



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

2020-00009752

PHOTOS TAKEN OH-2 OH-3
 SECONDARY CRASH OH-1P OTHER
 PRIVATE PROPERTY

LOCAL INFORMATION
 REPORTING AGENCY NAME*
City of Kent Police
 NCIC*
06703

HIT/SKIP
 1 - SOLVED
 2 - UNSOLVED
 NUMBER OF UNITS
02
 UNIT IN ERROR
 98 - ANIMAL
 99 - UNKNOWN
02

COUNTY* **67** LOCALITY* **1** LOCATION: CITY, VILLAGE, TOWNSHIP*
Kent

CRASH DATE / TIME*
06212020/2359
 CRASH SEVERITY
 1 - FATAL
 2 - SERIOUS INJURY SUSPECTED
 3 - MINOR INJURY SUSPECTED
 4 - INJURY POSSIBLE
 5 - PROPERTY DAMAGE ONLY
5

ROUTE TYPE ROUTE NUMBER PREFIX LOCATION ROAD NAME ROAD TYPE
S R 43 4 SUMMIT S T

LATITUDE DECIMAL DEGREES
41.150125

ROUTE TYPE ROUTE NUMBER PREFIX REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) ROAD TYPE
S R 43 WATER S T

LONGITUDE DECIMAL DEGREES
-81.358471

REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #
1
 DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST
4
 ROUTE TYPE IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE
 ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY

INTERSECTION RELATED
 WITHIN INTERSECTION OR ON APPROACH
 WITHIN INTERCHANGE AREA
 NUMBER OF APPROACHES
4
 ROADWAY
 ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT
 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP
01
 MANNER OF CRASH COLLISION/IMPACT
 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 4 - REAR TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN
2

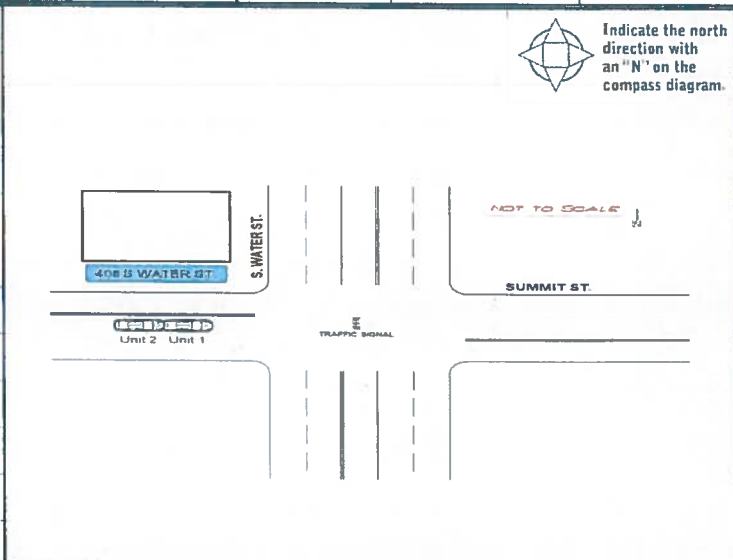
DIRECTION OF TRAVEL
 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST
 MEDIAN TYPE
 1 - DIVIDED FLUSH MEDIAN (<4 FEET)
 2 - DIVIDED FLUSH MEDIAN (≥4 FEET)
 3 - DIVIDED, DEPRESSED MEDIAN
 4 - DIVIDED, RAISED MEDIAN (ANY TYPE)
 9 - OTHER/UNKNOWN

WORK ZONE RELATED
 WORKERS PRESENT
 LAW ENFORCEMENT PRESENT
 ACTIVE SCHOOL ZONE
 WORK ZONE TYPE
 1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER
 LOCATION OF CRASH IN WORK ZONE
 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA

CONTOUR
1
 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/UNKNOWN
 CONDITIONS
2
 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN
 SURFACE
2
 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN

LIGHT CONDITION
 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN
3
 WEATHER
 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN
04

NARRATIVE
Unit 1 was stopped at the red light on W. Summit St. at S. Water St. Unit 2 was traveling behind Unit 1 on W. Summit St. Both units were in the turn lane to turn North on S. Water St. The traffic light turned from red to green, allowing traffic on W. Summit to move. Unit 1 did not move when the light turned green. Unit 2 began to drive forward and rear ended unit 1. Unit 2 was cited for assured clear distance ahead.
Ptl. A. Womack #258



CRASH REPORTED DATE / TIME: **06212020/2359** DISPATCH DATE / TIME: **06222020/0000** ARRIVAL DATE / TIME: **06222020/0001** SCENE CLEARED DATE / TIME: **06222020/0034** REPORT TAKEN BY: POLICE AGENCY MOTORIST SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO CPD)

TOTAL TIME ROADWAY CLOSED: **000** OTHER INVESTIGATION TIME: **030** TOTAL MINUTES: **064** OFFICER'S NAME*: **Womack, Alec M** OFFICER'S BADGE NUMBER*: **258** CHECKED BY OFFICER'S NAME*: **Nelson, Josh** CHECKED BY OFFICER'S BADGE NUMBER*: **232**

UNIT # 01 | **OWNER NAME:** LAST, FIRST, MIDDLE (SAME AS DRIVER) **NOTLEY, ALANNAH, LEILE**
OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) **513 ROCKWELL ST, Kent, OH 44240**
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP _____ | **COMMERCIAL CARRIER PHONE:** INCLUDE AREA CODE _____

LP STATE OK | **LICENSE PLATE #** IFT857 | **VEHICLE IDENTIFICATION #** 4T1BF3E KXB121063 | **VEHICLE YEAR** 2011 | **VEHICLE MAKE** Toyota
 INSURANCE VERIFIED | **INSURANCE COMPANY** GEICO | **INSURANCE POLICY #** 012-96-66-17 | **COLOR** SIL | **VEHICLE MODEL** CAMRY

TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE
 INTERLOCK DEVICE EQUIPPED **HIT/SKIP UNIT** | **#OCCUPANTS** 02 | **US DOT #** _____ | **TOWED BY:** COMPANY NAME _____
HAZARDOUS MATERIAL: MATERIAL RELEASED PLACARD CLASS # _____ PLACARD ID # _____

UNIT TYPE 01 | **# OF TRAILING UNITS** 00
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2-NO | **AUTONOMOUS MODE LEVEL** 0-NO AUTOMATION
SPECIAL FUNCTION 01 | 1-NONE | 6-BUS-CHARTER/TOUR | 11-FIRE | 16-FARM | 21-MAIL CARRIER
 2-TAXI | 7-BUS-INTERCITY | 12-MILITARY | 17-MOWING | 19-BUS (16+ PASSENGERS) | 24-WHEELCHAIR (ANY TYPE)
 3-ELECTRONIC RIDE SHARING | 8-BUS-SHUTTLE | 13-POLICE | 18-SNOW REMOVAL | 20-OTHER VEHICLE | 25-OTHER NON-MOTORIST
 4-SCHOOL TRANSPORT | 9-BUS-OTHER | 14-PUBLIC UTILITY | 19-TOWING | 22-ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE | 26-BICYCLE
 5-BUS-TRANSIT/COMMUTER | 10-AMBULANCE | 15-CONSTRUCTION EQUIPMENT | 20- SAFETY SERVICE PATROL

CARGO BODY TYPE 01 | 1-NO CARGO BODY TYPE /NOT APPLICABLE | 3-VEHICLE TOWING ANOTHER MOTOR VEHICLE | 5-INTERMODAL CONTAINER CHASSIS | 8-POLE | 12-CONCRETE MIXER
 2-BUS | 4-LOGGING | 6-CARGO VAN/ENCLOSED BOX | 9-CARGO TANK | 13-AUTO TRANSPORTER
VEHICLE DEFECTS 01 | 1-TURN SIGNALS | 4-BRAKES | 7-WORN OR SLICK TIRES | 9-MOTOR TROUBLE | 99-OTHER / UNKNOWN
 2-HEAD LAMPS | 5-STEERING | 8-TRAILER EQUIPMENT DEFECTIVE | 10-DISABLED FROM PRIOR ACCIDENT

NON-MOTORIST LOCATION AT IMPACT 01 | 1-INTERSECTION-MARKED CROSSWALK | 3-INTERSECTION-OTHER | 6-BICYCLE LANE | 9-MEDIAN/CROSSING ISLAND | 12-FIRST RESPONDER AT INCIDENT SCENE
 2-INTERSECTION-UNMARKED CROSSWALK | 4-MIDBLOCK-MARKED CROSSWALK | 7-SHOULDER / ROADSIDE | 10-DRIVEWAY ACCESS | 19-OTHER / UNKNOWN
 5-TRAVEL LANE-OTHER LOCATION | 8-SIDEWALK | 11-SHARED USE PATHS OR TRAILS

ACTION 04 | 1-NON-CONTACT | 1-STRAIGHT AHEAD | 7-MAKING U-TURN | 13-NEGOTIATING A CURVE | 18-APPROACHING OR LEAVING VEHICLE
 2-NON-COLLISION | 2-BACKING | 8-ENTERING TRAFFIC LANE | 14-ENTERING OR CROSSING SPECIFIED LOCATION | 19-STANDING
 3-STRIKING | 3-CHANGING LANES | 9-LEAVING TRAFFIC LANE | 15-WALKING, RUNNING, JOGGING, PLAYING | 20-OTHER NON-MOTORIST
 4-STRUCK | 4-OVERTAKING/PASSING | 10-PARKED | 16-WORKING | 21-STANDING OUTSIDE DISABLED VEHICLE
 5-BOTH STRIKING & STRUCK | 5-MAKING RIGHT TURN | 11-SLOWING OR STOPPED IN TRAFFIC | 17-PUSHING VEHICLE | 99-OTHER / UNKNOWN
 9-OTHER / UNKNOWN | 6-MAKING LEFT TURN | 12-DRIVERLESS

CONTRIBUTING CIRCUMSTANCES 01 | 1-NONE | 7-LEFT OF CENTER | 13-IMPROPER START FROM A PARKED POSITION | 17-VISION OBSTRUCTION | 21-LYING IN ROADWAY
 2-FAILURE TO YIELD | 8-FOLLOWING TOO CLOSE /ACDA | 14-STOPPED OR PARKED ILLEGALLY | 18-OPERATING DEFECTIVE EQUIPMENT | 22-NOT DISCERNIBLE
 3-RAN RED LIGHT | 9-IMPROPER LANE CHANGE | 15-SWERVING TO AVOID | 19-LOAD SHIFTING/FALLING/ SPILLING | 23-OPENING DOOR INTO ROADWAY
 4-RAN STOP SIGN | 10-IMPROPER PASSING | 16-WRONG WAY | 20-IMPROPER CROSSING | 99-OTHER IMPROPER ACTION
 5-UNSAFE SPEED | 11-DROVE OFF ROAD | 17-IMPROPER BACKING

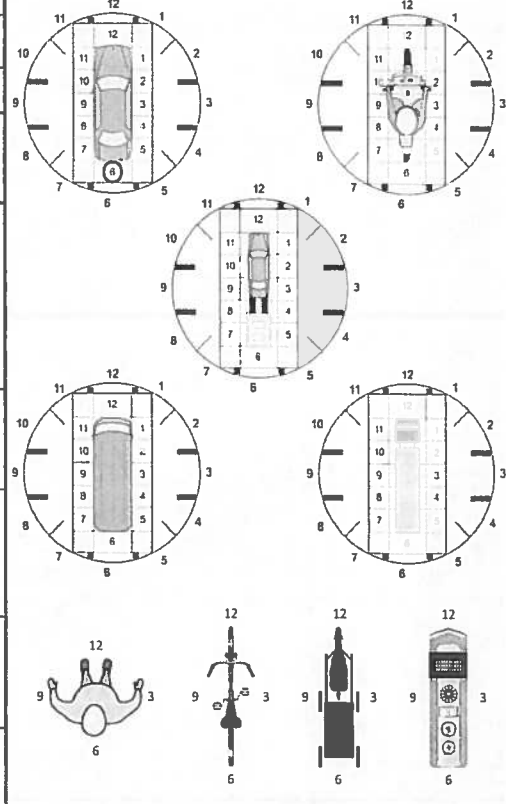
SEQUENCE OF EVENTS 20 | 1-OVERTURN/ROLLOVER | 6-EQUIPMENT FAILURE | 11-CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL | 16-RAILWAY VEHICLE | 22-WORK ZONE MAINTENANCE EQUIPMENT
 2-FIRE/EXPLOSION | 7-SEPARATION OF UNITS | 12-DOWNHILL RUNAWAY | 17-ANIMAL - FARM | 23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
 3-IMMERSION | 8-RAN OFF ROAD RIGHT | 13-OTHER NON-COLLISION | 18-ANIMAL - DEER | 24-OTHER MOVABLE OBJECT
 4-JACKKNIFE | 9-RAN OFF ROAD LEFT | 14-PEDESTRIAN | 19-ANIMAL - OTHER | 50-WORK ZONE MAINTENANCE EQUIPMENT
 5-CARGO /EQUIPMENT LOSS OR SHIFT | 10-CROSS MEDIAN | 15-PEJALCYCLE | 21-PARKED MOTOR VEHICLE | 51-WALL
EVENTS 20 | 1-OVERTURN/ROLLOVER | 6-EQUIPMENT FAILURE | 11-CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL | 16-RAILWAY VEHICLE | 22-WORK ZONE MAINTENANCE EQUIPMENT
 2-FIRE/EXPLOSION | 7-SEPARATION OF UNITS | 12-DOWNHILL RUNAWAY | 17-ANIMAL - FARM | 23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
 3-IMMERSION | 8-RAN OFF ROAD RIGHT | 13-OTHER NON-COLLISION | 18-ANIMAL - DEER | 24-OTHER MOVABLE OBJECT
 4-JACKKNIFE | 9-RAN OFF ROAD LEFT | 14-PEDESTRIAN | 19-ANIMAL - OTHER | 51-WALL
 5-CARGO /EQUIPMENT LOSS OR SHIFT | 10-CROSS MEDIAN | 15-PEJALCYCLE | 21-PARKED MOTOR VEHICLE | 52-BUILDING
 6-IMPACT ATTENUATOR / CRASH CUSHION | 25-IMPACT ATTENUATOR / CRASH CUSHION | 26-BRIDGE OVERHEAD STRUCTURE | 27-BRIDGE PIER OR ABUTMENT | 28-BRIDGE PARAPET | 29-BRIDGE RAIL | 30-GUARDRAIL FACE | 31-GUARDRAIL END | 32-PORTABLE BARRIER | 33-MEDIAN CABLE BARRIER | 34-MEDIAN GUARDRAIL BARRIER | 35-MEDIAN CONCRETE BARRIER | 36-MEDIAN OTHER BARRIER | 37-TRAFFIC SIGN POST | 38-OVERHEAD SIGN POST | 39-LIGHT / LUMINARIES SUPPORT | 40-UTILITY POLE | 41-OTHER POST, POLE OR SUPPORT | 42-CULVERT | 43-CURB | 44-DITCH | 45-EMBANKMENT | 46-FENCE | 47-MAILBOX | 48-TREE | 49-FIRE HYDRANT | 50-WORK ZONE MAINTENANCE EQUIPMENT | 51-WALL | 52-BUILDING | 53-TUNNEL | 54-OTHER FIXED OBJECT | 99-OTHER / UNKNOWN

FIRST HARMFUL EVENT 1 | **MOST HARMFUL EVENT** 1

LOCAL REPORT NUMBER
 2,0,2,0 - 0,0,0,0 9,7,5,2

DAMAGE
DAMAGE SCALE
 2 | 1 - NONE | 3 - FUNCTIONAL DAMAGE
 2 - MINOR DAMAGE | 4 - DISABLING DAMAGE
 9 - UNKNOWN

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY



NO DAMAGE [0] | UNDERCARRIAGE [14]
 TOP [13] | ALL AREAS [15]
 UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT
 06 | 0-NO DAMAGE | 14-UNDERCARRIAGE
 1-12-REFER TO UNIT DIAGRAM | 15-VEHICLE NOT AT SCENE
 13-TOP | 99-UNKNOWN

TRAFFIC
TRAFFICWAY FLOW 2 | 1-ONE-WAY | 2-TWO-WAY
TRAFFIC CONTROL 2 | 1-ROUNDBOUT | 4-STOP SIGN | 2-SIGNAL | 5-YIELD SIGN | 3-FLASHER | 6-NO CONTROL

OF THROUGH LANES ON ROAD 2 | **RAIL GRADE CROSSING** 1 | 1-NOT INVOLVED | 2-INVOLVED-ACTIVE CROSSING | 3-INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION
 FROM 4 TO 3 | 1-NORTH | 5-NORTHEAST | 2-SOUTH | 6-NORTHWEST | 3-EAST | 7-SOUTHEAST | 4-WEST | 8-SOUTHWEST | 9-OTHER / UNKNOWN

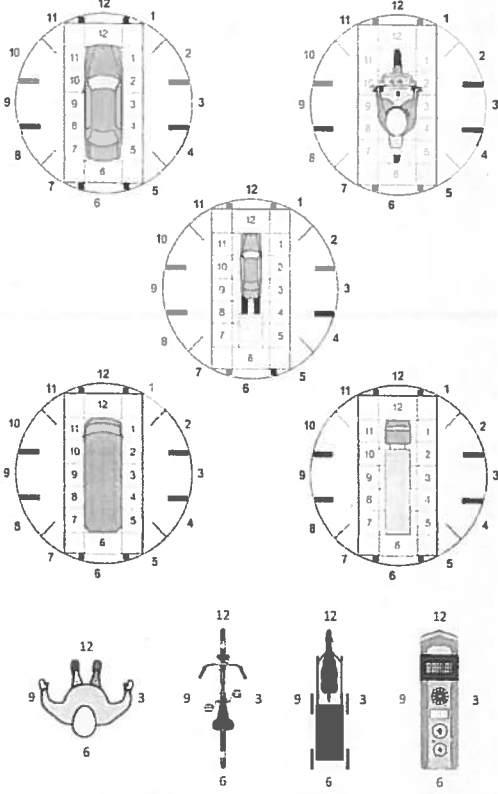
UNIT SPEED 000 | **DETECTED SPEED** 1 | 1-STATED / ESTIMATED SPEED | 2-CALCULATED / EDR | 3-UNDETERMINED
POSTED SPEED 25

OWNER
 UNIT # 0 2 OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)
TOROK, MELODY, L
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
2255 EDMUND AVE, Akron, OH 44312
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

DAMAGE
DAMAGE SCALE
1 1 - NONE 3 - FUNCTIONAL DAMAGE
 2 - MINOR DAMAGE 4 - DISABLING DAMAGE
 9 - UNKNOWN

VEHICLE
 LP STATE OH LICENSE PLATE # FIB6750 VEHICLE IDENTIFICATION # 1G4CW54C5K1649332 VEHICLE YEAR 1989 VEHICLE MAKE Buick
 INSURANCE VERIFIED INSURANCE COMPANY _____ INSURANCE POLICY # _____ COLOR GRY VEHICLE MODEL Electra
 TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE
 US DOT # _____ TOWED BY: COMPANY NAME _____
 INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT #OCCUPANTS 0 1 VEHICLE WEIGHT GVWR/GCWR: 1 - ≤10K LBS., 2 - 10,001 - 26K LBS., 3 - >26K LBS.
 HAZARDOUS MATERIAL: MATERIAL RELEASED CLASS # _____ PLACARD ID # _____
 PLACARD

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY



UNIT TYPE
0 1 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 13 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER
 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (15+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)
 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 25 - OTHER VEHICLE 25 - OTHER NON-MOTORIST
 4 - PICKUP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 26 - BICYCLE
 5 - CARGO VAN 11 - ALL-TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 27 - TRAILER
 6 - VAN (9-15 SEATS) 17 - MOTORHOME
 # OF TRAILING UNITS _____

AUTONOMOUS MODE LEVEL
 WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 1 - YES 2 - NO 9 - OTHER / UNKNOWN
 AUTONOMOUS MODE LEVEL 0 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION
 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

SPECIAL FUNCTION
0 1 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER
 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN
 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL
 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING
 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 23 - SAFETY SERVICE PATROL

CARGO BODY TYPE
0 1 1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER
 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 9 - CARGO TANK 13 - AUTO TRANSPORTER
 7 - GRAIN/CHIPS/GRAVEL 10 - DUMP 11 - FLAT BED 14 - GARBAGE/REFUSE
 99 - OTHER / UNKNOWN

VEHICLE DEFECTS
0 1 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN
 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT
 3 - TAIL LAMPS 6 - TIRE BLOWOUT

NON-MOTORIST LOCATION AT IMPACT
0 1 1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIA/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE
 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDDLE - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS
 5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS 99 - OTHER / UNKNOWN

ACTION
3 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE
 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION
 3 - STRIKING 0 1 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING
 4 - STRUCK PRE-CRASH ACTIONS 4 - OVERTAKING/PASSING 10 - PARKED 16 - WORKING
 5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC
 9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN

INITIAL POINT OF CONTACT
1 2 0 - NO DAMAGE 14 - UNDERCARRIAGE
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
 13 - TOP 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES
0 8 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY
 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACCD 14 - STOPPED OR PARKED ILLEGALLY 19 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE
 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY
 4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION
 5 - UNSAFE SPEED 11 - DROVE OFF ROAD 12 - IMPROPER BACKING
 6 - IMPROPER TURN

TRAFFIC
TRAFFICWAY FLOW
2 1 - ONE-WAY 2 - TWO-WAY
TRAFFIC CONTROL
2 1 - ROUNDABOUT 4 - STOP SIGN
 2 - SIGNAL 5 - YIELD SIGN
 3 - FLASHER 6 - NO CONTROL

SEQUENCE OF EVENTS
1 2 0 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT
 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT
 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 25 - WORK ZONE MAINTENANCE EQUIPMENT
 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDAL CYCLE 21 - PARKED MOTOR VEHICLE
 3

OF THROUGH LANES ON ROAD
2
RAIL GRADE CROSSING
1 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING

COLLISION WITH FIXED OBJECT - STRUCK
1 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT
 26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL
 27 - BRIDGE PIER OR ABUTMENT 33 - MEDIUM CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING
 28 - BRIDGE PARAPET 34 - MEDIUM GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL
 29 - BRIDGE RAIL 35 - MEDIUM CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT
 30 - GUARDRAIL FACE 36 - MEDIUM OTHER BARRIER 42 - CULVERT 48 - TREE 99 - OTHER / UNKNOWN
FIRST HARMFUL EVENT 1 **MOST HARMFUL EVENT** 1

UNIT / NON-MOTORIST DIRECTION
FROM 4 **TO** 3
 1 - NORTH 5 - NORTH EAST
 2 - SOUTH 6 - NORTH WEST
 3 - EAST 7 - SOUTH EAST
 4 - WEST 8 - SOUTH WEST
 9 - OTHER / UNKNOWN

UNIT SPEED
0 0 5
POSTED SPEED
2 5
DETECTED SPEED
1 1 - STATED / ESTIMATED SPEED
 2 - CALCULATED / EDR
 3 - UNDETERMINED



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
2020-00009752

UNIT # 01	NAME: LAST, FIRST, MIDDLE NOTLEY, ALANNAH, LEILE	DATE OF BIRTH 09171996	AGE 23	GENDER F
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ADDRESS: STREET, CITY, STATE, ZIP 513 ROCKWELL ST, Kent, OH 44240	CONTACT PHONE - INCLUDE AREA CODE
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INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 04	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
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OL STATE OK	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION	CITATION NUMBER
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OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST STATUS 1 TYPE 1 VALUE	DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4
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UNIT # 02	NAME: LAST, FIRST, MIDDLE CHESSER, TIFFANY, ANN	DATE OF BIRTH 06171976	AGE 44	GENDER F
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ADDRESS: STREET, CITY, STATE, ZIP 418 CHERRY ST 203, Kent, OH 44240	CONTACT PHONE - INCLUDE AREA CODE
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INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 04	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
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OL STATE OH	OPERATOR LICENSE NUMBER	OFFENSE CHARGED 333.03	LOCAL CODE <input checked="" type="checkbox"/>	OFFENSE DESCRIPTION Maximum Speed Limits	CITATION NUMBER 61979
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OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST STATUS 1 TYPE 1 VALUE	DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4
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UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
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ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE
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INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION	CITATION NUMBER
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OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION	ALCOHOL TEST STATUS TYPE VALUE	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4
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INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1 - FATAL	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED	1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED	1 - NONE GIVEN
2 - SUSPECTED SERIOUS INJURY	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B	2 - COL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2 - TEST REFUSED
3 - SUSPECTED MINOR INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C	3 - CORRECTIVE LENSES	3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE
4 - POSSIBLE INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SIDE	4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE	4 - TEST GIVEN, RESULTS KNOWN
5 - NO APPARENT INJURY	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M/C MOPED ONLY	5 - EXCEPT CLASS A & CLASS B BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5 - TEST GIVEN, RESULTS UNKNOWN
INJURED TAKEN BY	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER	ALCOHOL TEST TYPE
1 - NOT TRANSPORTED, /TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION	OL ENDORSEMENT	7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE	1 - NONE
2 - EMS	8 - THIRD - MIDDLE	1 - NOT EJECTED	H - HAZMAT	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	2 - BLOOD
3 - POLICE	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED	M - MOTORCYCLE	9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	3 - URINE
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED	P - PASSENGER	10 - LIMITED TO DAYLIGHT ONLY	CONDITION	4 - BREATH
SAFETY EQUIPMENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE	N - TANKER	11 - LIMITED TO EMPLOYMENT	1 - APPARENTLY NORMAL	5 - OTHER
1 - NONE USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	TRAPPED	Q - MOTOR SCOOTER	12 - LIMITED - OTHER	2 - PHYSICAL IMPAIRMENT	DRUG TEST TYPE
2 - SHOULDER BELT ONLY USED	13 - TRAILING UNIT	1 - NOT TRAPPED	R - THREE WHEEL MOTORCYCLE	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DIST. RBD)	1 - NONE
3 - LAP BELT ONLY USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2 - EXTRICATED BY MECHANICAL MEANS	S - SCHOOL BUS	14 - MILITARY VEHICLES ONLY	4 - ILLNESS	2 - BLOOD
4 - SHOULDER & LAP BELT USED	99 - OTHER / UNKNOWN	3 - FREED BY NON-MECHANICAL MEANS	T - DOUBLE & TRIPLE TRAILERS	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	3 - URINE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING			X - TANKER / HAZMAT	16 - OUTSIDE MIRROR	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	4 - OTHER
6 - CHILD RESTRAINT SYSTEM - REAR FACING			GENDER	17 - PROSTHETIC AID	9 - OTHER / UNKNOWN	DRUG TEST RESULT(S)
7 - BOOSTER SEAT			F - FEMALE	18 - OTHER		1 - AMPHETAMINES
8 - HELMET USED			M - MALE			2 - BARBITURATES
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)			U - OTHER / UNKNOWN			3 - BENZODIAZEPINES
10 - REFLECTIVE CLOTHING						4 - CANNABINOIDS
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						5 - COCAINE
99 - OTHER / UNKNOWN						6 - OPIATES / OPIOIDS
						7 - OTHER
						8 - NEGATIVE RESULTS

OCCUPANT / WITNESS ADDENDUM

CONTACT PHONE - INCLUDE AREA CODE

INJURIES

5

UNIT #

CONTACT PHONE - INCLUDE AREA CODE

INJURIES

INJURIES

DOT-COMPLIANT MC HELMET

<p>1 - FATAL</p> <p>2 - SUSPECTED SERIOUS INJURY</p> <p>3 - SUSPECTED MINOR INJURY</p> <p>4 - POSSIBLE INJURY</p> <p>5 - NO APPARENT INJURY</p>	<p>1 - NONE USED - VEHICLE OCCUPANT</p> <p>2 - SHOULDER BELT ONLY USED</p> <p>3 - LAP BELT ONLY USED</p> <p>4 - SHOULDER & LAP BELT USED</p> <p>5 - CHILD RESTRAINT SYSTEM - FORWARD FACING</p> <p>6 - CHILD RESTRAINT SYSTEM - REAR FACING</p> <p>7 - BOOSTER SEAT</p> <p>8 - HELMET USED</p> <p>9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)</p> <p>10 - REFLECTIVE CLOTHING</p> <p>11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY</p> <p>99 - OTHER / UNKNOWN</p>	<p>1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)</p> <p>2 - FRONT - MIDDLE</p> <p>3 - FRONT - RIGHT SIDE</p> <p>4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)</p> <p>5 - SECOND - MIDDLE</p> <p>6 - SECOND - RIGHT SIDE</p> <p>7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)</p> <p>8 - THIRD - MIDDLE</p> <p>9 - THIRD - RIGHT SIDE</p> <p>10 - SLEEPER SECTION OF TRUCK CAB</p> <p>11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK UP WITH CAP)</p> <p>12 - PASSENGER IN UNENCLOSED CARGO AREA</p> <p>13 - TRAILING UNIT</p> <p>14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)</p> <p>15 - NON-MOTORIST</p> <p>99 - OTHER / UNKNOWN</p>	<p>1 - NOT DEPLOYED</p> <p>2 - DEPLOYED FRONT</p> <p>3 - DEPLOYED SIDE</p> <p>4 - DEPLOYED BOTH FRONT/SIDE</p> <p>5 - NOT APPLICABLE</p> <p>9 - DEPLOYMENT UNKNOWN</p> <p>EJECTED</p> <p>1 - NOT EJECTED</p> <p>2 - PARTIALLY EJECTED</p> <p>3 - TOTALLY EJECTED</p> <p>4 - NOT APPLICABLE</p> <p>TRAPPED</p> <p>1 - NOT TRAPPED</p> <p>2 - EXTRICATED BY MECHANICAL MEANS</p> <p>3 - FREED BY NON-MECHANICAL MEANS</p>
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ADDRESS: STREET, CITY, STATE, ZIP

NAME: LAST FIRST, MIDDLE