OHIO DEPARTMENT OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	AFFIC CRASI	H REPORT	*DENOTES M	IANDATORY FII	ELD FOR SUPPLEM	IENT REPORT	·	OCAL REPORT NUMBER	*
DHOTOS TAKEN	OH-2 X OH-3	LOCAL INFO	RMATION				2 0 2 4	- 10 10 10 10 9	0 6 8 9
	X OH-1P OTHE	R REPORTING	AGENCY NAME*			NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
SECONDARY CRASH	PRIVATE PROPER	TY City of	Kent Police	e	. 0	6,7,0,3	1 - SOLVED	0 2 0	2 98 - ANIMAL 99 - UNKNOWN
COUNTY* LOCALITY*	LOCATION:	CITY, VILLAGE, TOW	NSHIP*				CRASH DATE /	2000 CONTRACTOR 100 C	SH SEVERITY
6 7 1 2-VII	LLAGE Kent						0.70222024	/1502 3	- FATAL - SERIOUS INJURY
	BER PREFIX N - NORT	H LOCATION R	DAD NAME			ROAD TYPE	LATITUDE DE		SUSPECTED
ROUTE TYPE ROUTE NUM	4 E-EAST	MAIN				ST	41,15,1	6.8.5	MINOR INJURY
	W-WES		ROAD NAME (ROAD	MILEPOST H	OUSF #)	ROAD TYPE	LONGITUDE		SUSPECTED INJURY POSSIBLE
ROUTE TYPE ROUTE NUM	S - SOUT E - EAST	Н	NOAD NAME (NOAD	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0002 #/		N 20 000 000 000		PROPERTY DAMAGE
	⊥ W-WES	TEION				$R_{\perp}D_{\parallel}$	-8 ₁ ,3 ₈ 3	6,9,1	ONLY
REFERENCE POINT 1 - INTERSECTION	DIRECTION FROM REFERENCE	ROUTE IR - INTERSTATE	CONTRACTOR OF THE	L - ALLEY	ROAD TYPE HW-HIGHWAY	RD - ROAD		INTERSECTION RELATED	
1 2-MILE POST	S - SOUTH	US - FEDERAL US		V - AVENUE		SQ - SQUARE	X WITHIN INTE	RSECTION OR ON APPROA	. 4
3-HOUSE #	E - EAST W - WEST	SR - STATE ROUT		L - BOULEVARD		ST - STREET	WITHIN INTE	RCHANGE AREA NUM	BER OF APPROACHES
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	CR - NUMBERED	COUNTY ROUTE	R - CIRCLE T - COURT		TE - TERRACE TL - TRAIL		ROADWAY	
100000000000000000000000000000000000000		TR - NUMBERED T	TOWNSHIP	R - DRIVE		WA - WAY	ROADWAY DIV	VIDED	
	3-YARDS	ROUTE	н	E - HEIGHTS	PL - PLACE		L KOADWAY DI	1050	
	F FIRST HARMFUL E		MAI	NNER OF CRAS	H COLLISION/IMPA	CT	DIRECTION OF TRAVE	L MEDIAN	NTYPE
1 - ON ROADWAY 2 - ON SHOULDER	9 - CROSSO	VER VAY/ALLEY ACCES	SS BE	TIMEEN	4 - REAR-TO-REAR 5 - BACKING		N - NORTH	1 - DIVIDED F (< 4 FEET	LUSH MEDIAN
0 1 3-IN MEDIAN		Y GRADE CROSSI	No L D TW	O MOTOR	6 - ANGLE		S - SOUTH E - EAST	2 - DIVIDED F	LUSH MEDIAN
4 - ON ROADSIDE	12-SHAREI TRAILS	D USE PATHS OR	4000		7 - SIDESWIPE, SAM		W-WEST	(≥4 FEET) DEPRESSED MEDIAN
5 - ON GORE 6 - OUTSIDE TRAF	12 BIKE I		3 - HE		B - SIDESWIPE, OPP 9 - OTHER / UNKNO			4 - DIVIDED, R	RAISED MEDIAN
7 - ON RAMP	14-TOLL B	OOTH / UNKNOWN						9 - OTHER/UN	
8 - OFF RAMP	77-011121								
WORK ZONE RELATE	D	1 - LANE CLOSU			N OF CRASH IN WI - BEFORE THE 1ST		CONTOUR	CONDITIONS	SURFACE
WORKERS PRESENT		2 - LANE SHIFT/		1000	WARNING SIGN		1	_1_	1 - CONCRETE
LAW ENFORCEMENT	PRESENT L	3 - WORK ON SHO	DULDER	100 700	- ADVANCE WARNII - TRANSITION ARE	DVANCE WARNING AREA 1 - STRAIGHT LEVEL 1 - DRY			
			NT or MOVING WOR		- ACTIVITY AREA	12) 	2 - STRAIGHT GRADE 3 - CURVE LEVEL	2-WET 3-SNOW	2 - BLACKTOP, BITUMINOUS,
ACTIVE SCHOOL ZON	E	5 - OTHER		5	-TERMINATION AR	EA	4 - CURVE GRADE	4 - ICE	ASPHALT 3 - BRICK/BLOCK
LIGHT CO	NDITION	100	WEATH	HER		-	9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT,	4 - SLAG, GRAVEL,
1 - DAYLIGHT			- CLEAR	6 - SNOW				OIL, GRAVEL	STONE
1 2 - DAWN/DUSK 3 - DARK - LIGHTE	ED ROADWAY	1 1 1 1 1	 CLOUDY FOG, SMOG, SMOK 		CROSSWINDS G SAND, SOIL, DIRT	r. snow		6 - WATER (STANDING, MOVING)	5 - DIRT
4 - DARK – ROADW		4	- RAIN	9 - FREEZIN	NG RAIN OR FREEZ			7 - SLUSH	9 - OTHER/UNKNOWN
5 - DARK – UNKNO 9 - OTHER / UNKNO	WN ROADWAY LIGHT	ING 5	- SLEET, HAIL	99 - OTHER	/ UNKNOWN			9 - OTHER/UNKNOWN	
					1				
NARRATIVE								A	Indicate the north direction with
Unit #1 was west	bound on W	Main St. U	Init #2 was		}			4	an "N" on the compass diagram.
eastbound on W	V Main St wa	iting to ma	ke a left ha	nd	İ			<u> </u>	8 8 -9
5-00-00-00-00-00-00-00-00-00-00-00-00-00				iiu	-		Ĭ		
turn. Unit #2 fa	iled to yield t	o Unit #1 a	and turned					(i	7
in front of her.								Not	To Scale
						WMAIN	J		
					1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
								Unit 1	
					-			Unit 1	
								Unit 1	
								Unit 1	
								Unit 1	
								ETON ETON	
					2 0			ETON	
CRASH REPORTED DA	TE/TIME	DISPATCH DA	TE/TIME	AR	RIVAL DATE /TIME		SCENE CLEARED		EPORT TAKEN BY
								DATE/TIME R	EPORT TAKEN BY POLICE AGENCY
0,7,0,2,2,0,2,4,	/ ₁ 1 ₅ 0 ₁ 2 ₁ 0 ₁ 7		4,/,1,5,0,2		2,0,2,4,/,1	5,0,5	7,0,2,2,0,2	DATE/TIME R	
	1,1,5,0,2,0,7	0,2,2,0,2,0	4 ₁ / ₁ 1 ₅ 0 ₁ 2 ER'S NAME*	0,7,0,2	2,0,2,4,/,1	15 0 5 0	0.7.0.2.2.0.2.	DATE/TIME R	POLICE AGENCY MOTORIST SUPPLEMENT
TOTAL TIME ROADWAY CLOSED INVES	OTHER TIGATION TIME	0,2,2,0,2,0	4 ₁ / ₁ 1 ₁ 5 ₁ 0 ₁ 2 er's name* rnahan, Mi	0,7,0,2	2,0,2,4,/,1 C	15,0,5,0	0.7.0.2.2.0.2.	DATE / TIME 4, /, 1, 5, 4, 5,	POLICE AGENCY MOTORIST

of Pu	BLIC SAFETY UNIT					arrow to the court of the court	$0_{+}0_{+}0_{+}0_{+}9_{+}6_{+}8_{+}9_{+}$			
UNIT#	OWNER NAME: LAST, FIRS			OWNER PHONE: IN	(CLUDE AIEA CODE (13) SAMEAS DRIVER) FORC 149.43(A)(1)		DAMAGE			
	GAUER, PHY DRESS: STREET, CITY, STATE			Redacted pe	1 ORC 149.43(A)(1)	1 - NONE	DAMAGE SCALE 3 - FUNCTIONAL DAMAGE			
741 PI	ENNWOOD D	R ,Tallmadge	,ОН 44278	-10		2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
COMMERC	CIAL CARRIER: NAME, ADDR	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIE	ER PHONE: INCLUDE AREA CODE	9 - UNKNOWN DAMAGED AREA(S)				
LP STATE	LICENSE PLATE #		E IDENTIFICATION #	VEHICLEY	EAR VEHICLE MAKE		CATE ALL THAT APPLY			
	HEH5128		$5_1D_1X_14_1U_8_18_13_1$			11 12 1	11 12 1			
INSURAN VERIFII	INSURANCE COMP ED STATE FA		NSURANCE POLICY # 344729SFP35	RED	ELANTRA	10	2 10 11 12 2			
П	TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY: COMPA		10 2	10, 2			
COMME		RESPONSE	HICLE WEIGHT GVWR/GCWR	HAZARD	OUS MATERIAL	9 3 4 -	3 9 9 3 -			
DEVICE	LOCK HIT/SKIP UNI	T #UCCUPANTS	1 - ≤10KLBS. 2 - 10,001 - 26KLBS	MATERIAL RELEASED	CLASS # PLACARD ID #	8 7 6	4 8 7 5 5			
EQUIPE	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS.	PLACARD 18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	7 6 5	11 7 6 5			
0.1	2 - PASSENGER VAN (MINIVAN)			19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10 /	12			
UNITTYPE	3 - SPORT UTILITY VEHICLE 4 - PICK UP	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED		20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25 - OTHER NON-MOTORIST 26 - BICYCLE	9	10 2 3			
	5 - CARGO VAN	BICYCLE	16 - FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR	27 -TRAIN	<u> </u>	8 4 -			
. 0	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8 \	6 4			
U	# of TRAILING UNITS		- 2-50/2002/00/00/00/00		52 (WASSER)	11 12 1	6 11 12			
_	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED			3 - CONDITIONAL AUTOMATIO 4 - HIGH AUTOMATION	N 9 - UNKNOWN	10 11 1	2 10 11 1 2			
	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 10 2 3	3 9 9 3			
-	1 - NONE	6 - BUS - CHARTER/TOUR		16-FARM	21 - MAIL CARRIER	8 4	8 4 7			
[0,1]	2 - TAXI 3 - ELECTRONIC RIDE SHARING	7 - BUS - INTERCITY 8 - BUS - SHUTTI F		17 - MOWING 18 - SNOW REMOVAL	99 - OTHER / UNKNOWN	8 6	8 6			
	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19-TOWING		6	6			
	5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT	451 1737 (1511) 165 (1616) 166 (1616) 16 14 (1616)	10. 00M0DETE HIVED		12 12 12			
0_1	1 - NO CARGO BODYTYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	CHASSIS	8 - POLE 9 - CARGO TANK	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER	12 0 0				
BODY		7 004101011100100401151	10-FLAT BED 11-DUNP	14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	98	3 9 7 3 9 8 3				
TYPE	1 - TURN SIGNALS	4 - BRAKES		9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN					
VEHICLE	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT	10-DISABLED FROM PRIOR	77-0111217 011110111	6 6 6				
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		☐ - NO DAMAGE	[0] - UNDERCARRIAGE [14]			
T. E. E.	CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED		9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS	D 12-FIRST RESPONDER AT INCIDENT SCENE	□- TOP [13]	-ALL AREAS [15]			
NON-MOTORIST LOCATION	2 - INTERSECTION - UNMARKED CROSSWALK	CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	B - SIDEWALK	11-SHARED USE PATHS OR	99-OTHER / UNKNOWN	- UNIT NOT AT SCENE [16]				
AT IMPACT	1-NON-CONTACT	1 - STRAIGHT AHEAD		TRAILS 13 - NEGOTIATING A CURVE	18-APPROACHING		IT NOT AT SOURCE (10)			
3	2 NON COLLISION	2 DACKING		14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	0 - NO DAM	AGE 14 - UNDERCARRIAGE			
ACTION	3-STRIKING 4-STRUCK PRE-CRASH	3 - CHANGING LANES 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST		RTO UNIT 15 - VEHICLE NOT AT SCENE			
00-250 40-004-00-0	5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING 16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13-TOP	99 - UNKNOWN			
	9-OTHER/UNKNOWN	6 - MAKING LEFT TURN	INTRACTIO	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC			
		7 - LEFT OF CENTER	DIDI/ED DOCITION	17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
0.1	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACD/ 9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTING	4 - RAN STOP SIGN	10 - IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY 99 - OTHER IMPROPER ACTION	2 - TW0-WAY	3 - FLASHER 6 - NO CONTROL			
CIRCUMSTANCES		11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING	77-OTHER IMPROPERACTION	# of THROUGH LANES	RAIL GRADE CROSSING			
SEQUENCE	OF EVENTS					ON ROAD	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING			
$_{1}$ $_{1}$ $_{1}$ $_{1}$ $_{1}$	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE		16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	17-ANIMAL — FARM 18-ANIMAL — DEER	EQUIPMENT 23-STRUCK BY FALLING,	UNIT / N	ON-MOTORIST DIRECTION			
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	19 - ANIMAL — OTHER 20 - MOTOR VEHICLE IN	SHIFTING CARGO OR ANYTHING SET IN MOTION	-	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST			
21 1 .	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 3 TO	4 3 - EAST 7 - SOUTHEAST			
3		COLLISIO	N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE - STRUCK			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
4	25-IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER		43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE EQUIPMENT	UNIT SPEED	DETECTED SPEED			
	26-BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER	39 - LIGHT / LUMINARIES	45 - EMBANKMENT	51 - WALL 52 - BUILDING	Mark New Year	1 - STATED / ESTIMATED SPEED			
5	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE	46 - FENCE 47 - MAILBOX	53 - TUNNEL	0,2,5	2 - CALCULATED / EDR			
6	29-BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	OR SUPPORT	48-TREE 49-FIRE HYDRANT	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED			
	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT			2 5				

2 5

LOCAL REPORT NUMBER

SWETT -	SERVICE - PROTECTION UNTIl							2 0 2 4 -	0_	$0_{+}0_{+}0_{+}9_{+}6_{+}8_{+}9_{+}$		
UNIT #	OWNER NAME: LAST, FIRS)	Re	dacted pe	r ÖF	RC 149.43(A)(1)			AMAGE AGE SCALE		
OWNER AT	DDRESS: STREET, CITY, STATE	ZIP (X SAME AS DRIVER)		L.				4 1 - NONE		3 - FUNCTIONAL DAMAGE		
	FISHCREEK I		1 44224	Co	MMEDCIAL CADDIE	co PH(DNE: INCLUDE AREA CODE	2 - MINOR		GE 4 - DISABLING DAMAGE		
COMMERC	JAC DARRIER. HAME, ADDA	E33,0111,31A11,21F			I I I		I I I I I		DAMA	GED AREA(S)		
LP STATE	LICENSE PLATE #		E IDENTIFICATION # $MV_19_1C_1T_11_0_15_18$	2 1 1	VEHICLE Y		VEHICLE MAKE	IND	ICATE	ALL THAT APPLY		
	GUM3324 NCE INSURANCE COMP		INSURANCE POLICY #) 4 4	2 0 1		Nissan VEHICLE MODEL	11 12 1		11 12		
X INSURAL VERIFI		RM :	3177933SFP35		GRY		Juke	10 11 1	2	10 11 1 2		
Псомме	TYPE OF USE RCIAL GOVERNMENT [IN EMERGENCY RESPONSE	US DOT #		ED BY: COMPA kers Towing		ME	9 10 2 -	3	9 10 2 3		
INTERI	OCK .		EHICLE WEIGHT GVWR/GCWR	'[_	HAZARD MATERIAL		MATERIAL SS # PLACARD ID #		7.	8 4		
DEVICE	E HIT/SKIP UNI	$\begin{bmatrix} 0 & 1 \end{bmatrix}$	1 - ≤10KLBS. 2 - 10,001 - 26KLBS.	H	RELEASED PLACARD		II I I I I I	8 6 5	4	8 6 6		
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS. 12-GOLF CART	18 - LIMO (L	IVERY VEHICLE)	23 -	PEDESTRIAN / SKATER	6	11	12 6		
0.3		8 - MOTORCYCLE 3-WHEELED			+ PASSENGERS)		WHEELCHAIR (ANYTYPE)	10/	11			
UNITTYPE	4 - PICKUP	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED		20 - OTHER \ 21 - HEAVY	EQUIPMENT		OTHER NON-MOTORIST BICYCLE	9 (9			
	5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME		. WITH RIDER ORDRAWN VEHICLE		TRAIN UNKNOWN OR HIT/SKIP	<u> </u>	- B			
. 00	# of TRAILING UNITS	(ATV/UTV)	17 - MUTORHOME	7		99-	UNKNOWN OR HITSKIP	12	,	6 5 12		
	WAS VEHICLE OPERATING IN AU	TONOMOUS	D - NO AUTOMATION	2 CONDITI	ONAL AUTOMATIO	M Q .	IINIZNOWN	11 12		6 11 12 1		
2	MODE WHEN CRASH OCCURRED	9 1 0 1	1 - DRIVER ASSISTANCE	4 - HIGH AU	TOMATION	n 7.	UNINOWN	10 11 1	2	10 11 1 2		
	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS		5 - FULL AL	JTOMATION			9 9 3	3	9 9 3		
1000	1 - NONE	6 - BUS - CHARTER/TOUR		16-FARM	54		MAIL CARRIER	8 4 5	7.	8 4 5		
0,1	2 - TAXI 3 - ELECTRONIC RIDE SHARING	7 - BUS - INTERCITY 8 - BUS - SHUTTLE		12 - MILITARY 17 - MOWING 13 - POLICE 18 - SNOW RE			OTHER / UNKNOWN	8 6	4	8 6		
SPECIAL FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19-TOWING	3			6		6		
	5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT		SERVICE PATROL		***********		17	12 12		
0_1			0111.0010				CONCRETE MIXER AUTOTRANSPORTER	12				
BODY 2 - BUS		4 - LOGGING	7 004111011101110010041151	10 - FLAT BE	ED		GARBAGE/REFUSE	9 8 3	9 ~	. [©] 3 9 № 3		
TYPE	3. TUDNICIONAL C	4 - BRAKES		11 - DUMP 9 - MOTOR 1	rooupi r	25722.2	OTHER / UNKNOWN		4			
VEHICLE	1 - TURN SIGNALS 2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT	10-DISABL	ED FROM PRIOR	77-	OTHER / UNKNOWN	6	6			
	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDE	NT			☐ - NO DAMAG	E[0]	- UNDERCARRIAGE [14]		
	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER			/CROSSING ISLAND		FIRST RESPONDER AT INCIDENT SCENE			- ALL AREAS [15]		
NON-MOTORIST LOCATION	2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	B - SIDEWALK	10 - DRIVEW 11 - SHARED	USE PATHS OR		OTHER / UNKNOWN	□-TOP [13]				
AT IMPACT	CROSSWALK	5 - TRAVEL LANE - OTHER LOCATE		TRAILS				□-U	NIT NO	OT AT SCENE [16]		
	1-NON-CONTACT 2-NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING			ATING A CURVE NG OR CROSSING		APPROACHING OR LEAVING VEHICLE			DINT OF CONTACT		
4	3-STRIKING U 6	3 - CHANGING LANES	9 - LEAVINGTRAFFIC LANE	SPECIFI	IED LOCATION		STANDING	0 - NO DAM 0 - 3 1-12 - REFE		14 - UNDERCARRIAGE UNIT 15 - VEHICLE NOT AT SCENE		
ACTION	4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTIONS	4 - CVERTAKING/PASSING 5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGIN	IG, RUNNING, G, PLAYING	9777	OTHER NON-MOTORIST STANDING OUTSIDE	DIAG	RAM	99 - UNKNOWN		
	& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	INTRAFFIC	16 - WORKIN 17 - PUSHIN			DISABLED VEHICLE OTHER / UNKNOWN	13-T0P	-T0P			
	Vivosita .	7 - LEFT OF CENTER		17 - VISION	OBSTRUCTION	21.	LYING IN ROADWAY	TO A FET OWN TO OW	TR	RAFFIC		
6008 0808	2-FAILURE TOYIELD	8 - FOLLOWING TOO CLOSE / ACI	DADI/ED DOCITION	18-OPERAT	ING DEFECTIVE	22 -	NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY		TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN		
$\begin{bmatrix} 0_1 2_1 \end{bmatrix}$	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9-IMPROPER LANE CHANGE 10-IMPROPER PASSING	ILLEGALLY	EQUIPMENT 19 - LOAD SHIFTING/FALLING/			OPENING DOOR INTO ROADWAY	2 2 - TWO-WAY	_	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
CONTRIBUTING CIRCUMSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLIN 20 - IMPROP	VG PER CROSSING	99-	OTHER IMPROPER ACTION	# of THROUGH LANES		John Richard Sylvetica Province (April 1997)		
SEUTIENCE	6-IMPROPERTURN OF EVENTS	12 - IMPROPER BACKING						ON ROAD		RAIL GRADE CROSSING 1 - NOT INVOLVED		
			NON-COLLISION					_4_	_	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING		
1 2 0		6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	16 - RAILWA 17 - ANIMAL			WORK ZONE MAINTENANCE EQUIPMENT					
21	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	12 - DOWNHILL BLINAWAY	18 - ANIMAL 19 - ANIMAL			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	12 OTHER NON COLLISION	20 - MOTOR	VEHICLE IN		ANYTHING SET IN MOTION BY A MOTOR VEHICLE	1	1	2 - SOUTH 6 - NORTHWEST		
3	LOSS OR SHIFT	14-PEDESTRIAN TRANSPORT 24-OTHER MOVABLE OBJECT FROM 4 TO 1 3-EAST 7-SOUTHEAST 15-PEDALCYCLE 21-PARKED MOTORVEHICLE 4-WEST 8-SOUTHWEST										
	25 - IMPACT ATTENUATOR	COLLISIO 31-GUARDRAIL END	ON WITH FIXED OBJECT 37 - TRAFFIC SIGN POST	- STRU 43-CURB	JCK	50-	WORK ZONE MAINTENANCE			9 - OTHER / UNKNOWN		
4	/ CRASH CUSHION	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	VMENT		EQUIPMENT	UNIT SPEED		DETECTED SPEED		
5	STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	SUPPORT	45 - EMBAN 46 - FENCE	MENT	52 -	BUILDING	0,1,0,		1 - STATED / ESTIMATED SPEED		
	27 - BRIDGE PIER ORABUTMENT 28 - BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	47 - MAILBO 48 - TREE	X		TUNNEL OTHER FIXED OBJECT			2 - CALCULATED / EDR 3 - UNDETERMINED		
6	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUIDPORT	49 - FIRE HY	/DRANT	99 -	OTHER / UNKNOWN	POSTED SPEED		S - SHOEFERMINED		
								3 -		ı		

2 5

OHIO DEF	PARTMENT MIC SAFETY	OTORIST / NO	N-M	Ілто	DIC	т				LOCAL RE	PORT NU	MBER			
SAFETY - MERVI	ICE - PROTECTION	010K131 / 140) IA – IA	1010	K12	ı			2 0	2 4 - 0	0 , 0 ,	0 9	6 8	9	
UNIT#	NAME: LAST	, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
0,1	GAUE	R, PHYLLIS, E							0 8 2 7 1 9 5 2 7 1 F						
	741 PENNWOOD DR ,Tallmadge ,OH 44278									CONTACT PHONE - INCLUDE AREA CODE Redacted per ORC 149.43(A)(1)					
INJURIES	INJURED	EMS AGENCY (NAME)	(-	INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITI	ON AIR BA	GUSAGE	EJECTION	TRAPPED	
2 3	BY 2	Kent Fire		Akro	n Ci	ty Hospital		USED 0 4	□ MC HE	LMET 0 1	2	2 ,	_1_	_ 1 _	
OL STATE		OPERATOR LICENSE NUMBER OFFENSE CHARGED					LOCAL	OFFENSE DESC	RIPTION		CITA	TION NU	JMBER		
O H	REDAC	CTED PER ORC 450	1:1-12												
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED	_	OHOL / DRUG SUSPE		CONDITION	STATUS T	YPE VALUE	STATUS	DRUG TYPE	RESULT	SELECTUPTO4	
. 4 .			BY	1	=	LCOHOL MAF	RIJUANA	1	1	1	1	1			
UNIT #	NAME-LAST	FIRST, MIDDLE			υ۰	THER DRUG				DATE OF BIRTH		÷	AGE	GENDER	
. 0 . 2 .		RODNEY, L							. 1 . 1	2 1 1 1 9	5.	9 6	14	M	
	STREET, CITY, S								7.5	PHONE - INCLUDE AREA			7	171	
5016 I	FISHCE	REEK RD ,Stow ,C	OH 442	224						acted per C		149.	43(A	(1)	
S INJURIES	INJURED	EMS AGENCY (NAME)			AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C	SEATING POSITI	ON AIR BA	GUSAGE	EJECTION	TRAPPED	
5	TAKEN BY							USED 0 4	MC HE	MPLIANT		4 ,	. 1 .	1	
OL STATE		LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITA	TION NU	JMBER		
OH	REDAC	TED PER ORC 450	1:1-12	331.1	17		CODE	Right of Way	when Tu		281	65			
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED	_	OHOL / DRUG SUSPE		CONDITION	STATUS T	YPE VALUE	STATUS	TYPE	RESULT	SELECTUPTO4	
. 4	5583777777777		BY	1	=	LCOHOL MAR	RIJUANA	1 .	1	1	1.	1			
UNIT#	NAME: LAST	FIRST, MIDDLE		1	Цυ	THER DRUG				DATE OF BIRTH		Ť	AGE	GENDER	
S.M.T.S	TO THE COLUMN	, into / model									1727 27			u = m = m	
ADDRESS:	STREET, CITY, S	STATE, ZIP							CONTACT	PHONE - INCLUDE AREA	CODE				
10 E										1 1 1	1		- 1		
INJURIES		EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C	SEATING POSITI	ON AIR BAI	GUSAGE	EJECTION	TRAPPED	
NON	TAKEN BY							USED	MC HE						
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITA	TION NU	JMBER		
		20	20												
■ OL CLASS	ENDORSEMEN SELECT UP TO 2		DIS	VER Tracted	_	OHOL / DRUG SUSPE		CONDITION	STATUS T	YPE VALUE	STATUS	TYPE	RESULT	SELECTOPIO4	
			BY		=	LCOHOL MAF THER DRUG	RIJUANA							11 11 1	
INJU	RIES	SEATING POSITION	A	IR BAG		OL CLASS	5	OL RESTRIC	TION(S)	DRIVER DISTRA	CTION	Т	EST STA		
1 - FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1-NOTDEP			1 - CLASS A		1 - ALCOHOL INTER		1 - NOT DISTRACTED		1 - NONE			
3 - SUSPECTED	SERIOUS INJURY MINOR INJURY	2 - FRONT - MIDDLE	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPERATI ELECTRONIC COMML	NICATION		REFUSED GIVEN, CON	ITAMINATED	
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		D BOTH FRO	NT/SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DEVICE (TEXTING, TO DIALING)	PING,		PLE / UNUSA	ABLE BULTS KNOWN	
5 - NO APPAREN	IT INJURY	(M0TORCYCLE PASSENGER)	5-NOTAPP	LICABLE WENT UNKNO	WN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS		3 - TALKING ON HANDS- COMMUNICATION DE		5 - TEST	GIVEN, RES		
	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS		4 - TALKING ON HAND-H COMMUNICATION DE		UNKI	NO₩N		
1 - NOT TRANSP /TREATED AT	and the second second	7 - THIRD - LEFT SIDE	EJ	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		5 - OTHER ACTIVITY WI	THAN	ALCO 1 - NONE		ST TYPE	
2 - EMS 3 - POLICE		(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE	1 - NOTEJE 2 - PARTIAL			H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9-LEARNER'S PER	MIT	6 - PASSENGER		2 - BL00			
9 - OTHER / UNK	CNOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY			P - PASSENGER		RESTRICTIONS		7 - OTHER DISTRACTION		3 - URIN			
SAFETY E	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP	LICABLE		N-TANKER		10 - LIMITED TO DAY 11 - LIMITED TO EMI		INSIDE THE VEHICLE 8 - OTHER DISTRACTION		4 - BREA			
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		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1-NOTTRA			S - SCHOOL BUS		13 - MECHANICAL DI (SPECIAL BRAK)				1 - NONE			
4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHANICAL MEANS				T - DOUBLE & TRIPLE X - TANKER / HAZMAT		CONTROLS, OR O ADAPTIVE DEVI	THER CONDITION			2 - BLOOD					
5 - CHILD REST	RAINT SYSTEM – ACING	CARGO AREA 13 - TRAILING UNIT	3- FREED B NON-ME	Y Chanical Mi	EANS		new hove	14 - MILITARY VEHIC		2 - PHYSICAL IMPAIRME	NT	3 - URIN 4 - OTHE			
6 - CHILD REST	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	s WITHOUT	3 - EMOTIONAL (E.G., DEF ANGRY, DISTURBED)		DRUG	TEST RE	SULT(S)	
7 - BOOSTER SE		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO		4 - ILLNESS		1 - AMPI	HETAMINES		
8 - HELMET US	ED	99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER		5 - FELL ASLEEP, FAINTE FATIGUED, ETC.	:υ,		BITURATES ZODIAZEPINI	ES	
9 - PROTECTIVE (ELBOW, KNE										6 - UNDER THE INFLUEN OF MEDICATIONS / DE			NABINOIDS		
10 - REFLECTIVE										/ALCOHOL		5 - COCA	INE TES / OPIOID)\$	
11 - LIGHTING - F / BICYCLE ON										9 - OTHER/UNKNOWN		7 - OTHE			
99 - OTHER / UNK	CNOWN											8 - NEGA	ATIVE RESUL	LTS	

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O	OF PUBL	IC SAFETY	CCUPANT /	WITNE	SS ADDENDUM	Į.		2 0 2 4		ORTNUMBER O O O		0		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE						E OF BIRTH	0 0 2	AGE	GENDER		
	1 1								1 1 1		1 1			
Ž	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INGLUDE AREA GO	DE				
OCCUPAN														
5	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUISED			DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
ľ	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
								سسسا	1 1 1			نـــا		
UCCUPAN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
0	INJURIES	INJURED TAKEN BY	N USED					DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
ļ	ADDDESS	: STREET, CITY,	CTATE TIP					CONTACT PHONE						
OCCUPAN	AUDRESS:	: STREET, GITY,	STAIL, ZIP					CONTACT PHONE	INGLUDE AREA GO	DE				
9	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NANE, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
2	UNIT#	NAME-LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
	ONII #	NAME: LAS	i, FIRST, WIDDLE						L OF BIKIN		AGE	GENDER		
AN	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
UCCUPAN														
ă-	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
	نب	BŶ					U321	MC HELMET	سس	L	ــــا لـــــا			
ì			JRIES		Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG L	SAGE			
	1 - FATA		DIQUE IN HIDV	1 - NONE US VEHICLE	ED - OCCUPANT		IT – LEFT SIDE ORCYCLE DRIV	ER)	1 - NOT DE					
			RIOUS INJURY	2 - SHOULD	ER BELT ONLY USED	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH								
		SIBLE INJU		3 - LAP BEL	T ONLY USED									
	5 - NO A	PPARENT	INJURY		ER & LAP BELT USED	ENGER)								
ŀ	U.S.	INJURED	TAKEN BY		ESTRAINT SYSTEM – D FACING	DE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN								
		TRANSPOR			ESTRAINT SYSTEM -	D – LEFT SIDE ORCYCLE SIDE				CTION				
	2- EMS	EATED AT S	CENE	REAR FA		8 - THIR	CAR	ON						
	3- POLI			8 - HELMET			D - RIGHT SIDE	2 PARTIALLY EJECTED						
	9 - OTHI	ER / UNKNO	DWN		TVE PADS USED			OF TRUCK CAB HER ENCLOSED 3 - TOTALLY EJECTED						
		GEN	NDER		KNEES, ETC.)		O AREA (NON-TE	RAILING UNIT, 4 - NOT APPLICABLE						
	F - FEMALE 10 - REFLECTIVE CLOTHING BUS, PICK-UP WITH C 11 - LIGHTING - PEDESTRIAN 12 - PASSENGER IN UN						ENGER IN UNE							
	M - MALI	E R/UNKNO	WN	/ BICYCL	E ONLY		O AREA LING UNIT		1 - NOTTR					
				99- OTHER /	UNKNOWN		NG ON VEHICLE	EXTERIOR	2 - EXTRIC	CATED BY N	IECHANI	CAL		
						15 - NON-	MOTORIST ER / UNKNOWN		3 - FREED MEANS	BY NON-MI	ECHANIC	AL		
Ì	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WIINESS	FORV	WITH,	FREDERICK,	, T				1,2,2,	8 1 9	7 6	4 7	M		
À		STREET, CITY,		TT 44055				Redacte			13/4	()(1)		
ļ		ST, FIRST, MIDD	,SHELBY, ,O	H 44875					E OF BIRTH	10 148	AGE	GENDER		
E 2 S		,												
WIINESS	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
22	NAME: LAS	ST, FIRST, MIDD	LE						E OF BIRTH		AGE	GENDER		
WILNESS	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE		DE L	T 12 /3			
≥											1 1	11		

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TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH
24-9689	KENT PD	M 7 02 124

FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES
I, Fred Forwith HEREBY MAKE THIS VOLUNTARY STATEMENT TO
CARMHAN + 247 AT SCENC OFFICER'S NAME LOCATION
I was IN a Ford work truck
in the left lang heading west waiting
a Filer NissAN Sul Mas herely
west and turners left into a parking
lot when a sed Hunder Heading
Sul-
•
ADDRESS OF WITNESS PHONE Redacted per ORC 149.43(A)(1) SIGNATURE OF WITNESS OFFICER'S SIGNATURE OFFICER'S SIGN
X 7 X M. (1700 1500)