OHIO DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD F	LOCAL REPORT NUMBER*				
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION	2,0,2,1,-,0,0,1,7,1,3,3,				
OH-1P OTHER REPORTING AGENCY NAME*	NCIC*	HIT/SKIP NUMBER			
PRIVATE PROPERTY CITY Of Kent Police	0 6 7 0 3	1-SOLVED 0	2 0 1 98 - ANIMAL		
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*		CRASH DATE / TIME*	CRASH SEVERITY		
3-TOWNSHIP		$1_{1}0_{1}1_{1}4_{1}2_{1}0_{1}2_{1}1_{1}/_{1}1_{1}8_{1}3_{1}$	2 - SERIOUS INJURY		
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH WATER	ROAD TYPE	LATITUDE DECIMAL DEGREE	1		
	ST	411-1411689	<u> </u>		
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST 1337	#) ROAD TYPE	LONGITUDE DECIMAL DEGRE	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE		
DEEDENCE DAINT DIRECTION		811 0 3 5 6 9 3 4	ONLY ONLY		
1 - INTERSECTION N - NORTH IR - INTERSTATE ROUTE(TP) AL - ALLEY HW-	ID TYPE HIGHWAY RD - ROAD	INTERSEC WITHIN INTERSECTION	TION RELATED		
3 2-MILE POST S-SOUTH US-FEDERAL US ROUTE AV - AVENUE LA -	The state of the s	_			
DISTANCE DISTANCE CR - NUMBERED COUNTY ROLLE OV -		WITHIN INTERCHANGE			
1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE PI -	PARKWAY TL - TRAIL PIKE WA - WAY	ROZ	ADWAY		
5 0 2 2-FEET ROUTE HE - HEIGHTS PL -	PLACE	ROADWAY DIVIDED			
LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COL 1 - ON ROADWAY 9 - CROSSOVER 1 - NOT COLLISION 4 - RE/		DIRECTION OF TRAVEL	MEDIAN TYPE		
0 1 2-ON SHOULDER 10-DRIVEWAY/ALLEY ACCESS BETWEEN 5-BAC		N - NORTH	1 - DIVIDED FLUSH MEDIAN (<4 FEET)		
VEHICLES IN 6-ANG	SLE ESWIPE, SAME DIRECTION	E - EAST	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)		
13 RIVE I AME	ESWIPE, OPPOSITE DIRECTION	W-WEST	3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN		
7-ON RAMP 14-TOLL BOOTH	ER / DIKNOWN		(ANYTYPE)		
			9-OTHER/UNKNOWN		
1 - LANE CLOSURE 1 - BEFO	RETHE 1ST WORK ZONE		DITIONS SURFACE		
2 - ADVA	NING SIGN NCE WARNING AREA	1 - STRAIGHT LEVEL 1 - DRY	1 2		
OR MEDIAN 3-TRAN	SITION AREA	2 - STRAIGHT GRADE 2 - WET	2 - BLACKTOP,		
ACTIVE COURSE TONE	IINATION AREA	3 - CURVE LEVEL 3 - SNOW	BITUMINOUS, ASPHALT		
LIGHT CONDITION WEATHER		4 - CURVE GRADE 4 - ICE 9 - OTHER/UNKNOWN 5 - SAND, N	3 - BRICK/BLOCK		
1-DAYLIGHT 1-CLEAR 6-SNOW 2 2-DAWN/DUSK 0 1 2-CLOUDY 7-SEVERE CROSS		OIL, GR	AVEL STONE		
3 - DARK - LIGHTED ROADWAY 3 - FOG, SMOG, SMOKE B - BLOWING SAN		6-WATER MOVIN			
4 - DARK – ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZING RAI 5 - DARK – UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER / UNK	N OR FREEZING DRIZZLE	7 - SLUSH	9 - OTHER/UNKNOWN		
9-OTHER/UNKNOWN		9 - OTHER/	UNKNOWN		
NARRATIVE			Indicate the north		
UNIT 2 WAS COMING TO A STOP SB ON S			an "N" on the compass diagram.		
WATER ST. UNIT 1 WAS TRAVELING BEHIND UNIT 2	हाकास्त्रका⊲ । । ।				
FAILED TO COME TO A STOP IN TIME AND STRUCK					
FROM BEHIND. UNIT 1 WAS CITED FOR ACDA. UNIT					
CLAIMED BACK INJURY. UNIT 2 REFUSED TREATM	\$ 3.5 8.5 8.5 8.5 8.5 8.5 8.5 8.5 8.5 8.5 8				
THE KFD AND REFUSED TRANSPORT. UNIT 2 WAS T	S WHER ST (SR 4.)				
OF THEIR CAR WALKING AROUND LOOKING AT TH					
VEHICLE.		1337 3 WATER S	,T.		
			Not To Scale		
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL	DATE / TIME	SCENE CLEARED DATE / TIME	REPORT TAKEN BY		
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	2 1 / 1 8 4 4 1 1	$0_{+}1_{+}4_{+}2_{+}0_{+}2_{+}1_{+}/_{+}1_{+}9$	1 2 POLICE AGENCY		
TOTAL TIME ROADWAY CLOSED INVESTIGATION TIME MINUTES MOORE, Matthew J	CHECKED BY OFFICE Short, Jaso	R'S NAME*	MOTORIST		
OFFICER'S BADGE NUMBER*		OFFICER'S BADGE NUMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS)		
0 0 0 0 2 0 0 5 3 2 5 2		8			

LOCAL REPORT NUMBER

2 + 0 + 2 + 1 + - + 0 + 0 + 0 + 1 + 7 + 1 + 3 + 3

UNIT #	OWNED NAME			7			0 0 0 1 7 1 5 5				
	STEWART, TIMO	ST, MIDDLE (SAME AS ORIVER)	OWNER PHONE	thritist acca from A Means as notices	DAMAGE					
	IDDRESS: STREET, CITY, STAT					DAMAGE SCALE					
4	HAPSODY LN ,CLIN	00 100				2 1-NONE	3 - FUNCTIONAL DAMAGE				
-	CIAL CARRIER: NAME, ADD			T -		2-MINORD	·····- 				
COMMEN	GIAL GARRIER: NAME, ADD	RESS, GITY, STATE, ZIP		COMMERCIAL CAR	RIER PHONE: INCLUDE AREA CODE	9 - UNKNOWN					
					<u> </u>		AMAGED AREA(S)				
	LICENSE PLATE #	1	E IDENTIFICATION #	VEHICLE	YEAR VEHICLE MAKE	INDI	CATE ALL THAT APPLY				
OH	JJT5440		$8 \downarrow K_1 5 \downarrow 7 \downarrow W_1 5 \downarrow 2 \downarrow 2 \downarrow$	9 4 9 2 0 6	Jeep Jeep	0	12				
INSUR/ VERIF	ANCE INSURANCE COM	1.	INSURANCE POLICY #	COLO	R VEHICLE MODEL	11	11 1				
ISSI VEKIF			992963190	RED	LIBERTY	10 11 1	2 10 11 1 2				
_	TYPE OF USE	IN EMERCENCY	US DOT #	TOWED BY: COMP	ANY NAME	10 2	11 20 2				
COMMI	ERCIAL GOVERNMENT	IN EMERGENCY RESPONSE		J		9 9 3	3 9 9 3				
INTER	RLOCK	#OCCUPANTS VI	EHICLE WEIGHT GVWR/GCWR		RDOUS MATERIAL CLASS # PLACARD ID #						
DEVIC	E HIT/SKIP UNI	IT	1 - ≤10K LBS. 2 - 10,001 - 26K LBS	MATERIAL RELEASED	CLASS # PLACAKU ID #	B 7 5	4 B 7 \$ 5 \ 4				
EQUIP	7720	0 2	3 - >26K LBS.	PLACARD		7 6 5	12 7 6				
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12-GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6	11 12 6				
0 1	2 - PASSENGER VAN (MINIVAN)	8 - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24-WHEELCHAIR (ANY TYPE)	10 /	1 2				
		9 - AUTOCYCLE	14-SINGLE UNIT TRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST		10 2				
UNIT TYPE		10 - MOPED OR MOTORIZED	15-SEMI-TRACTOR	21 - HEAVY EQUIPMENT	26-BICYCLE	9 (B = 3 3				
	5 - CARGO VAN	BICYCLE	16-FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR	27 - TRAIN	<u></u>					
4	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17-MOTORHOME	ANIMAL-DRAWN VEHICL	E 99 - UNKNOWN OR HIT/SKIP	8	7 5 4				
<u>. 00</u> ,	# OFTRAILING UNITS	,,				12	7 6				
	MILANELIA PARENTENA IN AL					11	6 11 12				
ы У	WAS VEHICLE OPERATING IN AL MODE WHEN CRASH OCCURRED			3 - CONDITIONAL AUTOMATI	ON 9 - UNKNOWN	10 12	10 12				
2 .	1-YES 2-NO 9-OTHER/UNK		2 DARTILL AUTOMATION	4 - HIGH AUTOMATION 5 - Full Automation		10 2	Z				
	1-163 2-NO 3-018681088	MODE LEVEL	Z - FARTIAL AUTONIATION	J - PULL AUTUMATION		9 9 3	3 9 10 2				
	1 - NONE	6 - EUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	8 4 _	8 4				
0 1 :	2 - TAX!	7 - BUS - INTERCITY		17 - MOWING	99-OTHER/UNKNOWN	7 5					
SPECIAL	2 FLEATRANIA DIDE GULDINA	8 - BUS - SKUTTLE		18 - SNOW REMOVAL	77-0111ER COMMINING	6					
	N 4 - SCHOOL TRANSPORT	9 - BUS - OTHER		19 - TOWING		6 5	7 6 5				
	5 - BUS -TRANSIT/COMMUTER	10-AMBULANCE	15-CONSTRUCTION EQUIPMENT	23 - SAFETY SERVICE PATRO	L						
	1 - NO CARGO BODYTYPE	3 - VEHICL FTOWING ANOTHER	5 - INTERMODAL CONTAINER	8 - POLE	12 - CONCRETE MIXER		12 12 12				
$\lfloor 0 \rfloor 1$	/ NOT APPLICABLE	MOTORVEHICLE	CHACCIC	9 - CARGO TANK	13-AUTOTRANSPORTER	12					
CARGO BODY	2 - BUS	4 - LOGGING	/ DARGONANIENO GOED DOV	10-FLAT BED	14-GARBAGE/REFUSE						
TYPE			7 CDAINICUIDEICDAUCI	11-DUMP	99-OTHER/UNKNOWN	9 3 9	4 3 9 1 3 9 6 3				
					77-01-1647 011410414		4				
	1 - TURN SIGNALS	4 - BRAKES		9 - MOTOR TROUBLE	99-OTHER/UNKNOWN	6	Ŏ				
	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT		ŀ	6 6 6				
	3 T TAIL LAMIFS	B - TIME BLOWOUT		AUGIDENT		☐ - NO DAMAGE	[0] - UNDERCARRIAGE [14]				
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAN	ID 12-FIRST RESPONDER	C - 140 DYMYGE	101ONDERCARRIAGE [14]				
NAN MATABLES	CROSSWALK	4 - MIDBLOCK - MARKED	7 - SHOULDER / ROADSIDE	10 - DRIVEWAY ACCESS	AT INCIDENT SCENE	-TOP [13]	- ALL AREAS [15]				
LOCATION	7 2-INTERSECTION - UNMARKED CROSSWALK	CROSSWALK		11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN		_				
AT IMPACT		5 - TRAVEL LANE - OTHER LOCATIO	· · · · · · · · · · · · · · · · · · ·	TRAILS		∐-UN	IT NOT AT SCENE [16]				
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING	741999					
. 3 .	2 - NON-COLLISION	2 - BACKING	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	OR LEAVING VEHICLE		AL POINT OF CONTACT				
	3-STRIKING UII	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANDING	0 - NO DAMA					
ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	10 - PARKED	L5 - WALKING, RUNNING, JOGGING, PLAYING	20-OTHER NON-MOTORIST	1 2 1-12 - REFER	TO UNIT 15 - VEHICLE NOT AT SCENE				
	5 - BOTH STRIKING ACTIONS & STRUCK		11 - SLOWING OR STOPPED	L6-WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13 - TOP	99 - UNKNOWN				
	9-OTHER/UNKNOWN	6 - MAKING LEFT TURN	THE FROM LINE	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN						
		7 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	AL DIVIPENCEDO				TRAFFIC				
	1-NONE	7 - LEFT OF CENTER	DADVED BACITION	17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL				
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8-FOLLOWING TOO CLOSE / ACD	14-STOPPED OR PARKED	18-OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN				
0 8	4 - RAN STOP SIGN	9-IMPROPER LANE CHANGE 10-IMPROPER PASSING	THECALLY	19 - LOAD SHIFTING/FALLING	23 - OPENING DOOR INTO ROADWAY	2 , 2 - TW0-WAY	6 , 2 - SIGNAL 5 - YIELD SIGN				
CONTRIBUTING	:	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID	SPILLING	99-OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL				
CIRCUMSTANCES	6-IMPROPERTURN	12-IMPROPER BACKING	16-WRONG WAY	0 - IN PROPER CROSSING	77 OTHER THE RESTRICT	# OF THROUGH LANES	RAIL GRADE CROSSING				
SEQUENCE	OF EVENTS	and the control of				ON ROAD	1 - NOT INVOLVED				
J. C.	OF EVENTS		NON-COLLISION			2	1 2 - INVOLVED-ACTIVE CROSSING				
1 2 0	I - OVERTURN/ROLLGVER	6 - EQUIPMENT FAILURE		6 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING				
1 2 0	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	7 - ANIMAL — FARM	EQUIPMENT						
	3 - IMMERSION	B - RAN OFF ROAD RIGHT	TRAVEL 12 - DOWNHILL RUNAWAY	8-ANIMAL — DEER	23 - STRUCK BY FALLING,	UNIT / NO	N-MOTORIST DIRECTION				
2		9 - RAN OFF ROAD LEFT	13_OTHER NON COLLISION	9-ANIMAL - OTHER	SHIFTING CARGO OR Anything set in motion		1 - NORTH 5 - NORTHEAST				
		10-CROSS MEDIAN	14-PEDESTRIAN	O-MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE	1	2 - SOUTH 6 - NORTHWEST				
3	LOSS OR SHIFT		15 BEST OVER 5	1 - PARKED MOTOR VEHICLE	24-OTHER MOVABLE CBJECT	FROM 1 TO L					
		COLLISIO	N WITH FIXED OBJECT				4 - WEST 8 - SOUTHWEST				
41	LODACU CUCUION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	3-CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN				
	Of DOIDER OVERVIEND	32 - PORTABLE BARRIER		4 - DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED				
	STRUCTURE	33 - MEDIAN CABLE BARRIER	CHORORY	5 - EMBANKMENT	51 - WALL		1 - STATED / ESTIMATED SPEED				
اللاساد	27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	40 UTU ITV 601 F	6-FENCE 7-Mailbox	52-BUILDING 53-Tunnel	0 1 2 1 0	1 1 1				
		35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	8-TREE	54-OTHER FIXED OBJECT		2 - CALCULATED / EDR				
6	29 - BRIDGE RAIL	BARRIER	OR SUPPORT	9-FIRE HYDRANT	99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED				
	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT		700						
1		4				2 5					



LOCAL REPORT NUMBER

[2,0,2,1,-,0,0,0,1,7,1,3,3,

UNIT #	-,,				FR PHRNE-N	INDEADER PARE A PROPERTY	DAMAGE				
	FINFROCK, DAVI						DAMAGE SCALE				
	DDRESS: STREET, CITY, STAT						2 1-NONE	3 - FUNCTIONAL DAMAGE			
	LBISH AVE ,Springs CIAL CARRIER: NAME, ADD			2 - WINOR DAMAGE 4 - DISABLING DAMAGE							
Commex	GIAL GARRIER: NAME, ADD	HESS, CITY, STATE, ZIP	COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE					- UNKNOWN			
4 D CTATE	STATE LICENSE PLATE # VEHICLE IDENTIFICATION							MAGED AREA(S) TE ALL THAT APPLY			
				0 2 5	VEHICLE YE		INDICA	TE ALL THAT APPLY			
			0,3,0,9,4,0,4,7,	0 2 3	2 0 0		12	12			
INSURA VERIFI		FANT	INSURANCE POLICY #		COLOR	VEHICLE MODEL	12	12			
	TYPE OF USE		US DOT #		BLU	YARIS	10 11 1 2	10 11 1 2			
СОММЕ		IN EMERGENCY	U3 U01 #	IUWE	D BY: COMPAN	YNAME	10 2	10 2 -			
		RESPONSE	EHICLE WEIGHT GVWR/GCWR	J	HAZARDO	US MATERIAL	9 9 3	*L #6# _/			
INTER	LOCK HIT/SKIP UNI	#UCCUPANTS	1 - SIOK LBS			CLASS # PLACARD ID #	7 7 5 7	7 7 7			
EQUIP	PED MILITAKIP ONI	" 0 1	2 - 10,001 - 26K LBS		PLACARD		6				
_	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS	<u> </u>			7 6 11	12 7 5			
	2 - PASSENGER VAN (MINIVAN)				VERY VEHICLE) PASSENGERS)	23 - PEDESTRIAN / SKATER		12			
	3 - SPORT HTH ITY VEHICLE	9 - AUTOCYCLE		20 - OTHER VE		24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10/	1 2			
UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED		21 - HEAVY E		26-BICYCLE	,	0 = 3			
	5 - CARGO VAN	BICYCLE		22 - ANIMAL V	WITH RIDER OR	27 - TRAIN	<u></u>				
at .	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-	DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	785 4			
00	# OF TRAILING UNITS						12 7	6			
12	WARRIED A CONTRACTOR OF THE CO						11	6 11 12 1			
Δ 	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED				NAL AUTOMATION	9 - UNKNOWN	10 12 2	10 12			
2	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS	2 DARTIN AUTOMATION	4 - HIGH AUT 5 - FULL AUT			10 2	10 2			
		MODE LEVEL	,	J - I GEE AD I	ONIATION		9 9 3 3	9 9 3			
	1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM		21 - MAIL CARRIER	8 4 -	0 4			
0 1	2 - TAXI	7 - BUS - INTERCITY	12-MILITARY	17 - MOWING		99-OTHER/UNKNOWN	8 7 5 4	8 7 5 4			
SPECIAL				18 - SNOW REMOVAL			7 6	7 6			
FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER		19-TOWING			6	6			
	5 - BUS -TRANSIT/COMMUTER	10-AMBULANCE	15-CONSTRUCTION EQUIPMENT	20-SAFETY S	ERVICE PATROL			12 12 12			
0 1	1 - NO CARGO BODY TYPE			B - POLE		12 - CONCRETE MIXER	.,				
CARGO	/ NOT APPLICABLE 2 - BUS	MOTOR VEHICLE 4 - LOGGING	/ CARCOMANICHOLOGER BOY	9 - CARGOTA		13 - AUTO TRANSPORTER	80				
BODY	2 - 003	4 - LUGGING	7 COLUMNITACIONAVIO	10-FLAT BED	1	14-GARBAGE/REFUSE	R PAR.	6 3 9 1 3 9 6 3			
TYPE			1 - AVEUDICUTLINGVACE	11 - DUMP		99-OTHER/UNKNOWN		5 3 9 1 3 9 3 3			
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTORTR	OUBLE	99-OTHER/UNKNOWN	6				
	2 - HEAD LAMPS	5 - STEERING			FROM PRIOR			6 6 6			
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			D No Danie of C	•			
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/C	ROSSING ISLAND	12-FIRST RESPONDER	- NO DAMAGE [()]UNDERCARRIAGE [14]			
NON MOTORICT	CROSSWALK	4 - MIDBLOCK - MARKED	7 - SHOULDER / ROADSIDE	10-DRIVEWA	Y ACCESS	AT INCIDENT SCENE	-TOP [13]	-ALL AREAS [15]			
LUCATION	2 - INTERSECTION – UNMARKED CROSSWALK	CROSSWALK		11 - SHARED USE PATHS OR		99-OTHER/UNKNOWN	_	_			
AT IMPACT		5 - TRAVEL LANE - OTHER LOCATIO		TRAILS			L - UNIT	NOT AT SCENE [16]			
	1 - NON-CONTACT	1 - STRAIGHT AHEAD					INITIAL	DOINT OF CONTACT			
. 4 .	2-NON-COLLISION	2 - BACKING 3 - CHANGING LANES			FERING OR CROSSING OR LEAVING VEHICLE		INITIAL POINT OF CONTACT 0 - NO DAMAGE 14 - UNDERCARRIAGE				
ACTION				9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 10 - PARKED 15 - WALKING, RUNNING,		19-STANDING 20-OTHER NON-MOTORIST		0 UNIT 15 - VEHICLE NOT AT SCENE			
NOTION.	5- BOTH STRIKING ACTIONS	4 - OVERTAKING/PASSING	10 - PARKED 11 - SLOWING OR STOPPED	JOGGING,		21 - STANDING OUTSIDE	DIAGRA				
	& STRUCK	6 - MAKING LEFT TURN	IN TRAFFIC	16-WORKING		DISABLED VEHICLE	13-TOP				
	9-OTHER/UNKNOWN		12 - DRIVERLESS	17 - PUSHING	VEHICLE	99-OTHER/UNKNOWN		TRAFFIC			
	1-NONE	7 - LEFT OF CENTER		17 - VISION OB	ISTRUCTION	21 - LYING IN ROADWAY		TRAFFIC			
	2 - FAILURE TO YIELD	8-FOLLOWING TOO CLOSE / ACD	A PARKED POSITION	18-OPERATIN	IG DEFECTIVE	22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL			
10,1	3 - RAN RED LIGHT	9 - IMPROPER LANE CHANGE	14-STOPPED OR PARKED ILLEGALLY	EQUIPME		23 - OPENING DOOR INTO	2 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTING	4 - RAN STOP SIGN	10-IMPROPER PASSING	15 - SWERVING TO AVOID	19 - LOAD 5HII SPILLING	FTING/FALLING/	ROADWAY		3 - FLASHER 6 - NO CONTROL			
	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	17 Manual Will	20 - IN PROPEI		99-OTHER IMPROPER ACTION					
	6 - IMPROPER TURN	12-IMPROPER BACKING					# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED			
SEMUENCE	OF EVENTS		NON COLLISION				2	1 2 - INVOLVED-ACTIVE CROSSING			
1 2 0	1 - OVERTURN/ROLLCVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE —	6-RAILWAY	/EHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
1 2 0	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	I7 - ANIMAL -		EQUIPMENT					
		8 - RAN OFF ROAD RIGHT	12.DOWNHILL BIMAWAY	IB-ANIMAL -		23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / NON-	MOTORIST DIRECTION			
		9 - RAN OFF ROAD LEFT	13_OTHER NON_COLLISION	9-ANIMAL -		ANYTHING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST			
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14-PEDESTRIAN	20 - MOTOR VE Transpor		BY A MOTOR VEHICLE	1	2 - SOUTH 6 - NORTHWEST			
3	-900 011 61111 1			21 - PARKED M	OTOR VEHICLE	24-OTHER MOVABLE OBJECT	FROM L 1 TO L	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST			
	25 IMPACT ATTENUATOR		N WITH FIXED OBJECT		K			9 - OTHER / UNKNOWN			
4	Lebacu cuculou	31 - GUARDRAIL END 32 - PORTABLE BARRIER		13 - CURB 14 - Ditch		50 - WORK ZONE MAINTENANCE EQUIPMENT					
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER			IENT	51 - WALL	UNIT SPEED	DETECTED SPEED			
5	CIDUCTUDE	34 - MEDIAN GUARDRAIL	SUPPORT	SUPPORT 46-FENCE		52 - BUILDING		1 - STATED / ESTIMATED SPEED			
	OR POINCE DADAGET	BARRIER 35 - MEDIAN CONCRETE	A) DYUED DACT DOLE	17 - MAILBOX		53 - TUNNEL	0,0,0	2 - CALCULATED / EDR			
	29 - BRIDGE RAIL	BARRIER	UD CHIDDUDT	48-TREE		54-OTHER FIXED OBJECT 99-OTHER/UNKNOWN	POSTED SPEED	3 - UNDETERMINED			
	30-GUARDRAIL FACE	36-MEDIAN OTHER BARRIER	42 - CULVERT	19-FIRE HYDR	TANI	*** OTHER TOWNS					
1	FIRST HARMFUL EVEN	T 1 MOST H	IARMFUL EVENT				2 5				

CHIED DEPARTMENT MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER								
E- 1000			ון־ווע	1010	1K12	——————————————————————————————————————			2_0_	2 ₁ 1 ₁ - ₁ 0 ₁	0 , 0 , 1	7_1_3	3 _ 3 _	
UNIT#	1	IME: LAST, FIRST, MIDDLE TEWART, NATALEE, GAIL							DATE OF BIRTH AGE GENDER					
0,1	STREET, CITY, ST		GAIL						0 6 / 2 8 / 1 9 9 7 2 4 F					
3379 1	9 RHAPSODY LN ,CLINTON ,OH 44216								CONTACT PHONE - INCLUDE AREA COME					
Z	TAKEN	EMS AGENCY (NAME)		INJURED	TAKENTO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	SEATING POSITE	ON AIR BAG US	AGE EJECTION	N TRAPPED	
5	BY							0.4	L-IMC HE	LMET 0 1		_1_	1	
OL STATE	OPERATOR L	ICENSE NUMBER		1	ISE CHAI	RGED	LOCAL	OFFENSE DESC			- 1	N NUMBER		
O, H OL CLASS	ENDORSEMENT	PCCTPIOTION		333.	,	X			m Speed Limits		14019			
OL CLASS	SELECT UP TO 2	RESTRICTION SELECTION		IVER STRACTED		OHOL / DRUG SUSP		CONDITION	STATUS	YPE VALUE		RUG TEST(S YPE RESUL	LT SELECT UP TO 4	
4			.	_1		THER DRUG		1	1	1	1 1	1	11 11	
UNIT#	NAME: LAST,	•								DATE OF BIRTH		AGE	GENDER	
0,2	FINFR	OCK, TAMMY,	A						0 2	<u>/ 1</u> 9 / 1	969	5 2	\mathbf{F}	
ADDRESS:	: STREET, CITY, ST	-,						-	CONTACT	PHONE - INCLUDE AREA	CODE		1	
1277]		HAVE, Springfie	ld ,OH	[4431	.2				,					
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-Co		ON AIR BAG US	AGE EJECTION	TRAPPED	
ADDRESS: 1277] 100 INJURIES 101 STATE 102 OL STATE 103 OL CLASS		Kent Fire		1				0,4	MC HE	LMET 0 1	11_	CITATION NUMBER		
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	ISE CHAI	RGED	LOCAL CODE	OFFENSE DESC	RIPTION		CITATIO			
O, H,	ENDORSEMENT	RESTRICTION SELECT	HD TO Z ND	IVER	ALC:	OHOL / BOHO CHED		00110171011	ALC	OHOL TEST		DUC TEST		
	SELECT UP TO 2	NESTRIBITION SECTOR		STRACTED				CONDITION	STATUS T			RUG TEST(S YPE RESUL	T SELECT UP TO 4	
4		<u> </u>	ا ابـــــــــــــــــــــــــــــــــــ	1	0	OTHER DRUG 1		1			1 1 1 1			
UNIT#	NAME: LAST,	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER	
										(<u> </u>		ــــا ا	
ADDRESS:	STREET, CITY, ST	ATE, ZIP							CONTACT	PHONE - INCLUDE AREA	CODE			
INJURIES	TM IUDED	FMC + OFNOV							<u> </u>					
NO	TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED MC HELMET					
ADDRESS: NON-MANUAL INJURIES OL STATE OL CLASS	OPERATOR L	ICENSE NUMBER		OFFEN	ISE CHAF	ARGED LOCAL OFFENSE CODE		OFFENSE DESC	<u> </u>		CITATIO	N NUMBER		
TORI								OFFICE DESC			CITATIO	OTTATION NOMBER		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER	RACTED ALCOHOL MARIJUANA		CONDITION	ALCOHOL TEST			DRUG TEST(S)			
			BA				RIJUANA		STATUS TYPE VALUE		STATUS	TATUS TYPE RESULT SELECT UP		
INJU	IRIES	SEATING POSITION		AIR BAG	OTHER DRUG			OL DESTRIC						
1-FATAL		1 - FRONT - LEFT SIDE	1 - NOT DE	Salara Anna A		OL CLASS 1-CLASS A		OL RESTRIC 1-ALCOHOLINTER	WW. To the Control	DRIVER DISTRACTED	Application and the	TEST STA NONE GIVEN	ATUS	
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY	NJURY 2 - FRONT - MIDDLE 3 - DEPLOY 3 - FRONT - RIGHT SIDE 4 - DEPLOY			2 - DEPLOYED FRONT 2 - CLASS B 3 - DEPLOYED SIDE 3 - CLASS C 4 - DEPLOYED BOTH FRONT / SIDE 4 - REGULAR CLASS			2 - CDL INTRASTAT	EL POTRALIZA GALAMANIA		NG AN 2-	AN 2-TEST REFUSED CATION 3. TEST CIVEN CONTAMINATED		
4 - POSSIBLE IN								3 - CORRECTIVE LE 4 - FARM WAIVER	NSES	DEVICE (TEXTING, TYPING,				
5 - NO APPAREN	IT INJURY	4 - SECOND – LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP			(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 - TALKING ON HANDS-F	REE	TEST GIVEN, RES		
for College College States	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	9-DEPLOY	MENT UNKN) WN	6 - NO VALID OL		6 - EXCEPT CLASS / & CLASS B BUS		COMMUNICATION DEV	ON SHIP STATES	TEST GIVEN, RES Unknown	20112	
1 - NOT TRANSPO		7-THIRD - LEFT SIDE	E.	JECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		COMMUNICATION DEV	Δ.	LCOHOL TE	ST TYPE	
2 - EMS		(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE	1 - NOT EJE		ETHENY THUMB	H - HAZMAT		RESTRICTIONS		ELECTRONIC DEVICE	1.	NONE Blood		
3-POLICE 9-OTHER/UNK	NOWN	9-THIRD - RIGHT SIDE	3-TOTALLY	LLY EJECTED ' ejected		M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER 7 - OTHER DISTRACTION		URINE		
SAFETY FO	QUIPMENT	10-SLEEPER SECTION OF TRUCK CAB	4 - NOT APP	LICABLE		N-TANKER		10 - LIMITED TO DAY		INSIDE THE VEHICLE 8 - OTHER DISTRACTION		BREATH		
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	T	RAPPED	OCH SOLV	Q - MOTOR SCOOTER R - THREE-WHEEL MO	TORCYCLE	11 - LIMITED TO EMP 12 - LIMITED - OTHE	SANSON TO A	THE VEHICLE		OTHER		
2 - SHOULDER 8		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA 2 - EXTRICA			S - SCHOOL BUS		13 - MECHANICAL DE (SPECIAL BRAKE		9 - OTHER / UNKNOWN	The second second	DRUG TEST None	TYPE	
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED		MECHAN	VICAL MEANS	i	T - DOUBLE & TRIPLE X - TANKER / HAZMAT	TRAILERS	CONTROLS, OR O'	THER	CONDITION		BLOOD		
5 - CHILD RESTR FORWARD FA		CARGO AREA 13-TRAILING UNIT	3 - FREED E	BY Chanical M	EANS		1000	14 - MILITARY VEHIC	LES ONLY	1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN		URINE Other		
6 - CHILD RESTR		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	TUOHTIWS	3 - EMOTIONAL (E.G., DEPR	ESSED	UG TEST RE	SULT(S)	
7 - BOOSTER SE	ACTION OF THE PARTY OF THE PART	15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO		4 - ILLNESS	1-/	AMPHETAMINES	ALL DESIGNATIONS	
8 - HELMET USE		99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AID 18 - OTHER		5 - FELL ASLEEP, FAINTEI Fatigued, etc.		BARBITURATES Benzodiazepin	EC	
9- PROTECTIVE (ELBOW, KNE	ES, ETC.)									6 - UNDER THE INFLUENCE OF MEDICATIONS / DRI	E	BENZODIAZEPIN Cannabinoids	La	
10 - REFLECTIVE 11 - LIGHTING - P										/ALCOHOL	5-0	COCAINE).	
/ BICYCLE ON	ILY									9 - OTHER / UNKNOWN		OPIATES/OPIOIO OTHER	12	
99 - OTHER / UNK										NEGATIVE RESUI	LTS			

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER					
	IIMTT #							2,0,2,1,-,0,0,1,7,1,3,3,					
	UNIT #	NAME: LAST, FIRST, MIDDLE OSBORNE, GRANT, CHARLES							E OF BIRTH		AGE	GENDER	
ANT		STREET, CITY,		0 9 / 1 6 / 1 9 9 9 2 2 M									
OCCUPAN	3495	STIMS	ON RD ,NOR	FON ,OH									
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED								
5	5	ВУ			USED 0 4	MC HELMET	0 3	1 1	. 1	_1_			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
LN.	ADDRESS:	STREET, CITY.	STATE 71P					0007407 0000	/				
OCCUPANT			5111 L				CONTACT PHONE - INCLUDE AREA CODE						
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT 0	SEATING POSITION AIR BA			TRAPPED	
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	UNIT#	NAME: LAS	T, FIRST, MIDDLE	·				DAT	E OF BIRTH		AGE	GENDER	
Ļ	ADDDESS	270557 2171											
OCCUPAN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE			
00	INJURIES	INJURED	EMS Agency (NAME)	-	INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGI	EJECTION	TRAPPEN	
	اـــــا	TAKEN BY					USED	DOT-COMPLIANT MC HELMET		1			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
Ļ.	ADDDESS								/				
OCCUPAN	ADDKE22:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	D E			
) 0	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACI	ILITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	FIECTION	TDADDED	
	اـــــا	TAKEN BY			USED USED			DOT-COMPLIANT MC HELMET		,	ESECTION	INAFFED	
			RIES	SAFETY	EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE		
	1 - FATA		DIQUE IN HIDY	1 - NONE US VEHICLE	ED - OCCUPANT		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVE		1 - NOT DE	PLOYED			
ı			RIOUS INJURY NOR INJURY	2 - SHOULDE	R BELT ONLY USED	2 - FRON	T - MIDDLE		2 - DEPLOYED FRONT 3 - DEPLOYED SIDE				
ı	4 - POSS	SIBLE INJU	RY	3 - LAP BELT	AP BELT ONLY USED HOULDER & LAP BELT USED HILD RESTRAINT SYSTEM – DRWARD FACING 3 - FRONT – RIGHT SIDE (MOTORCYCLE PASS 5 - SECOND – MIDDLE 6 - SECOND – RIGHT SIDE 3 - FRONT – RIGHT SIDE 4 - SECOND – RIGHT SIDE 5 - SECOND – RIGHT SIDE 6 - SECOND – RIGHT SIDE					EPLOYED SIDE			
	5 - NO A	PPARENT I	NJURY					ENGER)	FRONT/SIDE				
ľ		INJURED	TAKEN BY	FORWARD						5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN			
ı	and the second second	TRANSPOR			HILD RESTRAINT SYSTEM – 7 - THIRD – LEFT SIDE EAR FACING (MOTORCYCLE SIDE								
	2-EMS			7 - BOOSTER			1 - NOT EJ	or and the second	UN	V PU			
ļ	3 - POLI			8 - HELMET	USED) – RIGHT SIDE PER SECTION C			LLY EJECT	ED		
ě	9 - OTHE	R/UNKNO			IVE PADS USED KNEES, ETC.)	11 - PASSI	ENGER IN OTHE O AREA (NON-TR	R ENCLOSED	Y EJECTED				
ı	F - FEMA		DER	10 - REFLECT	IVE CLOTHING	BUS, P	ICK UP WITH CAP)	4 - NOT AP	JAK S			
ı					NG – PEDESTRIAN 12 - PASSENGER IN UNEI			NCLOSED	TRAPPED 1 - NOTTRAPPED				
	U - OTHER / UNKNOWN 99 - OTHER /				13 - TRAIL		EVTERIOR	2 - EXTRICATED BY MECHANICAL					
						ON VEHICLE EXTERIOR		MEANS 3 - FREED BY NON-MECHANICAL					
						15 - NON-N 99 - OTHE	NOTORIST R/UNKNOWN		MEANS		CHANICA		
S	NAME: LAS	T, FIRST, MIDDI	.E					DAT	E OF BIRTH		AGE	GENDER	
TNES	ADDRESS:	STREET, CITY,	STATE 710										
P								CONTACT PHONE - INCLUDE AREA CODE					
	NAME: LAS	T, FIRST, MIDDI	E					DATE OF BIRTH AGE GENDER					
WITNESS	ANNDESS, STREET CITY STATE 71D						de la constant						
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
1	NAME: LAS	T, FIRST, MIDDL	.E					DATI	E OF BIRTH		AGE	GENDER	
NESS													
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