| OF PUBLIC SAFETY TRAFFIC CRASH | REPORT *DENOTES | S MANDATORY FIELD FOR SUF | PPLEMENT REPORT | , | OCAL REPORT NUMBER | * |
|---|--|--|---|---|--|---|
| □ 0H-2 X 0H-3 | 3 LOCAL INFORMATION 2 0 2 4 - 0 0 0 0 3 2 6 2 | | | | | |
| PHOTOS TAKEN OH-1P OTHER | REPORTING AGENCY NAME | k | NCIC* | HIT/SKIP | NUMBER OF UNITS | UNIT IN ERROR |
| SECONDARY CRASH PRIVATE PROPERTY | City of Kent Pol | ice | 0,6,7,0,3 | 1 - SOLVED | 0_2_0 | 1 98 - ANIMAL 99 - UNKNOWN |
| COUNTY* LOCALITY* LOCATION: CIT | Y, VILLAGE, TOWNSHIP* | | | CRASH DATE / | 17 (CO)(0) | SH SEVERITY |
| 6 7 1 2-VILLAGE Kent | | | | 03032024 | /1004 3 | - FATAL - SERIOUS INJURY |
| A SOURCE STORY OF THE STORY OF | LOCATION ROAD NAME | | ROAD TYPE | LATITUDE DE | | SUSPECTED |
| S-SOUTH S-SOUTH S-SOUTH S-W. MEET | WATER | | $S \setminus T$ | 41,15,0 | 1.0.7. | - MINOR INJURY SUSPECTED |
| W-WEST | REFERENCE ROAD NAME (RO | OAD, MILEPOST, HOUSE #) | ROAD TYPE | LONGITUDE | | - INJURY POSSIBLE |
| ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST | SUMMIT | , | 5-20-25-20-20-20-20-20-20-20-20-20-20-20-20-20- | 25 St 525 525 500 | | - PROPERTY DAMAGE |
| | Section Control Contro | | $S_{\perp}T$ | -8 ₁ 1 ₀ 3 ₅ 8 | | ONLY |
| REFERENCE POINT DIRECTION FROM REFERENCE N - NORTH IR | - INTERSTATE ROUTE(TP) | ROAD TYP AL - ALLEY HW- HIGHW | | GE | INTERSECTION RELATED | |
| 1 2-MILE POST S-SOUTH US | - FEDERAL US ROUTE | AV - AVENUE LA - LANE | SQ - SQUARE | MITHIN INTE | RSECTION OR ON APPROA | 5 . |
| | - STATE ROUTE | BL - BOULEVARD MP - MILEPO | ST - STREET TE - TERRACE | X WITHIN INTE | RCHANGE AREA NUM | BER OF APPROACHES |
| DISTANCE DISTANCE CR FROM REFERENCE UNIT OF MEASURE | - NUMBERED COUNTY ROUTE | CR - CIRCLE OV - OVAL CT - COURT PK - PARKW | | | ROADWAY | |
| 1 - MILES TR 2 - FEET | - NUMBERED TOWNSHIP ROUTE | DR - DRIVE PI - PIKE | WA - WAY | ROADWAY DIV | /IDED | |
| 3-YARDS | | HE - HEIGHTS PL - PLACE | | | | |
| LOCATION OF FIRST HARMFUL EVEN | (C) | MANNER OF CRASH COLLISION | | DIRECTION OF TRAVE | L MEDIAN | NTYPE |
| 1-ON ROADWAY 9-CROSSOVE 2-ON SHOULDER 10-DRIVEWAY | VALLEY ACCESS | NOT COLLISION 4 - REAR-TO- BETWEEN 5 - BACKING | REAR | N - NORTH | 1 - DIVIDED F (< 4 FEET | LUSH MEDIAN |
| U 3-IN MEDIAN 11-RAILWAY | GRADE CROSSING | TWO MOTOR VEHICLES IN 6-ANGLE | | S - SOUTH E - EAST | | LUSH MEDIAN |
| 4 - ON ROADSIDE 12-SHARED U 5 - ON GORE TRAILS | | | PE, SAME DIRECTION PE, OPPOSITE DIRECTION | W-WEST | (≥4 FEET 3 - DIVIDED, D | DEPRESSED MEDIAN |
| 6 - OUTSIDE TRAFFIC WAY 13-BIKE LAN | 3- | HEAD-ON 9-OTHER/U | | | 4 - DIVIDED, R | RAISED MEDIAN |
| 7 - ON RAMP 14-TOLL BOOT 8 - OFF RAMP 99-OTHER / U | | | | | 9 - OTHER/UN | S. P. Carlotte |
| | WARK ZONE TYPE | LOCATION OF CDACE | I IN WORK ZONE | CONTOUR | CONDITIONS | SURFACE |
| WORK ZONE RELATED | WORK ZONE TYPE LANE CLOSURE | LOCATION OF CRASH | E 1ST WORK ZONE | (24) | 1 | 2 |
| WORKERS PRESENT 2 | LANE SHIFT/CROSSOVER | WARNING S | SIGN VARNING AREA | 1 1 | and the same of th | |
| LAW ENFORCEMENT PRESENT | WORK ON SHOULDER OR MEDIAN | 3-TRANSITIO | | 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE | 1 - DRY 2 - WET | 1 - CONCRETE 2 - BLACKTOP, |
| | INTERMITTENT OR MOVING W | | | 3 - CURVE LEVEL | 3 - SNOW | BITUMINOUS, ASPHALT |
| ACTIVE SCHOOL ZONE 5 | OTHER | 5 - TERMINAT | ON AREA | 4 - CURVE GRADE | 4 - ICE | 3 - BRICK/BLOCK |
| LIGHT CONDITION | | ATHER | | 9 - OTHER/UNKNOWN | 5 - SAND, MUD, DIRT, | 4 - SLAG, GRAVEL, |
| 1 - DAYLIGHT 1 2 - DAWN/DUSK | 1-CLEAR 2-CLOUDY | 6 - SNOW 7 - SEVERE CROSSWIND | ns. | | OIL, GRAVEL 6 - WATER (STANDING, | STONE |
| 3 - DARK – LIGHTED ROADWAY | 110121 | OKE 8-BLOWING SAND, SOI | | | MOVING) | 5 - DIRT 9 - OTHER/UNKNOWN |
| 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING | 4 - RAIN 5 - SLEET, HAIL | 9 - FREEZING RAIN OR I 99 - OTHER / UNKNOWN | REEZING DRIZZLE | | 7 - SLUSH | 3-01HEROUNKNOWN |
| 9 - OTHER / UNKNOWN | J- SEEE I, IIAIE | 77-0111ER7 ONKNOWN | | | 9 - OTHER/UNKNOWN | |
| NARRATIVE | | | | - | A | Indicate the north |
| | | | | | | direction with an "N" on the |
| UNIT 2 WAS TRAVELING EA | ST ON SUMMIT | | | | | compass diagram. |
| STREET THROUGH THE IN | TERSECTION AT | | | | | |
| SOUTH WATER STREET. UN | NIT 1 DAN THE D | FD | | | | |
| | | | | 1111 | NOT TO S | BOALE A |
| LIGHT TRAVELING NORTH | I ON SOUTH WA | TER | | S.WATERST. | | A |
| AND STRUCK UNIT 2. | | | | S.WAT | 1 | |
| | | - | | | SUMMITS | ST. |
| | | | 2 | TRAFUNIT 2NAI | - G | |
| | | <i>i</i> | | | | |
| | | | | j ~ | _i | |
| | | | | 0 | 1 | |
| | | | | | | |
| | | | | | i | |
| | | | | | i | |
| | | | | | i | |
| CRASH REPORTED DATE / TIME | DISPATCH DATE /TIME | ARRIVAL DATE | /TIME | SCENE CLEARED | | EPORT TAKEN BY |
| | DISPATCH DATE / TIME $0.3.2.0.2.4.1/.1.0.1$ | | | | I⊽I | POLICE AGENCY |
| | 0 3 2 0 2 4 / 1 0 1 aL OFFICER'S NAME* | 0, 0, 3, 0, 3, 2, 0, 2, 4 | CHECKED BY OFF | 0.3.0.3.2.0.2.4 CER'S NAME* | I⊽I | |
| $0_{1}3_{1}0_{1}3_{1}2_{1}0_{1}2_{1}4_{1}/_{1}1_{1}0_{1}0_{1}4_{1} _{0_{1}}3_{1}0$ | 0,3,2,0,2,4,/,1,0,1,0,1,0,1,0,1,0,1,0,1,0,1,0,1,0,1 | $\frac{0}{10}, \frac{0}{3}, \frac{3}{0}, \frac{3}{3}, \frac{2}{2}, \frac{0}{0}, \frac{2}{4}$ and B | CHECKED BY OFFI | 0.3.0.3.2.0.2.4 cer's name* er, James | 4 ₁ / ₁ 1 ₁ 0 ₁ 2 ₁ | POLICE AGENCY MOTORIST SUPPLEMENT (CORRECTION OR ADDITION |
| | 0,3,2,0,2,4,/,1,0,1, AL OFFICER'S NAME* Kunka, Leon OFFICER'S | 0,0,3,0,3,2,0,2,4 ard B B BADGE NUMBER* | CHECKED BY OFFI Ennemos CHECKED | 0.3.0.3.2.0.2.4 CER'S NAME* | 4 ₁ / ₁ 1 ₁ 0 ₁ 2 ₁ | POLICE AGENCY MOTORIST SUPPLEMENT |

| of Pu | BLIC SAFETY UNIT | | | | | The same of the sa | 0 |
|-----------------------------------|--|--|--|---|--|--|---|
| UNIT# | OWNER NAME: LAST, FIR | | RIVER) | OWNER PHONE: INC | UDE AIEA CODE (R ISAMEAS DRIVER) ORC 149.43(A)(1) | 2 0 2 4 - (| DAMAGE |
| | YEE, NATHA | | | Redacted per | ORC 149.43(A)(1) | The state of the s | AMAGE SCALE |
| | DORESS: STREET, CITY, STATE | | ALLEY CITY,C | OH 44280 | | 3 1 - NONE 2 - MINOR DA | 3 - FUNCTIONAL DAMAGE MAGE 4 - DISABLING DAMAGE |
| | IAL CARRIER: NAME, ADD | | | | PHONE: INCLUDE AREA CODE | | 9 - UNKNOWN |
| P STATE | LICENSE PLATE # | VEH | IICLE IDENTIFICATION # | VEHICLE YE | AR VEHICLE MAKE | | MAGED AREA(S) ATE ALL THAT APPLY |
| | KGL5156 | 1 GKKV | $T_1E_1D_1G_1C_1J_13_15_14_1$ | $2 \cdot 1 \cdot 3 \cdot 2 \cdot 0 \cdot 1$ | 2 GMC | 12 | 12 1 |
| X INSURAI VERIFI | | | INSURANCE POLICY # 826758464 | BLK | ACADIA | 10 10 1 2 | 10 11 12 2 |
| COMME | TYPE OF USE RCIAL GOVERNMENT | IN EMERGENCY RESPONSE | US DOT # VEHICLE WEIGHT GVWR/GCWR | City Service | IV NAME | 9 9 3 4 | 3 9 10 2 3 |
| INTERI DEVICE EQUIP | E HIT/SKIP UNI | T #OCCUPANTS | 1 - ≤10KLBS. 2 - 10,001 - 26K LBS. 3 - >26KLBS. | MATERIAL RELEASED | CLASS # PLACARD ID # | 8 7 6 5 | 7 5 4 |
| 0_1 NITTYPE | 3 - SPORT UTILITY VEHICLE | 7 - MOTORCYCLE 2-WHEE 8 - MOTORCYCLE 3-WHEE 9 - AUTOCYCLE 10 - MOPED OR MOTORIZE BICYCLE 11 - ALL TERRAIN VEHICL (ATV / UTV) | ELED 12 - GOLF CART ELED 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK D 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT | 18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE | 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP | 6 10 9 | 11 12 1 10 1 10 10 10 10 10 10 10 10 10 10 10 |
| _00 | # of TRAILING UNITS WAS VEHICLE OPERATING IN AU | | D - NO AUTOMATION | 3 - CONDITIONAL AUTOMATION | Q - IINKNOWN | 11 12 1 | 6 11 12 1 |
| 2 | MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK | 9 0 | 1 - DRIVER ASSISTANCE ADUS 2 - PARTIAL AUTOMATION | 4 - HIGH AUTOMATION 5 - FULL AUTOMATION | 7 - UNINDWH | 10 11 1 1 1 1 1 9 9 9 3 | 3 9 9 3 |
| 01 SPECIAL UNCTION | 1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER | 9 - BUS - OTHER | 11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT | 16-FARM 17-MOWING 18-SNOW REMOVAL 19-TOWING 20-SAFETY SERVICE PATROL | 21 - MAIL CARRIER 99 - OTHER / UNKNOWN | 8 7 6 5 | 8 7 6 5 |
| O 1 CARGO BODY TYPE | 1 - NO CARGO BODYTYPE /NOTAPPLICABLE 2 - BUS | | THER 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VANVENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL | 8 - POLE 9 - CARGOTANK 10 - FLAT BED 11 - DUMP | 12 - CONCRETE MIXER 13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN | 9 3 9 | 12 12 12 |
| | 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS | 4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT | 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE | 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT | 99-OTHER / UNKNOWN | 6 - NO DAMAGE I | 0] |
| | 1 - INTERSECTION - MARKED CROSSWALK | 3 - INTERSECTION - OTHE | | 9 - MEDIAN/CROSSING ISLAND | 12 - FIRST RESPONDER AT INCIDENT SCENE | | -ALL AREAS [15] |
| N-MOTORIST OCATION T IMPACT | 2 - INTERSECTION - UNMARKED CROSSWALK | 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER I | 7 - SHOULDER / ROADSIDE B - SIDEWALK LOCATION | 10 - DRIVE WAY ACCESS 11 - SHARED USE PATHS OR TRAILS | 99 - OTHER / UNKNOWN | -TOP [13] | T NOT AT SCENE [16] |
| 3_ACTION | 1-NON-CONTACT 2-NON-COLLISION 3-STRIKING 4-STRUCK 5-BOTH STRIKING & STRUCK 9-OTHER / UNKNOWN | 1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - CVERTAKING/PASSING 5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN | 7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED INTRAFFIC 12 - DRIVERLESS | 13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE | 18-APPROACHING OR LEAVING VEHICLE 19-STANDING 20-OTHER NON-MOTORIST 21-STANDING OUTSIDE DISABLED VEHICLE 99-OTHER / UNKNOWN | 0 - NO DAMAG | TO UNIT 15 - VEHICLE NOT AT SCENE |
| 03 | 1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED | 7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSS 9 - IMPROPER LANE CHAN 10 - IMPROPER PASSING 11 - DROVE OFF ROAD | 14 CTODDED OD DADVED | 17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/ SPILLING | 21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION | TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY | 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL |
| | 6-IMPROPERTURN | 12 - IMPROPER BACKING | 10 - Wholid WAT | 20 - IMPROPER CROSSING | | # OF THROUGH LANES ON ROAD | RAIL GRADE CROSSING 1 - NOT INVOLVED |
| | OF EVENTS 1 - OVERTURNIROLLOVER | 6 - EQUIPMENT FAILURE | | 16-RAILWAY VEHICLE | 22 - WORK ZONE MAINTENANCE | _6_ | 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING |
| | 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT | 7 - SEPARATION OF UNIT: 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN | OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE SION WITH FIXED OBJECT | 17-ANIMAL - FARM 18-ANIMAL - DEER 19-ANIMAL - OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE T - STRUCK | EQUIPMENT 23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24-OTHER MOVABLE OBJECT | UNIT/NO | N-MOTORIST DIRECTION 1 - NORTH |
| | 25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER ORABUTMENT 28 - BRIDGE PARAPET | 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARR 34 - MEDIAN GUARDRAIL BARRIER | 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST SIER 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE | 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX | 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL | UNIT SPEED 0 2 5 | DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR |
| F T 0 | 29 - BRIDGE RAIL | 35 - MEDIAN CONCRETE BARRIER | 41 - OTHER POST, POLE OR SUPPORT | 48-TREE | 54 - OTHER FIXED OBJECT | POSTED SPEED | 3 - UNDETERMINED |

99-OTHER/UNKNOWN

2 5

49-FIRE HYDRANT

29-BRIDGE RAIL

30-GUARDRAIL FACE

36 - MEDIAN OTHER BARRIER 42 - CULVERT

☐ FIRST HARMFUL EVENT ☐ 1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER

| 0.717.0 | | | | | | | $2 \cdot 0 \cdot 2 \cdot 4 \cdot -$ | 0_{\perp} | $0_{\perp}0_{\perp}0_{\perp}3_{\perp}2_{\perp}6_{\perp}2_{\perp}$ |
|--------------------------|--|---|---|----------------------------|--------------------------------|--|-------------------------------------|-------------|---|
| UNIT # | OWNER NAME: LAST, FIRE | ST, MIDDLE (SAME AS DRIVER) | DV | OWN Re | edacted per | ORC 149.43(A)(1) | | | AMAGE |
| | BAKES, CAT | | ARY | L | | | 1 - NONE | DAM | AGE SCALE 3 - FUNCTIONAL DAMAGE |
| 6189 I | FIRST AVE ,F | ranklin Twn .(| OH 44240 | | | | 4 2-MINOR | DAMA | |
| | CIAL CARRIER: NAME, ADDR | | 011 11210 | Co | MMERCIAL CARRIER | PHONE: INCLUDE AREA CODE | | 9 - L | NKNOWN |
| | elly balence and the committee of the co | 34.0 A (10.0 Ha) | | ш | 111 | | | | GED AREA(S) |
| | LICENSE PLATE # | | IDENTIFICATION# | 715 | VEHICLE YE | ### THE SHEET HER TO BE SHEET HER SHEET HE SHEET HER SHEET HE SHEET HER SHEET HE SHEET HER SHEET HE SHEET HE SHEET HER SHE SHEET HER SHEET HER SHEET HER SHEET HER SHEET HER SHEET HER SHE | IND | ICATE | ALL THAT APPLY |
| | FXQ2701 | | LE 5 F C2 5 2 ' | /,1,5 | | | 11 12 | | 11 12 1 |
| X INSURA | NCE INSURANCE COMP | | NSURANCE POLICY # A5385508 | | WHI | COROLLA | 10 0 | 2 | 10 12 |
| | TYPE OF USE | | US DOT # | TOW | ED BY: COMPAN | | 10 10 2 | 7 | 10 2 2 |
| COMME | RCIAL GOVERNMENT | IN EMERGENCY RESPONSE | | Cit | y Service | | 9 9 3 | 3 | 9 9 3 |
| INTERI | LOCK | #UCCUPANTS | HICLEWEIGHT GVWR/GCWR 1 - ≤10K LBS. | l_{\Box} | MATERIAL | DUS MATERIAL CLASS # PLACARD ID # | 8 4 7 | 7. | 7 5 7 |
| DEVICE EQUIP | E HIT/SKIP UNI | T . 0 . 2 | 2 - 10,001 - 26K LBS | ᅵ片 | RELEASED PLACARD | | 6 | | 12 7 6 |
| | 1 - PASSENGER CAR | 7 - MOTORCYCLE 2-WHEELED | 3 - >26K LBS. 12-GOLF CART | 18 - LTM0 (L | IVERY VEHICLE) | 23 - PEDESTRIAN / SKATER | 6 | 11 | 12 1 |
| 0.1 | 2 - PASSENGER VAN (MINIVAN) | | | | + PASSENGERS) | 24 - WHEELCHAIR (ANY TYPE) | 10 / | \wedge | 1 1 2 |
| UNITTYPE | 3 - SPORT UTILITY VEHICLE | 9 - AUTOCYCLE | | 20 - OTHER | | 25 - OTHER NON-MOTORIST | · · | - 1 | 0 2 |
| ONTITIE | 4 - PICK UP 5 - CARGO VAN | 10 - MOPED OR MOTORIZED BICYCLE | | | EQUIPMENT L WITH RIDER OR | 26 - BICYCLE 27 - TRAIN | 9 | _ 8 | 3 1 3 |
| | 6 - VAN (9-15 SEATS) | 11 - ALL TERRAIN VEHICLE | 17 - MOTORHOME | | L-DRAWN VEHICLE | 99 - UNKNOWN OR HIT/SKIP | 8 | 7 | 1 5 4 |
| ் | # of TRAILING UNITS | (ATV/UTV) | | | | | 12 | 7 | 6 5 12 |
| | WAS VEHICLE OPERATING IN AU | PUNNUNULS | 0 - NO AUTOMATION | 3 - CONDITI | IONAL AUTOMATION | 9 - UNKNOWN | 11 12 | | 6 11 12 |
| _ | MODE WHEN CRASH OCCURRED | | | 4 - HIGH AU | | , - URINIOWIT | 10 11 1 | 2 | 10 11 1 2 |
| 2 | 1-YES 2-NO 9-OTHER/UNK | NOWN AUTONOMOUS | 2 - PARTIAL AUTOMATION | 5 - FULL AL | JTOMATION | | 9 10 2 3 | 3 | 9 10 2 |
| | 1 - NONE | MODE LEVEL 6 - BUS - CHARTER/TOUR | 11 - FIRE | 16-FARM | | 21 - MAIL CARRIER | 8 4 - | - | 8 4 |
| 0.1 | 2 - TAXI | 7 - BUS - INTERCITY | | 17 - MOWIN | G | 99 - OTHER / UNKNOWN | 8 7 5 | 4 | 8 7 5 4 |
| SPECIAL | 3 - ELECTRONIC RIDE SHARING | | | 18-SNOW R | | | 7 0 5 | | 7 5 |
| FUNCTION | 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER | 9 - BUS - OTHER | 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT | 19-TOWING | | | 6 | | • |
| | 1 - NO CARGO BODYTYPE | 3 - VEHICLE TOWING ANOTHER | | 8 - POLE | GENTIGE TAINGE | 12 - CONCRETE MIXER | | 1 | 2 12 12 |
| $\lfloor 0 \rfloor 1$ | / NOT APPLICABLE | MOTORVEHICLE | 0111.0010 | 9 - CARGOT | TANK | 13 - AUTOTRANSPORTER | 12 | | |
| CARGO BODY | 2 - BUS | 4 - LOGGING | | 10-FLAT B | ED | 14-GARBAGE/REFUSE | FR A Ro | , | √° 3 9 1 3 9 1 3 |
| TYPE | | | 7 - GRAIN/CHIPS/GRAVEL | 11-DUMP | | 99-OTHER / UNKNOWN | | 9 | |
| 1 1 1 | 1 - TURN SIGNALS | 4 - BRAKES | | 9 - MOTOR | | 99 - OTHER / UNKNOWN | 6 | | i i |
| | 2 - HEAD LAMPS 3 - TAIL LAMPS | 5 - STEERING 6 - TIRE BLOWOUT | 8 - TRAILER EQUIPMENT DEFECTIVE | 10 - DISABL ACCIDE | ED FROM PRIOR NT | | | è | 6 6 |
| 0212013 | | | | 41,000,000 | | | - NO DAMAG | E[0] | - UNDERCARRIAGE [14] |
| T E E | 1 - INTERSECTION - MARKED CROSSWALK | 3 - INTERSECTION - OTHER 4 - NIDBLOCK - MARKED | | | /CROSSING ISLAND VAY ACCESS | 12 - FIRST RESPONDER AT INCIDENT SCENE | □- TOP [13] | | - ALL AREAS [15] |
| NON-MOTORIST LOCATION | 2 - INTERSECTION - UNMARKED | CROSSWALK | B - SIDEWALK | | USE PATHS OR | 99 - OTHER / UNKNOWN | 1225 | | STATE OF THE SECTION |
| AT IMPACT | CROSSWALK | 5 - TRAVEL LANE - OTHER LOCATION | | TRAILS | i | | □ - UI | NIT NO | DT AT SCENE [16] |
| | 1 - NON-CONTACT | 1 - STRAIGHT AHEAD | | | ATING A CURVE | 18-APPROACHING OR LEAVING VEHICLE | INIT | IAL P | DINT OF CONTACT |
| 4 | 3-STRIKING 0 1 | 2 - BACKING 3 - CHANGING LANES | 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE | | NG OR CROSSING IED LOCATION | 19-STANDING | 0 - NO DAM | AGE | 14 - UNDERCARRIAGE |
| ACTION | 4 - STRUCK PRE-CRASH | 4 - OVERTAKING/PASSING | | | NG, RUNNING, | 20 - OTHER NON-MOTORIST | 1 2 1-12 - REFE | | UNIT 15-VEHICLE NOT AT SCENE |
| | 5 - BOTH STRIKING ACTIONS | | 11 - SLOWING OR STOPPED | 16 - WORKIN | G, PLAYING NG | 21 - STANDING OUTSIDE DISABLED VEHICLE | 13-T0P | | 99 - UNKNOWN |
| | & STRUCK 9-OTHER / UNKNOWN | 6 - MAKING LEFTTURN | INTIMETIC | | IG VEHICLE | 99 - OTHER / UNKNOWN | | 7.0 | RAFFIC |
| | 1-NONE | 7 - LEFT OF CENTER | | 17 - VISION | OBSTRUCTION | 21 -LYING IN ROADWAY | TDAFFICWAY FLOW | | TRAFFIC CONTROL |
| 195000 5.000 | 2 - FAILURE TO YIELD | 8 - FOLLOWING TOO CLOSE / ACDA | PARKED POSITION | 18-OPERAT | ING DEFECTIVE | 22 - NOT DISCERNIBLE | TRAFFICWAY FLOW 1 - ONE-WAY | | 1 - ROUNDABOUT 4 - STOP SIGN |
| [0,1] | 3 - RAN RED LIGHT | 9 - IMPROPER LANE CHANGE | 14 - STOPPED OR PARKED ILLEGALLY | EQUIPN 19-1 OAD S | MENT HIFTING/FALLING/ | 23 - OPENING DOOR INTO ROADWAY | 2 2 - TWO-WAY | - 1 | 2 - SIGNAL 5 - YIELD SIGN |
| | 4 - RAN STOP SIGN 5 - UNSAFE SPEED | 10 - IMPROPER PASSING 11 - DROVE OFF ROAD | 15 - SWERVING TO AVOID | SPILLIN | VG | 99 - OTHER IMPROPER ACTION | | | 3 - FLASHER 6 - NO CONTROL |
| CIRCUMSTANCES | 6-IMPROPERTURN | 12 - IMPROPER BACKING | 16 - WRONG WAY | 20 - IM PROF | PER CROSSING | | # OF THROUGH LANES | | RAIL GRADE CROSSING |
| SEQUENCE | OF EVENTS | 2007 1 2 3 3 3 3 4 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | | | | | ON ROAD | | 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING |
| 2.0 | 1 - OVERTURN/ROLLOVER | 6 - EQUIPMENT FAILURE | NON-COLLISION 11-CROSS CENTERLINE — | 16 - RAILWA | V VEHIOLE | 22 - WORK ZONE MAINTENANCE | _6_ | _ | 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING |
| 1 2 0 | 2 - FIRE/EXPLOSION | 7 - SEPARATION OF UNITS | OPPOSITE DIRECTION OF | 17 - ANIMAL | | EQUIPMENT | | 1011 | ATABLET BIDEATION |
| 220 00 00 | 3 - IMMERSION | 8 - RAN OFF ROAD RIGHT | 12 - DOWNHILL DINAWAY | 18 - ANIMAL | | 23 - STRUCK BY FALLING, SHIFTING CARGOOR | UNIT/N | IUN-M | OTORIST DIRECTION 1 - NORTH 5 - NORTHEAST |
| 2 | 4 - JACKKNIFE 5 - CARGO / EQUIPMENT | 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN | 13 - OTHER NON-COLLISION | 19-ANIMAL 20-MOTOR | VEHICLE IN | ANYTHING SET IN MOTION BY A MOTOR VEHICLE | | • | 2 - SOUTH 6 - NORTHWEST |
| 21 1 1 | LOSS OR SHIFT | 10 - AUGO MEDIAN | 14 - PEDESTRIAN 15 - PEDALCYCLE | TRANSF | PORT D MOTOR VEHICLE | 24 - OTHER MOVABLE OBJECT | FROM4 TO | _ 3 | |
| 3 | | COLLISIO | N WITH FIXED OBJECT | | | | | | 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN |
| 4 | 25 - IMPACT ATTENUATOR / CRASH CUSHION | 31 - GUARDRAIL END | 37 - TRAFFIC SIGN POST | 43 - CURB | | 50 - WORK ZONE MAINTENANCE EQUIPMENT | | | |
| | 26-BRIDGE OVERHEAD | 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER | | 44 - DITCH 45 - EMBAN | KMENT | 51 - WALL | UNIT SPEED | | DETECTED SPEED |
| 5 | STRUCTURE 27 - BRIDGE PIER OR ABUTMENT | 34 - MEDIAN GUARDRAIL | SUPPORT | 46-FENCE | | 52 - BUILDING | 0 2 5 | | 1 - STATED / ESTIMATED SPEED |
| | 28-BRIDGE PARAPET | BARRIER 35 - MEDIAN CONCRETE | AT ATHER BOOT BOLE | 47 - MAILBO 48 - TREE | X | 53 - TUNNEL 54 - OTHER FIXED OBJECT | | | 2 - CALCULATED / EDR |
| 6 | 29-BRIDGE RAIL | BARRIER | OR SUPPORT | 48 - I KEE 49 - FIRE HY | YDRANT | 99 - OTHER / UNKNOWN | POSTED SPEED | | 3 - UNDETERMINED |
| | 30 - GUARDRAIL FACE | 36 - MEDIAN OTHER BARRIER | 42 - CULVERT | | | | | | I |

1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

2 5

| OHIO DEF | OFFIDELES AFETY MOTORIST / NON-MOTORIST | | | | | | | LOCAL REPORT NUMBER | | | | | | |
|--------------------------------------|--|--|----------------------------|-----------------------|-----------|---|--------------|--|--------------------------|--|----------------------------------|----------------------|--------------------------|---------------------|
| SAFETY - MERVI | CE - PROTECTION | 010K131 / 140 |) IA - IA | 1010 | K12 | 1 | | | 2,0,2,4,-,0,0,0,3,2,6,2, | | | | | |
| UNIT# | NAME: LAST | , FIRST, MIDDLE | | | | | | | DATE OF BIRTH AGE GENDER | | | | | |
| 0,1 | YEE, N | NATHAN, SHAD | | | | | | | L1 1 0 | 13 1120 | $_{\perp}$ 0 $_{\perp}$ 3 | 3 2 | 2,0 | M |
| | STREET, CITY, S | | | V OTT | × . | TT 44200 | | | | PHONE - INCLUDE AREA | | 110 | 12/ | ۸ ۱/4 ۱ |
| 0 | | BADGER LN ,VA | ALLE | | - 8 | | | | Reda | acted per (| | | | |
| INJURIES | INJURED TAKEN BY | EMS AGENCY (NAME) | | INJUREDT | AKEN TO | MEDICAL FACILITY | (NAME, CITY) | USED | Прот-с∘ | SEATING POSITI | ON AIR BAG | USAGE | EJECTION | TRAPPED |
| | | LICENCE NUMBER | | OFFEN | E CHAI | nocen. | LOCAL | 0 4 | | LMET 0 1 | CITAT | TON NI | LIL | L |
| OL STATE | | LICENSE NUMBER CTED PER ORC 450 | 1:1-12 | 313.0 | | | LOCAL | OFFENSE DESC | | | 272 | ION NU 1 Q | IMREK | |
| OL CLASS | ENDORSEMEN | | | 313.0 | | OHOL / DRUG SUSPI | ECTED | Traffic Contr | | COHOL TEST | 212 | | TEST(S | |
| 02 02.100 | SELECT UP TO 2 | | | TRACTED | _ | LCOHOL MAI | | | STATUS T | YPE VALUE | STATUS | TYPE | RESULT | SELECTUPT04 |
| 2 | | | | 1 | 0. | THER DRUG | | 1 | _1 | 1 \bullet \Box | _1_ | _1_ | اللا | ساسا |
| UNIT # | 21-7-1-7-1-7-1-7-1-7-1-7-1-7-1 | , FIRST, MIDDLE | | | | | | | | DATE OF BIRTH | | | AGE | GENDER |
| 0,2 | | S, MICHAEL, PI | RKEY | | | | | | 75 | $10_{\perp}6_{\perp}1_{\perp}9$ | | _7 | 3 | $\lfloor M \rfloor$ |
| | STREET, CITY, S | | OII | 44040 | 20 | | | | | PHONE - INCLUDE AREA acted per O | | 10 1 | 2// | (1) |
| 0 | | WE ,Franklin Tw | р,ОН | | | MEDION FACILITY | | CASETY FAIRDNENT | Reuz | <u> </u> | | | . , | |
| INJURIES 2 | TAKEN | Kent Fire | | INJUREDT | AKEN TO | : MEDICAL FACILITY | (NAME, CITY) | USED | □ DOT-Co | | ON AIR BAG | USAGE | EJECTION 1 | TRAPPED 1 |
| OL STATE | | LICENSE NUMBER | | OFFENS | E CHAI | RGED | LOCAL | OFFENSE DESC | | LMET 0 1 | CITAT | ION NU | IMRER | |
| O. H. | | TED PER ORC 450 | 1:1-12 | OTT EIN | L CITA | NGE D | CODE | OTTENSE SES | ALL HOIL | | Olive | 1011110 | JIII DEK | |
| <u> </u> | ENDORSEMEN | | | | ALC | OHOL / DRUG SUSPI | ECTED | CONDITION | | COHOL TEST | | | TEST(S | |
| | SELECT UP TO 2 | | BY | TRACTED | □ A | LCOHOL MAI | RIJUANA | | STATUS T | YPE VALUE | STATUS | TYPE | KESULI | SELECTUPTO4 |
| | | | | 1 | 0. | THER DRUG | | 1 | 1 | 1, | _1_ | | ا ا | نــالــا |
| UNIT # | NAME: LAST | , FIRST, MIDDLE | | | | | | | | DATE OF BIRTH | | | AGE | GENDER |
| 4000555 | | **** | | | | | | | | | 1 1 | | | لــــــا |
| SIN ADDRESS: | STREET, CITY, S | HAIE, ZIP | | | | | | | CUNTACT | PHONE - INCLUDE AREA | C0DE | | | |
| S INJURIES | INJURED | EMS AGENCY (NAME) | | INHIREDI | AKEN TO | MEDICAL FACILITY | (NAME CITY) | SAFETY FAILIPMENT | | SEATING POSITI | ON AIR PAG | HEAGE | EJECTION | TRAPPED |
| NON | TAKEN BY | | | | | | | USED | MC HE | MPLIANT | , Alk DAG | JUNE . | Lucunon | , marres |
| OL STATE | OPERATOR | LICENSE NUMBER | | OFFENS | E CHAI | RGED | LOCAL | OFFENSE DESC | RIPTION | | CITAT | TON NO | JMBER | |
| TOR | | | | | | | CODE | | | | | | | |
| OL CLASS | ENDORSEMEN SELECT UP TO 2 | | | VER TRACTED | _ | HOL / DRUG SUSPI | | CONDITION | STATUS T | YPE VALUE | STATUS | | RESULT | SELECT UP TO 4 |
| | | | BY | · | = | | RIJUANA | | | | | | 40 E 000-0 | |
| INJU | RIES | SEATING POSITION | A | IR BAG | Цο | THER DRUG OL CLASS | s | OL RESTRIC | TION(S) | DRIVER DISTRAC | TION | T | EST STA | TUS |
| 1 - FATAL | | 1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) | 1-NOTDEP | | | 1 - CLASS A | lou Sille | 1 - ALCOHOL INTER | | 1 - NOT DISTRACTED | | 1 - NONE | | |
| 2 - SUSPECTED 3 - SUSPECTED | SERIOUS INJURY | 2 - FRONT - MIDDLE | 2 - DEPLOYE 3 - DEPLOYE | | | 2 - CLASS B 3 - CLASS C | | 2 - CDL INTRASTAT 3 - CORRECTIVE LE | | 2 - MANUALLY DPERATI ELECTRONIC COMMU | N)CATION | | REFUSED GIVEN CON | TAMINATED |
| 4 - POSSIBLE IN | | 3 - FRONT - RIGHT SIDE | | ED BOTH FRO | NT / SIDE | 4 - REGULAR CLASS | | 4 - FARM WAIVER | | DEVICE (TEXTING, TY DIALING) | PING, | SAMP | PLE / UNU SA | BLE |
| 5 - NO APPAREN | IT INJURY | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) | 5-NOTAPP | LICABLE MENT UNKNO | WM. | (OHIO = D) 5 - M/C MOPED ONLY | | 5 - EXCEPT CLASS | | 3 - TALKING ON HANDS-I COMMUNICATION DE | | | GIVEN, RES | ULTS KNOWN ULTS |
| | TAKEN BY | 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE | 7-0212011 | MENT ONKING | | 6 - NO VALID OL | | & CLASS B BUS | | 4 - TALKING ON HAND-H | ELD | UNKN | NOWN | |
| 1 - NOT TRANSP /TREATED AT | The second secon | 7 - THIRD - LEFT SIDE | EJ | ECTION | | OL ENDORSE | MENT | 7 - EXCEPT TRACTO 8 - INTERMEDIATE | | 5 - OTHER ACTIVITY WIT | HAN | | | TTYPE |
| 2 - EMS | | (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE | 1 - NOTEJE | | | H - HAZMAT | | RESTRICTIONS 9-LEARNER'S PER | MIT | ELECTRONIC DEVICE 6 - PASSENGER | | 1 - NONE 2 - BLOO | | |
| 3 - POLICE 9 - OTHER / UNK | NOWN | 9 - THIRD - RIGHT SIDE | 3-TOTALLY | LY EJECTED EJECTED | | M - MOTORCYCLE P - PASSENGER | | RESTRICTIONS | | 7 - OTHER DISTRACTION | | 3 - URINI | | |
| SAFETY E | QUIPMENT | 10 - SLEEPER SECTION OF TRUCK CAB | 4-NOTAPP | LICABLE | | N - TANKER | | 10 - LIMITED TO DAY | | INSIDE THE VEHICLE 8 - OTHER DISTRACTION | | 4 - BREA 5 - OTHE | | |
| 1 - NONE USED | | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA | T | RAPPED | | Q - MOTOR SCOOTER R - THREE-WHEEL MO | TORCYCLE | 12 - LIMITED - OTHE | | THE VEHICLE 9 - OTHER / UNKNOWN | | DR | UG TEST | TYPE |
| 2 - SHOULDER B 3 - LAP BELT ON | | (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | 1 - NOTTRA 2 - EXTRICA | | | S - SCHOOL BUS | | 13 - MECHANICAL DI (SPECIAL BRAK | | | | 1 - NONE | | |
| | LAP BELT USED | 12 - PASSENGER IN UNENCLOSED | MECHAN | ICAL MEANS | | T - DOUBLE & TRIPLE X - TANKER / HAZMAT | | CONTROLS, OR O ADAPTIVE DEVI | | 1 - APPARENTLY NORMA | 100 | 2 - BL00 | | |
| 5 - CHILD REST | RAINT SYSTEM - ICING | CARGO AREA 13 - TRAILING UNIT | 3- FREED B NON-ME | Y Chanical Me | ANS | | | 14 - MILITARY VEHI | | 2 - PHYSICAL IMPAIRME | NT | 4 - OTHE | | |
| | RAINT SYSTEM - | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | | | | GENDER F-FEMALE | | 15 - MOTOR VEHICLE AIR BRAKES | 2 MIIHOUT | 3 - EMOTIONAL (E.G., DEP ANGRY, DISTURBED) | | DRUG | TEST RE | SULT(S) |
| 7 - BOOSTER SE | | 15 - NON-MOTORIST | | | | M - MALE | | 16 - OUTSIDE MIRRO | | 4 - ILLNESS | | | HETAMINES | |
| 8 - HELMET US | | 99 - OTHER / UNKNOWN | | | | U -OTHER / UNKNOWN | | 17 - PROSTHETIC AII 18 - OTHER | | 5 - FELL ASLEEP, FAINTE FATIGUED, ETC. | U, | | BITURATES ZODIAZEPINI | ES |
| 9 - PROTECTIVE (ELBOW, KNE | | | | | | | | | | 6 - UNDER THE INFLUEN OF MEDICATIONS / DR | | 4 - CANN | NABINOIDS | |
| 10 - REFLECTIVE 11 - LIGHTING - F | | | | | | | | | | /ALCOHOL 9-OTHER/UNKNOWN | | 5 - COCA | INE TES / OPIOID | S |
| / BICYCLE ON | NLY | | | | | | | | | The state of the s | | 7 - OTHE | | |
| 99 - OTHER / UNK | NOWN | | | | | | | | | | | 8 - NEGA | ATIVE RESUL | TS |

HSY8306 OH1M 1/19 [760-1500] PAGE 4 OF 5

| OF PUB | OCCUPANT / WITNESS ADDENDUM | | | | | | LOCAL REPORT NUMBER | | | | | |
|---------------------------|--|-------------------------------|------------------|--|--------------------------|------------------------------------|-------------------------------------|--------------------|--------------|----------------|-----------|--|
| | 1500 | | WARRING RESERVE | | 2,0,2,4,-,0,0,0,3,2,6,2, | | | | | | | |
| UNIT# | | T, FIRST, MIDDLE | | DATE OF BIRTH AGE GENDER OF 19 | | | | | | | | |
| 01 | S: STREET, CITY, | OSIMO, MADI | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | | |
| <u> </u> | 4 AVON | Redacted per ORC 149.43(A)(1) | | | | | | | | | | |
| INJURIES | INJURED TAKEN BY | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FACIL | ITY (NAME, CITY) | SAFETY EQUIPMENT USED 0 4 | DOT-COMPLIANT MC HELMET | SEATING POSITION | AIR BAG USAG | E EJECTION | TRAPPED | |
| UNIT# | NAME: LAS | T, FIRST, MIDDLE | | | | | DAT | E OF BIRTH | T | AGE | GENDER | |
| 02 | BAKI | ES, CATHERI | | 1,1,0, | 6,1,9 | 5 4 | 6.9 | F | | | | |
| 4 | ADDRESS: STREET, CITY, STATE, ZIP 6189 FIRST AVE ,Franklin Twp ,OH 44240 | | | | | | | - INCLUDE AREA CO | | 9.43(<i>P</i> | A)(1) | |
| INJURIES | INJURED | EMS AGENCY (NAME) | SAFETY EQUIPMENT | DOT-COMPLIANT | SEATING POSITION | | | | | | | |
| _5_ | _ TAKEN USED | | | | | | | 0 3 | 1 | _1_ | _1 | |
| UNIT# | NAME: LAS | T, FIRST, MIDDLE | | | | | DAT | E OF BIRTH | | AGE | GENDER | |
| ADDRESS | S: STREET, CITY, | CTATE 710 | | | | | CONTACT DUONE | | | | لسا | |
| ADDRESS | S: STREET, GITY, | STATE, ZIP | | | | | CONTACT PHONE | - INCLUDE AREA CO | DE | | | |
| INJURIES | TAKEN | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FACIL | ITY (NAME, CITY) | SAFETY EQUIPMENT USED | DOT-COMPLIANT | SEATING POSITION | AIR BAG USAG | E EJECTION | TRAPPED | |
| تـــــا | ВҮ | | | | | للنا | MC HELMET | | | ــــا بــ | | |
| UNIT# | NAME: LAS | T, FIRST, MIDDLE | | | | | DAT | E OF BIRTH | | AGE | GENDER | |
| - - - | | | | | | | | | | | | |
| ADDRESS | S: STREET, CITY, | STATE, ZIP | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | |
| INJURIES | INJURED | EMS AGENCY (NAME) | - | INJURED TAKEN TO: MEDICAL FACIL | ITY (NAME, CITY) | SAFETY EQUIPMENT | | SEATING POSITION | AIR BAG USAG | E EJECTION | TRAPPED | |
| | TAKEN BY | Zillo Adello ((Alliez | | THOUSE PARENTY. HERITAL PARENT | irr thank, or ir | USED | DOT-COMPLIANT MC HELMET | | . DAG GOAG | | | |
| | INJU | JRIES | SAFET | Y EQUIPMENT USED | | SEATING POS | ITION | | AIR BAG | JSAGE | | |
| 1 - FAT | AL | | 1 - NONE US | | | T - LEFT SIDE | | 1 - NOT DE | PLOYED | | | |
| 2 - SUS | SPECTED SE | RIOUS INJURY | | OCCUPANT ER BELT ONLY USED | | ORCYCLE DRIV T – MIDDLE | Z - DEPLOYED FRONT | | | | | |
| | | NOR INJURY | | T ONLY USED | | T - RIGHT SIDE | E 3 - DEPLOYED SIDE | | | | | |
| | SSIBLE INJU | | | ER & LAP BELT USED | | ND – LEFT SIDI ORCYCLE PASS | FRANKINE | | | | | |
| 5 - NO / | APPARENT | INJURY | | ESTRAINT SYSTEM - | | ND - MIDDLE | 5 - NOT APPLICABLE | | | | | |
| | | TAKEN BY | | D FACING | | ND - RIGHT SIE | 9 - DEPLOYMENT UNKNOWN | | | | | |
| BITTO A TANTO CO AND ADDA | TTRANSPOR EATED AT S | | 6 - CHILD RE | ESTRAINT SYSTEM – CING | | D – LEFT SIDE ORCYCLE SIDE | | | | | | |
| 2 - EM | s | | 7 - BOOSTER | RSEAT | | D - MIDDLE | 1 - NOT EJECTED | | | | | |
| 3 - P0L | ICE | | 8 - HELMET | USED | | D – RIGHT SIDE PER SECTION (| 2 PARTIALLY ELECTED | | | | | |
| 9- OTH | IER / UNKNO | OWN | | TVE PADS USED KNEES, ETC.) | | ENGER IN OTH | ER ENCLOSED 3 - TOTALLY EJECTED | | | | | |
| | GEI | NDER | | TVE CLOTHING | | O AREA (NON-11 PICK-UP WITH CAI | RAILING UNIT, 4 - NOT APPLICABLE P) | | | | | |
| F-FEM | | | 11- LIGHTIN | G - PEDESTRIAN | | ENGER IN UNE 0 AREA | ENCLOSED TRAPPED | | | | | |
| M - MAL U - OTH | ER / UNKNO | WN | / BICYCL | | | LING UNIT | | 1 - NOT TR | | | | |
| | 99 - OTHER / UNKNOWN 14 - RIDING ON VEHICLE | | | | MEANS | | | MECHANIC | CAL | | | |
| | (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN | | | | | | | 3 - FREED MEANS | BY NON-M | ECHANIC | AL | |
| NAME: LA | AST, FIRST, MIDD | LE | | | 77 - OTTIL | K / CIVICIO WIV | DAT | E OF BIRTH | | AGE | GENDER | |
| | | RADLEY, J | | | | | 0,3,0 | 7 , 1 , 9 , | 7,8 | 4,5 | M . | |
| > | ADDRESS: STREET, CITY, STATE, ZIP | | | | | | CONTACT PHONE | | | 0.40/ | A > (4 > | |
| 90 IK | ONWO | OD CT ,LAFA | YETTE,, | IN 47905 | | | Redacte | ed per O | RC 14 | 9.43(| A)(1) | |
| | | MES, ERNES | Г | | | | 0,7,1 | | 8 . 8 . | | M | |
| ADDRESS | ADDRESS: STREET, CITY, STATE, ZIP 509 N RACE ST B ,MONON, ,IN 47959 | | | | | | Redacte | - INCLUDE AREA CO | DE | | | |
| | AST, FIRST, MIDD | | , , / / | | | | | E OF BIRTH | | AGE | GENDER | |
| ADDRESS | oversteen province Telephological | | | | | | | | | T F | 1 | |
| ADDRESS | S: STREET, CITY, | STATE, ZIP | | | | | CONTACT PHONE | | DE | | | |
| > | | | | | | | | | | | | |

HSY 8355 OH1P 3/19 [760-1500] PAGE **5** OF **5**



OHO TRAFFIC CRASH WITNESS STATEMENT

OH-3 REV 1/82

| LOCAL | | | |
|--------|------|----|----|
| REPORT | 701 | 27 | 17 |
| NUMBER | 6-1- | 27 | 0 |

REPORTING AGENCY Kent PD

DATE OF CRASH M3 103 1721

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

| I, Janes Towns | HEREBY MAKE THIS VOLUNTARY STATEMENT TO |
|---|---|
| Sd. J. Ennemoser (OFFICERS NAME) | AT Scene (LOCATION) |
| Black sur Ran the swater white car was going to | r st Red Light as the |
| Willie Car was going in | THE GIEEN SUMITSI |
| | |
| | • |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| ADDRESS OF WITNESS | PHONE Redacted per ORC 149.43(|
| SIGNATURE OF WITNESS | officers signature 51 Janemour) #255 |

| LC | CAL. |
|----|-------|
| R | EPORT |
| | |

24-3262

REPORTING AGENCY KENT P.D

DATE OF CRASH M 3 /03 /YJ

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

| I, Brad Brown (PRINTED) | HEREBY MAKE THIS VOLUNTARY STATEMENT TO |
|--|---|
| (OFFICERS NAME) | AT SCENE (LOCATION) |
| Black Sur raw thru red light car that had the green ligh gos did a 360 and ended facing th | on water st. Hitting a white my thru summit. White Car e oppishe way. |
| | |
| | |
| | |
| | |
| ADDRESS OF WITNESS SIGNATURE | PHONE Redacted per O OFFICERS SIGNATURE |
| OF WITNESS HSY 7003 1/82 | 5d J. Emmose # 255 |