CHIED DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER*					
PHOTOS TAKEN	OH-2 OH-3 LOCAL INFORMATION							2,0,2,1,-,0,0,0,5,9,7,0,					
	SECONDARY CRASH					NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR				
PRIVATE PROPERTY CITY OF Kent Police					1- SOLVED 0 1				U I 99 - UNKNOWN				
COUNTY* LOCALITY*		CITY, VILLAGE, TOWNSH	IIP*				CRASH DATE /	CRASH SEVERITY 1 - FATAL					
0 / 1 3-7	TOWNSHIP TOWNSHIP	H LOCATION ROAD	NAME			ROAD TYPE	10 4 1 6 2 0 2 1 LATITUDE DE		2 - SERIOUS INJURY SUSPECTED				
ROUTE TYPE ROUTE NU	2-SOUT 3 3-EAST	Н	, KAME				Training the second		3 - MINOR INJURY				
	DAD, MILEPOST, H	Ulice #)	ROAD TYPE	LONGITUDE		SUSPECTED 4 - INJURY POSSIBLE							
ROUTE TYPE ROUTE NU	MBER PREFIX 1-NORT 2-SOUT 3-EAST	Н				ST			5 - PROPERTY DAMAGE				
REFERENCE POINT	DIRECTION 4-WES	ROUTE TYPE	oF.		ROAD TYPE		[8 ₁ 1 _e 3 ₁ 5 ₁ 7	INTERSECTION REL	ONLY				
1 - INTERSECTION 2 - MILE POST	FROM REFERENCE 1 - NORTH	IR - INTERSTATE RO		AL - ALLEY	HW-HIGHWAY	RD - ROAD	54	RSECTION OR ON API					
1 3-HOUSE #	3- EAST	US - FEDERAL US RO SR - STATE ROUTE	AV - AVENUE BL - BOULEVARD		SQ - SQUARE ST - STREET	☐ WITHIN INTE	PCHANGE AREA	NUMBER OF APPROACHES					
DISTANCE	DISTANCE	CR - NUMBERED COU	NTY ROUTE	CR - CIRCLE		TE - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHE						
FROM REFERENCE	2 5557	TR - NUMBERED TOW ROUTE	NSHIP	DR - DRIVE		TL - TRAIL WA - WAY	D DOADWAY DD		of the law seed of				
1,0,	2 3-YARDS	ROUTE		HE - HEIGHTS	PL - PLACE		ROADWAY DIV	IDED					
LOCATION 1 - ON ROADWA	N OF FIRST HARMFUL EV				H COLLISION/IMPA	ACT	DIRECTION OF TRAVE		EDIAN TYPE				
0 1 2-ON SHOULD	ER 10-DRIVEV	VAY/ALLEY ACCESS		BETWEEN TWO MOTOR	5 - BACKING		1 - NORTH		DED FLUSH MEDIAN FEET)				
3 - IN MEDIAN 4 - ON ROADSID		Y GRADE CROSSING D USE PATHS OR		VEHICLES IN	6 - ANGLE 7 - SIDESWIPE, SAN	AE DIRECTION	3- EAST 4- WEST		2 - DIVIDED FLUSH MEDIAN (≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN				
5 - ON GORE 6 - OUTSIDE TR	TRAILS				8 - SIDESWIPE, OPF 9 - OTHER / UNKNO		4- WEST						
7 - ON RAMP	14-TOLL B	OOTH / UNKNOWN	,	TILAD-ON	7 OTHER TOWNS		A. 1.	(ANY	TYPE) ER/UNKNOWN				
8 - OFF RAMP	77-01HER												
WORK ZONE RELAT	TED	WORK ZONE TY 1 - LANE CLOSURE	TPE		ON OF CRASH IN W - BEFORE THE 1ST		CONTOUR 2	conditions 2	SURFACE 2				
WORKERS PRESEN	IT	2 - LANE SHIFT/CRO 3 - WORK ON SHOUL		2	WARNING SIGN - ADVANCE WARNI	NG AREA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE				
LAW ENFORCEMEN	NT PRESENT	OR MEDIAN		3	-TRANSITION ARE		2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP,				
ACTIVE SCHOOL ZO	DNE	4 - INTERMITTENT 5 - OTHER	OR MOVING W		- ACTIVITY AREA - TERMINATION A	REA	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT				
LIGHT O	CONDITION		WE	ATHER			4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIR	3 - BRICK/BLOCK				
1 - DAYLIGHT			LEAR	6 - SNOW) - OTHEROMANOWN	OIL, GRAVEL	STONE				
1 4 1	2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 2 - CLOUDY 7 - SEVERI 3 - FOG, SMOG, SMOKE B - BLOWII					T, SNOW		6 - WATER (STANDII MOVING)) - DIKI				
						ZING DRIZZLE	Mill by	7 - SLUSH	9 - OTHER/UNKNOWN				
9 - OTHER / UNK				,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				9 - OTHER/UNKNOW	N				
NARRATIVE	man Falina e i në								Indicate the north				
UNIT 1 WAS T	FURNING RI	GHT ONTO	CRAI	N				1	an "N" on the compass diagram.				
AVE. FROM	N. WATER S	T. UNIT 1 V	VENT ()FF									
	DURING THI												
2000				UCKA			/2//	LAKE ST.					
	LE. UNIT 1 V			D. CELLER		/	12/	TAKE BY					
	PON THE ST		EVI. L										
TRAILER TI	HE TRUCK V	VAS HAULI	ING WA	AS A		THE	MPPIC SMENAL UIT	CRAIN AVE.					
DRAGON LO	OWBOY WIT	H A WEST	VIRGI	NIA			11 af	UTRAFF FOR F					
REGISTRAT	TION OF C32	1493.			NOT TO SCALE								
				They are		2 00°	T.						
	W.			The state of									
					the state of								
CRASH REPORTED	DATE / TIME	DISPATCH DATE	/TIME	AR	RIVAL DATE / TIM	E	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY				
0,4,1,6,2,0,2,1),4,1,6,2,0,2,		X POLICE AGENCY				
TOTAL TIME	OTHER T	OTAL OFFICER	'S NAME*				CER'S NAME*	ונונון וויוויוי	MOTORIST				
ROADWAY CLOSED INV			dand, K	•	Ennemoser, James			SUPPLEMENT (CORRECTION OR ADDITION					
0 0 0 0	4 5 0	9 1 2	OFFICER'	S BADGE NUMBE	R*		BY OFFICER'S BADGE	NUMBER*	TE AM EXISTING REPORT SENT TO COPS)				



LOCAL REPORT NUMBER

2 + 0 + 2 + 1 + - + 0 + 0 + 0 + 0 + 5 + 9 + 7 + 0 +

UNIT#	OWNER NAME: LAST, FIRST, MIDDLE (SAME AS ORIVER) INSTANT GROWTH HYDROSEEDING LLC DAMAGE SCALE										
	UNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER) DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE										
140 VIP DR ,MASONTOWN ,WV 26542 2 - MINOR DAMAGE 4 - DISABLING DAMAGE											
	CIAL CARRIER: NAME, ADD DR ,MASONTOW		PHONE: INCLUDE AREA CODE 6	9 - UNKNOWN DAMAGED AREA(S)							
LP STATE	LICENSE PLATE#		E IDENTIFICATION #		VEHICLE YE	AR VEHICLE MAKE		ICATE ALL THAT			
$\lfloor W_{\perp} V_{\perp}$	BA540661		$D_1 V_1 6_1 F_1 L_1 G_1 C_1 I_1 3$	<u> </u>	2 0 1		12		12		
X INSURA	INSURANCE COM IED CINCINATTI		INSURANCE POLICY # EPP0549989		COLOR RED	CASCADIA	10 12	\2	10 12 1		
Х сомме	TYPE OF USE RCIAL GOVERNMENT	- 11001 01102	US DOT # _ 6 _ 3 _ 5 _ 5 _ 7 _ 3 _	TOWE	D BY: COMPANY	Y NAME	9 9 3	3 9	9 3		
INTER DEVIC EQUIP	LOCK E PED HIT/SKIP UN	IT #UCCUPANIS	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	ᅵᆜᅝ		CLASS # PLACARD ID #	8 7 6 5	74	8 7 6 5		
UNIT TYPE	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS) # OF TRAILING UNITS	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	13 - SNOWMOBILE 19 14 - SINGLE UNITTRUCK 20 15 - SEMI-TRACTOR 21	9 - BUS (16+) 0 - OTHER VE 1 - HEAVY EQ 2 - ANIMAL W		23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	10	12 11 1 1 150 2 8 3 8 4 7 5 6	3 3 12		
2	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRE 1-YES 2-NO 9-OTHER/UNK	0	1 - DRIVER ASSISTANCE 4	- CONDITION - HIGH AUTO - FULL AUTO		9 - UNKNOWN	10 11 12 1 10 10 10 10 10 10 10 10 10 10 10 10 1	2 1	11 12 1 10 10 2 9 3		
O 1 SPECIAL FUNCTION	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER	12-MILITARY 17 13-POLICE 18	5 - FARM 7 - MOWING 8 - SNOW REM 9 - TOWING		21-MAIL CARRIER 99-OTHER/UNKNOWN	8 7 6 5	7,	8 7 5 5		
1 0 CARGO BODY TYPE	1 - NO CARGO BODYTYPE /NOTAPPLICABLE 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	5 - INTERMODAL CONTAINER B - CHASSIS 9 . 6 - CARGO VAN/ENCLOSED BOX 13	- POLE - CARGOTAN D-FLAT BED I - DUMP		12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	12 9 3	9 3 3 9	3 9 3		
VEHICLE DEFECTS	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT		- MOTOR TRO - DISABLED ACCIDENT	FROM PRIOR	99 - OTHER / UNKNOWN	6 - NO DAMAG	T	6 6		
NON-MOTORIST LOCATION AT IMPACT	1 - INTERSECTION – MARKED CROSSWALK 2 - INTERSECTION – UNMARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	7 - SHOULDER/ROADSIDE 10 8 - SIDEWALK 11	- DRIVEWAY	ROSSING ISLAND ACCESS SE PATHS OR	12-FIRST RESPONDER AT INCIDENT SCENE 99-OTHER/UNKNOWN	□-TOP [13]	_	DERCARRIAGE [14] AREAS [15] E [16]		
ACTION		1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 16	-ENTERING	PLAYING	18 - APPROACHING OR LEAVING VEHICLE 19-20-OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DAM	RTO UNIT 15-V	ITACT INDERCARRIAGE /EHICLE NOT AT SCENE JNKNOWN		
1,1	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED	7-LEFT OF CENTER 8-FOLLOWING TOO CLOSE / ACDA 9-IMPROPER LANE CHANGE 10-IMPROPER PASSING 11-DROVE OFF ROAD	A PARKED POSITION 18 14-STOPPED OR PARKED ILLEGALLY 19 15-SWEVING TO AVOID	EQUIPMEN -LOAD SHIF SPILLING	G DEFECTIVE IT TING/FALLING/	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY				
	6 - IMPROPER TURN	12 - IMPROPER BACKING	20	- IN PROPER	- UNICCURA		# OF THROUGH LANES ON ROAD		RADE CROSSING		
	OF EVENTS	/ FOURTH AND THE	EVENTS			eline talendi	2	1 2 - INV	INVOLVED OLVED-ACTIVE CROSSING OLVED-PASSIVE CROSSING		
2 4 0	1 - OVERTURN/ROLLOVER 2 - FIREJEXP_OSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - GAN OFF ROAD LEFT 10 - CROSS MEDIAN	OPPOSITE DIRECTION OF TRAVEL 18. 12 - DOWNHILL RUNAWAY 19. - OTHER NON-COLLISION 20. 14 - PEDESTRIAN 21. 15 - PEDALCYCLE 21.		FARM DEER OTHER HICLE IN T OTOR VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT 3 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE CBJECT	UNIT/N	ON-MOTORIST DII 1 - NOR 2 - SOU	RECTION NTH 5 - NORTHEAST TH 6 - NORTHWEST TT 7 - SOUTHEAST		
5 6	/ CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER	38-OVERHEAD SIGN POST 44 39-LIGHT/LUMINARIES 45 SUPPORT 46 40-UTILITY POLE 47 41-OTHER POST, POLE OR SUPPORT 48	- STRUC - CURB - DITCH - EMBANKMI - FENCE - MAILBOX - TREE - FIRE HYDR	ENT	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	UNIT SPEED O O 3 POSTED SPEED	_1	9 - OTHER / UNKNOWN ETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED		
1	FIRST HARMFUL EVEN	1	ARMFUL EVENT				2 5				

OHIO DEP	Some Department Motorist / Non-Motorist								LOCAL REPORT NUMBER					
WITH THE SALVANE INITIONALLY IN THE SALVANE IN THE								2,0,2,1,-,0,0,0,0,5,9,7,0,						
UNIT#									DATE OF BIRTH AGE GENDER					
0.1	LANSBERRY, ARNOLD, WILLIAM							0 2 / 1 5 / 1 9 5 1 7 0 M						
ADDRESS: STREET, CITY, STATE, ZIP									CONTACT BLICKE - WELLING AREA CODE					
43 PIN	VE ALY	,KINGWOOD ,W	V 26	537										
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)	riore	INJURED	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-Com	PLIANT SEATING POSITION	AIR BAG US	AGE EJECTIO	N TRAPPED	
5	BY							0 4	MC HELMET 0 1			11	1	
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	SE CHAR	GED	LOCAL	OFFENSE DESC		CITATIO	N NUMBER			
$\mathbf{W} \mathbf{V}$				331.37				Driving U	Jpon Sid	lewal		62497		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		RIVER ISTRACTED		HOL / DRUG SUSPI		CONDITION	STATUS TYP	HOL TEST PE VALUE		RUG TEST(S) LT select up to	
1			BY	Y 1		COHOL MAF	RIJUANA	1	1 1		1	1		
UNIT #	MAME. LACT	FIRST, MIDDLE				HER DRUG				DATE OF BIRTH		AGE	GENDE	
OMII #	MANIE: LASI,	rikai, miidut t							,	/		Ade	GENDE	
ADDRESS.	STREET, CITY, S	TATE 71D	-					n de la composition della comp	CONTACT D	HONE - INCLUDE AREA C				
ADDILLOS.	. 31 11 1, 3	TATE, ZIF							CUNTACT	HUNE - INCLUDE AREA C	DOF			
INHIDIES	INJURED	EMS AGENCY (NAME)		INTURED	TAKEN TO	MEDICAL FACILITY	(hane curve	SAFETY EQUIPMENT		SEATING POSITION	N AIR BAG US	SAGE EJECTIO	N TRAPPE	
	TAKEN BY	Elle Merite Lilling		III OKED	TRICEIV 10.	MEDIONE INVIETI	SHAME, ELLI	USED	DOT-COM	PLIANT	AIR BAG USAGE EJECTION TRAPP		I IMATEL	
OL STATE	OPERATOR	LICENSE NUMBER	. 101	OFFEN	SE CHAR	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATIO	N NUMBER		
							CODE							
OL CLASS	ENDORSEMEN'	T RESTRICTION SELECT	JPT03 DI	RIVER	ALCO	HOL / DRUG SUSPI		CONDITION		HOL TEST		RUG TEST		
	SELECT UP 702	A 5 () () () ()	B.	ISTRACTED Y	AL	COHOL MAI	RIJUANA		STATUS TYP	PE VALUE	STATUS	YPE RESU	ILT SELECT UP TO	
			ارت		01	THER DRUG		ا ا						
UNIT#	NAME: LAST	, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER					
		DEADY CONTINUES.		A STATE OF	TO B									
ADDRESS:	STREET, CITY, S	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
Ti-b.			See.		10 3		Plat			1 1 1	1 1	1 1		
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-Com		N AIR BAG US	SAGE EJECTIO	N TRAPPE	
	BY L									MC HELMET				
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	SE CHAR	RGED	CODE	OFFENSE DESC	RIPTION		CITATIO	N NUMBER		
OL CLASS	ENDORSEMEN	T RESTRICTION SELECT		RIVER	41.00	OHOL / DRUG SUSPI			ALCO	HOL TEST		RUG TEST	'S)	
OL CLASS	2FFEC Nb 10 5			ISTRACTED	proof.	STREET, STREET	RIJUANA	CONDITION	STATUS TYP				ILT SELECT UP II	
					01	THER DRUG								
	JRIES	SEATING POSITION	NEWS THE	AIR BAG	AT SA	OL CLAS	S	OL RESTRIC	T10N(S)	DRIVER DISTRAC	TION	TEST S	TATUS	
L-FATAL	SERIOUS INJURY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)		EPLOYED OYED FRONT		1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT		1 - NOT DISTRACTED 2 - MANUALLY OPERATIN		- NONE GIVEN -TEST REFUSE		
	MINOR INJURY	2-FRONT-MIDDLE		OYED SIDE		3-CLASS C		3 - CORRECTIVE LE		ELECTRONIC COMMUN	ICATION 3	-TEST GIVEN, C	ONTAMINATE	
- POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND LEFT SIDE		OYED BOTH FR	ONT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DEVICE (TEXTING, TYP DIALING)		-TEST GIVEN, F		
5 - NO APPAREN	NT INJURY	(MOTORCYCLE PASSENGER)		PPLICABLE Oyment unkn	nwn	5 - M/C MOPED ONLY		5 - EXCEPT CLASS 6 - EXCEPT CLASS		3 - TALKING ON HANDS-FR COMMUNICATION DEV	REE	-TEST GIVEN, F		
THE RESERVE AND THE PERSON NAMED IN	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE			Mad	6 - NO VALID OL		& CLASS B BUS		4 - TALKING ON HAND-HE		UNKNOWN		
L - NOT TRANSP /TREATED A		7 - THIRD - LEFT SIDE		EJECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH	LAN F	ALCOHOLT	EST TYPE	
- EMS		(MOTORCYCLE SIDE CAR) 8-THIRD - MIDDLE	1-NOTE			H - HAZMAT		RESTRICTIONS		ELECTRONIC DEVICE		- NONE - BLOOD		
3 - POLICE 9 - OTHER / UNI	KNOWN	9-THIRD - RIGHT SIDE		IALLY EJECTED .ly ejected		M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PEI RESTRICTIONS	RMIT	6 - PASSENGER 7 - OTHER DISTRACTION		- URINE		
8500	1243	10 - SLEEPER SECTION OF TRUCK CAB		PPLICABLE		N-TANKER		10 - LIMITED TO DA		INSIDE THE VEHICLE		- BREATH		
SAFETY E 1 - NONE USED	QUIPMENT	11 - PASSENGER IN OTHER		TRAPPED		Q - MOTOR SCOOTER		11 - LIMITED TO EM 12 - LIMITED - OTH		8 - OTHER DISTRACTION (THE VEHICLE	DUISIDE 5	-OTHER		
	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTT		110/5	R - THREE-WHEEL MK S - SCHOOL BUS	OTORCYCLE	13 - MECHANICAL D	EVICES	9-OTHER/UNKNOWN		DRUG TES	STTYPE	
3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRIC		ICATED BY	2 - 200000 002			(SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION		1 - NONE 2 - BLOOD				
	& LAP BELT USED FRAINT SYSTEM –	12 - PASSENGER IN UNENCLOSED CARGO AREA	3 - FREE	D BY		X - TANKER / HAZMAT		ADAPTIVE DEV 14 - MILITARY VEHI		1 - APPARENTLY NORMAL		- URINE		
FORWARD F	ACING	13 - TRAILING UNIT	NON-A	MECHANICAL N	MEANS	GENDER	₹	15 - MOTOR VEHICL		2 - PHYSICAL IMPAIRMEN 3 - EMOTIONAL (E.G. DEPR		- OTHER		
6 - CHILD REST REAR FACIN	IRAINT SYSTEM − VG	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		AIR BRAKES 16 - OUTSIDE MIRR	n D	ANGRY, DISTURBED)	D	RUG TEST	The second second	
7 - BOOSTER SE		15 - NON-MOTORIST				M - MALE U - OTHER / UNKNOWN	V	17 - PROSTHETIC AL		4 - ILLNESS 5 - FELL ASLEEP, FAINTED		- AMPHETAMIN - BARBITURATE		
8 - HELMET US 9 - PROTECTIVI		99 - OTHER / UNKNOWN						18-OTHER		FATIGUED, ETC.	3	- BENZODIAZE		
(ELBOW, KN	IEES, ETC.)									6- UNDER THE INFLUENCE OF MEDICATIONS / DRU	JGS 4	- CANNABINOIS)S	
.O - REFLECTIVI .1 - Lighting —										/ALCOHOL 9-OTHER/UNKNOWN	AND SHOW THE PERSON	-COCAINE -OPIATES/OPI	0105	
/ BICYCLE 0	ONLY										7	-OTHER		
99 - OTHER / UNI	KNOWN					ATT STATE EL					8	- NEGATIVE RE	SULTS	

OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER							
		- N - U X - X	1 1 7		2		2 0 2 1	0 _ 0	0,0,5	9.7	'_0			
UNIT#		ST, FIRST, MIDDLE	COTT					E OF BIRTH	[AGE	GENDER			
	01 ADAMS, CODY, SCOTT							6,/,1		2 3	M			
a l	388	Y,KINGWOO	ID WV 26	537			CONTACT PHONE	- INCLUDE AREA CO	DOE					
INJURIES	INJURED	EMS Agency (NAME))D , W Y 20.	INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY FOILIPMENT	L	SEATING POSITION	AID PAC USAGE	LEIECTION	TRAPPE			
, 5	TAKEN BY				inat i sincinizi del i i	USED 0 4	MC HELMET	0 3	1 1	1	1			
UNIT#	NAME: LA	ST, FIRST, MIDDLE					DAT	E OF BIRTH	T	AGE	GENDER			
								. /			, GENDEN			
ADDRESS	ADDRESS: STREET, CHY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
ADDRESS														
INJURIES	TAKEN	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACI	ILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPE			
	BY										ı			
UNIT#	NAME: LAS	ST, FIRST, MIDDLE					DAT ,	E OF BIRTH		AGE	GENDER			
ADDRESS	: STREET, CITY	STATE 7IP					CONTACT BUONE	/						
ADDRESS	· orkizzij orki	, 511112, 211					CONTACT PHONE	CONTACT PHONE - INCLUDE AREA CODE						
	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACE	LITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
	TAKEN BY					USED	DOT-COMPLIANT MC HELMET							
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER			
							1							
ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE					
TALBURYES								1 1	1 1					
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACI	LITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
	INJU	JRIES	SAFETY	EQUIPMENT USED	R WEST	SEATING POS			AIR BAG U	SACE				
1 - FATA	AL .		1 - NONE US	ED-	A September 1	T - LEFT SIDE		1 - NOT DE	National Control of the Control of t	NGE.				
2 - SUS	PECTED SE	RIOUS INJURY		OCCUPANT	ER) 2 - DEPLOYED FRONT									
FIRST R		NOR INJURY	3 - LAP BELT	R BELT ONLY USED	3 - DEPLOYED SIDE									
(PAYS) PURPLE	SIBLE INJU PPARENT 1			R & LAP BELT USED	4 - DEPLOYED BOTH ENGER) FRONT/SIDE									
3 110.				ESTRAINT SYSTEM - 5 - SECOND - MIDDLE			5 - NOT APPLICABLE							
1 - NOT	TRANSPOR	TAKEN BY	FORWARD	FACING 6 - SECOND - RIGHT SIE ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE			9 - DEPLOYMENT UNKNOWN							
	ATED AT S		REAR FAC		(MOT	ORCYCLE SIDE	CAR)		EJECTIO	N	William .			
2 EMS			7 - BOOSTER			D – MIDDLE D – RIGHT SIDE		1 - NOT EJ	- NOT EJECTED					
3 - POLI	CE ER/UNKNO	IWN	8 - HELMET	USED IVE PADS USED	The state of the s	PER SECTION (2 - PARTIALLY EJECTED						
, 01111		IDER	A PARTY OF THE PAR	(NEES, ETC.)	ENGER IN OTHI O AREA (NON-TR		3 - TOTALLY EJECTED 4 - NOT APPLICABLE							
F-FEMA	Marketon Control			IVE CLOTHING		ICK-UP WITH CAF ENGER IN UNE		TRAPPED						
M - MALE			11 - LIGHTING / BICYCLE	E ONLY CARGO AREA			NOLUGED	1 - NOTTR	NOTTRAPPED					
U-OIHE	R / UNKNO	WN	99 - OTHER / L	UNKNOWN 13 - TRAILING UNIT 14 - RIDING ON VEHICLE			EXTERIOR		ED BY MECHANICAL					
0-10					(NON-1	TRAILING UNIT)		MEANS 3 - FREED	BY NON-ME	CHANIC	NI .			
					15 - NON-N 99 - OTHE	R/UNKNOWN		MEANS		CHANICA				
NAME: LAS	T, FIRST, MIDD	LE					DATI	E OF BIRTH		AGE	GENDER			
AUDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COL	ЭЕ					
NAME: LAS	T, FIRST, MIDD	E .			_		DATI	E OF BIRTH		AGE	CENDER			
							DATE OF BIRTH AGE GENDER							
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
	- Marin							1 1 1						
NAME: LAS	T, FIRST, MIDDI	LE .					DATE	OF BIRTH		AGE	GENDER			
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
		450						AND AREA COL	1 1		p 3			
	-	7770												