTHER DISTRACTION THE VEHICLE	N OUTSIDE	5-OTHER			
2 - SHOULDER B	ELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1-NOTTRA			R-THREE WHEEL MO	TORCYCLE	12 - LIMITED - OTHE 13 - MECHANICAL DE		9 - OTHER / UNKNOWN		DRUG	TEST	TYPE	
3 - LAP BELT ONLY USED PICK UP WITH CAP) 2 - EXTRICAT 4 - SHOWLDER & LAP RELITUSED 12 - PASSENGER IN UNENCLOSED MECHANIC		2 - 20 UANT 202			(SPECIAL BRAKES, HAND CONTROLS, OR OTHER				1 - NONE 2 - BLOOD						
5 - CHILD RESTRAINT SYSTEM - CARGO AREA 3 - FREED BY		Y - TANKER / HAZMAT			ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY		1 - APPARENTLY NORMAL		3 - URINE						
FORWARD FA		13-TRAILING UNIT 14 RIDING ON VEHICLE EXTERIOR	NON-ME(CHANICAL M	LANS	GENDER		15 - MOTOR VEHICLES WITHOUT		L - I III STOAL IMI AIRIMLII I		4 - OTHER			
REAR FACING		(NON-TRAILING UNIT)				F-FEMALE M-MALE		AIR BRAKES		ANCRY, DISTURBED)		DRUG TEST RESULT(S)		SULT(S)	
7 - BOOSTER SE. 8 - HELMET USE		15 - NON-MOTORIST 99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN		16 - OUTSIDE MIRROR 17 - PROSTHETIC AID		4 - ILLNESS 5 - FELL ASLEEP, FAINTED,			RATES		
9- PROTECTIVE	PADS USED							18-OTHER		FATIGUED, ETC. 6- UNDER THE INFLUENCE			AZEPINE	S	
(ELBOW, KNE 10 - REFLECTIVE									OF MEDICATIONS / DRUGS / ALCOHOL		4 - CANNABINOIDS 5 - COCAINE				
11 - LIGHTING - F	1 - LIGHTING - PEDESTRIAN								9- OTHER / UNKNOWN		6-OPIATES/	OPIOIDS			
	/ BICYCLE ONLY. 9- OTHER / UNKNOWN											7 - OTHER	DE CUAT		

	OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER							
								2,0,2,1,-,0,0,0,1,5,2,5,5						
	UNIT#	NAME: LAS	ST, FIRST, MIDDLE					DA	TE OF BIRTH		AGE	GENDER		
	nnpres	: STREET, CITY	ACTATE TIO						1/1					
OCCUPAN	IDDKE 33:	: SIKEEI, CIIT	STATE ZIP					CONTACT PHON	E - INCLUDE AREA CO	OE .				
9 1	JURIES	INJURED	EMS AGENCY (NAME)		IN HIDED TAKEN TO Many F	7007	Taxona salinatan		1 1					
		TAKEN BY	EIIIO MERCI WAINE		INJURED TAKEN TO: MEDICAL FAC	CILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	UNIT #	NAMELIAS	ELDET MIDDLE						لــــــــــــــــــــــــــــــــــــــ	<u></u>				
UNIT # NAME: LAST, FIRST, MIDDLE								DA"	TE OF BIRTH		AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONI				لصبا			
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE	- INCLUDE AREA CO	DE					
9 11	JURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AID BAC HEACE	EIECTION	TRADDED		
L		TAKEN BY					USED	DOT-COMPLIANT MC HELMET		AIN BAG GOAGE	Carattan	INAFFED		
1	JNIT#	NAME: LAS	ST, FIRST, MIDDLE			·		DAT	E OF BIRTH		AGE	GENDER		
L								AGE GENDER						
PAN	DDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
OCCUPAN														
O IN	JURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
L		ВҮ					L	MC HELMET						
1	JNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
<u>-</u>								11			1 1 1			
CCUPAN	DDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COL	DE				
\circ	HIBITE	THURED	PMC 4											
110	JURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACI	ILITY (NAME, CITY)	SAFETY EQUIPMENT USEB	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
L		INII	JRIES	SAFETY	EQUIPMENT USED	1	CEATING BOS	MC HELMET		<u></u>				
	l - FATA			1 - NONE US		The Charles of the Control of the Co	T - LEFT SIDE	IIIUN	S. Company of the Company of	AIR BAG US	AGE	(5) (ii)		
	2 - SUSP	ECTED SE	RIOUS INJURY		OCCUPANT		ORCYCLE DRIV	1 - NOT DEPLOYED ER) 2 - DEPLOYED FRONT						
	3 - SUSP	ECTED MI	NOR INJURY	2 - SHOULDE	R BELT ONLY USED	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 3 - DEPLOYED SIDE								
4	- POSS	IBLE INJU	RY	3 - LAP BELT			ND - LEFT SIDE		4 - DEPLOY	ED BOTH				
	5 - NO AI	PPARENT I	INJURY		R & LAP BELT USED STRAINT SYSTEM –		ORCYCLE PASS ND – MIDDLE	ENGER) FRONT/SIDE 5 - NOT APPLICABLE						
		INJURED	TAKEN BY	FORWARD			ND - RIGHT SID	E			NOWN			
		TRANSPOR	Control of the Contro	6 - CHILD RE REAR FAC	STRAINT SYSTEM -		- LEFT SIDE	9 - DEPLOYMENT UNKNOWN IDE IDE CAR) EJECTION						
2	- EMS			7 - BOOSTER			O - MIDDLE	CAR	1 - NOT EJE		N Mariana			
3	- POLI	CE		8 - HELMET	JSED		- RIGHT SIDE			LLY EJECTE	D.			
9	- OTHE	R / UNKNO	WN		VE PADS USED		PER SECTION O ENGER IN OTHE	ER ENCLOSED 3 - TOTALLY EJECTED						
		GEN	IDER	10 - REFLECTI	(NEES, ETC.)	CARG	O AREA (NON-TR	RAILING UNIT, 4 - NOT APPLICABLE						
1000	- FEMAI				- PEDESTRIAN	12 - PASSI	ENGER IN UNE			TRAPPE	D			
1000	- MALE	R/UNKNOV	٧N	/ BICYCLE		CARG 13 - TRAIL	O AREA	1 - NOTTRAPPED						
				99 - OTHER / U	NKNOWN	14 - RIDIN	G ON VEHICLE	EXTERIOR 2 - EXTRICATED BY MECHANICAL MEANS						
						(NON-1 15 - NON-N	RAILING UNIT)	3 - FREED BY NON-MECHANICAL						
8							R / UNKNOWN		MEANS					
^		T, FIRST, MIDDI			<u> </u>			DAT	E OF BIRTH		AGE	GENDER		
_		STREET, CITY,	ΓERRI, A		<u> </u>				8, / ,1 9		4 8	_ F		
>			T,Twinsburg,	44097				CONTACT PHONE	- INCLUDE AREA COD	F				
_		T, FIRST, MIDDI		7700/				L	OF BIOTIC					
n	COOK, ELLEN, M							DATE OF BIRTH AGE GENDER 1 0 / 1, 4 / 1 9 7, 4 4, 6 F						
ADDRESS: STREET, CITY, STATE, ZIP							1 0 1 4 1 1 9 7 4 4 6 F							
	425 MAPLEWOOD ST ,Ravenna, ,OH 44266													
^	NAME: LAST, FIRST, MIDDLE							DATI	OF BIRTH		AGE	GENDER		
RUEHR, SONIA, C							0 9 1 4 1 9 8 2 3 9 F							
3 EVERGREEN DR, Kent, OH 44240								CONTACT PHONE - INCLUDE AREA CODE						
J	JEVENGREEV DR, Kelli, ,UH 44240								2 2 1					