

OWNER	UNIT # 0 1	OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) WILLIAMS, NYSHALA, AUNDREA	OWNER PHONE: INCLUDE AREA CODE (X SAME AS DRIVER) REDACTED PER ORC 149.43(A)(1)		
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 182 DALE DR 101, Kent, OH 44240				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
VEHICLE	LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
	<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR BLK	VEHICLE MODEL
	TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT		VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	
	#OCCUPANTS 0 1				
	UNIT TYPE 1 0				
	# OF TRAILING UNITS				
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 1-YES 2-NO 9-OTHER/UNKNOWN		AUTONOMOUS MODE LEVEL 0 1-NO AUTOMATION 2-PARTIAL AUTOMATION 3-CONDITIONAL AUTOMATION 4-HIGH AUTOMATION 5-FULL AUTOMATION 9-UNKNOWN		
	SPECIAL FUNCTION 0 1				
	CARGO BODY TYPE 0 1				
VEHICLE DEFECTS 0 1					
NON-MOTORIST LOCATION AT IMPACT 0 1					
ACTION 4		PRE-CRASH ACTIONS 9 9			
CONTRIBUTING CIRCUMSTANCES 0 2					
SEQUENCE OF EVENTS 1 2 0		NON-COLLISION 11-CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12-DOWNHILL RUNAWAY 13-OTHER NON-COLLISION 14-PEDESTRIAN 15-PEDALCYCLE			
		COLLISION WITH FIXED OBJECT - STRUCK 31-GUARDRAIL END 32-PORTABLE BARRIER 33-MEDIAN CABLE BARRIER 34-MEDIAN GUARDRAIL BARRIER 35-MEDIAN CONCRETE BARRIER 36-MEDIAN OTHER BARRIER			
		41-CURB 42-CULVERT 43-TRAFFIC SIGN POST 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 5 - 0 0 0 1 6 9 8 9	
DAMAGE DAMAGE SCALE 1 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
DAMAGED AREA(S) INDICATE ALL THAT APPLY	
<input type="checkbox"/> - NO DAMAGE [0] <input type="checkbox"/> - UNDERCARRIAGE [14] <input type="checkbox"/> - TOP [13] <input type="checkbox"/> - ALL AREAS [15] <input type="checkbox"/> - UNIT NOT AT SCENE [16]	
INITIAL POINT OF CONTACT 0 9 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 6 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL	
# OF THROUGH LANES ON ROAD 3	RAIL GRADE CROSSING 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 0 1 0	DETECTED SPEED 1 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED	

OWNER	UNIT # 0 2	OWNER NAME: LAST, FIRST, MIDDLE () (SAME AS DRIVER) SATTERFIELD, STEPHEN, DAVID	OWNER PHONE: INCLUDE AREA CODE () (SAME AS DRIVER) REDACTED PER ORC 149.43(A)(1)																																																												
	OWNER ADDRESS: STREET, CITY, STATE, ZIP () (SAME AS DRIVER) 4036 LOCKWOOD BLVD, YOUNGSTOWN, OH 44511		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE																																																												
VEHICLE	LP STATE O H	LICENSE PLATE # JJJ7543	VEHICLE IDENTIFICATION # 3 V W 2 6 7 A J 7 G M B 6 6 0 1 6	VEHICLE YEAR 2 0 1 6	VEHICLE MAKE Volkswagen																																																										
	<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY SAFECO	INSURANCE POLICY # K3781385	COLOR WHI	VEHICLE MODEL JETTA																																																										
	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	TOWED BY: COMPANY NAME																																																											
	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS 0 1	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD																																																											
	TYPE OF USE		US DOT #	VEHICLE WEIGHT GVWR/GCWR																																																											
	<input type="checkbox"/> PASSENGER CAR		<input type="checkbox"/> PASSENGER VAN (MINIVAN)	<input type="checkbox"/> SPORT UTILITY VEHICLE	<input type="checkbox"/> PICK UP	<input type="checkbox"/> CARGO VAN	<input type="checkbox"/> VAN (9-15 SEATS)	<input type="checkbox"/> MOTORCYCLE 2-WHEELED	<input type="checkbox"/> MOTORCYCLE 3-WHEELED	<input type="checkbox"/> AUTOCYCLE	<input type="checkbox"/> MOPED OR MOTORIZED BICYCLE	<input type="checkbox"/> ALL TERRAIN VEHICLE (ATV / UTV)	<input type="checkbox"/> GOLF CART	<input type="checkbox"/> SNOWMOBILE	<input type="checkbox"/> SINGLE UNIT TRUCK	<input type="checkbox"/> SEMI-TRACTOR	<input type="checkbox"/> FARM EQUIPMENT	<input type="checkbox"/> MOTORHOME	<input type="checkbox"/> LIM (LIVERY VEHICLE)	<input type="checkbox"/> BUS (16+ PASSENGERS)	<input type="checkbox"/> OTHER VEHICLE	<input type="checkbox"/> HEAVY EQUIPMENT	<input type="checkbox"/> ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	<input type="checkbox"/> PEDESTRIAN / SKATER	<input type="checkbox"/> WHEELCHAIR (ANY TYPE)	<input type="checkbox"/> OTHER NON-MOTORIST	<input type="checkbox"/> BICYCLE	<input type="checkbox"/> TRAIN	<input type="checkbox"/> UNKNOWN OR HIT/SKIP																																		
	# OF TRAILING UNITS		WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		AUTONOMOUS MODE LEVEL		1 - NO AUTOMATION		2 - DRIVER ASSISTANCE		3 - PARTIAL AUTOMATION		4 - CONDITIONAL AUTOMATION		5 - HIGH AUTOMATION		9 - UNKNOWN																																														
	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		10 - AMBULANCE		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																		
	CARGO BODY TYPE		1 - NO CARGO BODY TYPE / NOT APPLICABLE		2 - BUS		3 - VEHICLE TOWING ANOTHER MOTORVEHICLE		4 - LOGGING		5 - INTERMODAL CONTAINER CHASSIS		6 - CARGO VAN/ENCLOSED BOX		7 - GRAIN/CHIPS/GRAVEL		8 - POLE		9 - CARGO TANK		10 - FLAT BED		11 - DUMP		12 - CONCRETE MIXER		13 - AUTOTRANSPORTER		14 - GARBAGE/REFUSE		99 - OTHER / UNKNOWN																																
	VEHICLE DEFECTS		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																																								
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		6 - BICYCLE LANE		7 - SHOULDER / ROADSIDE		8 - SIDEWALK		9 - MEDIAN/CROSSING ISLAND		10 - DRIVEWAY ACCESS		11 - SHARED USE PATHS OR TRAILS		12 - FIRST RESPONDER AT INCIDENT SCENE		99 - OTHER / UNKNOWN																																					
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 - OVERTAKING/PASSING		5 - MAKING RIGHT TURN		6 - MAKING LEFT TURN		7 - MAKING U-TURN		8 - ENTERING TRAFFIC LANE		9 - LEAVING TRAFFIC LANE		10 - PARKED		11 - SLOWING OR STOPPED IN TRAFFIC		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							
CONTRIBUTING CIRCUMSTANCES		1 - NONE		2 - FAILURE TO YIELD		3 - RAN RED LIGHT		4 - RAN STOP SIGN		5 - UNSAFE SPEED		6 - IMPROPER TURN		7 - LEFT OF CENTER		8 - FOLLOWING TOO CLOSE / ACDA		9 - IMPROPER LANE CHANGE		10 - IMPROPER PASSING		11 - DROVE OFF ROAD		12 - IMPROPER BACKING		13 - IMPROPER START FROM A PARKED POSITION		14 - STOPPED OR PARKED ILLEGALLY		15 - SWERVING TO AVOID		16 - WRONG WAY		17 - VISION OBSTRUCTION		18 - OPERATING DEFECTIVE EQUIPMENT		19 - LOAD SHIFTING/FALLING/SPILLING		20 - IMPROPER CROSSING		21 - LYING IN ROADWAY		22 - NOT DISCERNIBLE		23 - OPENING DOOR INTO ROADWAY		99 - OTHER IMPROPER ACTION															
SEQUENCE OF EVENTS		1 - OVERTURN/ROLLOVER		2 - FIRE/EXPLOSION		3 - IMMERSION		4 - JACKKNIFE		5 - CARGO / EQUIPMENT LOSS OR SHIFT		6 - EQUIPMENT FAILURE		7 - SEPARATION OF UNITS		8 - RAN OFF ROAD RIGHT		9 - RAN OFF ROAD LEFT		10 - CROSS MEDIAN		11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL		12 - DOWNHILL RUNAWAY		13 - OTHER NON-COLLISION		14 - PEDESTRIAN		15 - PEDALCYCLE		16 - RAILWAY VEHICLE		17 - ANIMAL - FARM		18 - ANIMAL - DEER		19 - ANIMAL - OTHER		20 - MOTOR VEHICLE IN TRANSPORT		21 - PARKED MOTORVEHICLE		22 - WORK ZONE MAINTENANCE EQUIPMENT		23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE		24 - OTHER MOVABLE OBJECT															
COLLISION WITH FIXED OBJECT - STRUCK		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 5 - 0 0 0 1 6 9 8 9									
DAMAGE									
DAMAGE SCALE									
1 - NONE		3 - FUNCTIONAL DAMAGE							
2 - MINOR DAMAGE		4 - DISABLING DAMAGE							
9 - UNKNOWN									
DAMAGED AREA(S) INDICATE ALL THAT APPLY									
<input type="checkbox"/> - NO DAMAGE [0]		<input type="checkbox"/> - UNDERCARRIAGE [14]							
<input type="checkbox"/> - TOP [13]		<input type="checkbox"/> - ALL AREAS [15]							
<input type="checkbox"/> - UNIT NOT AT SCENE [16]									
INITIAL POINT OF CONTACT		0 - NO DAMAGE		14 - UNDERCARRIAGE					
1 - 12 - REFER TO UNIT DIAGRAM		15 - VEHICLE NOT AT SCENE		99 - UNKNOWN					
13 - TOP									
TRAFFIC									
TRAFFICWAY FLOW		1 - ONE-WAY		2 - TWO-WAY					
TRAFFIC CONTROL		1 - ROUNDABOUT		4 - STOP SIGN					
2 - SIGNAL		5 - YIELD SIGN		3 - FLASHER		6 - NO CONTROL			
# OF THROUGH LANES ON ROAD		2		RAIL GRADE CROSSING		1 - NOT INVOLVED			
2		1		2 - INVOLVED-ACTIVE CROSSING		3 - INVOLVED-PASSIVE CROSSING			
UNIT / NON-MOTORIST DIRECTION		1 - NORTH		5 - NORTHEAST		2 - SOUTH		6 - NORTHWEST	
3 - EAST		7 - SOUTHEAST		4 - WEST		8 - SOUTHWEST		9 - OTHER / UNKNOWN	
UNIT SPEED		0 0 3		DETECTED SPEED		1 - STATED / ESTIMATED SPEED		2 - CALCULATED / EDR	
POSTED SPEED		2 5		3 - UNDETERMINED					

MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER													
2 0 2 5 - 0 0 0 1 6 9 8 9													
UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH		AGE	GENDER				
0 1	WILLIAMS, NYSHALA, AUNDREA					1 0 2 3 2 0 0 3		2 2	F				
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
182 DALE DR 101 ,Kent ,OH 44240						REDACTED PER ORC 149.43(A)(1)							
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
3	9			UH KENT URGENT CAR...		0 1		<input type="checkbox"/>	0 1		1	1	
OL STATE	OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER				
O H	REDACTED PER ORC 4501:1-12		331.22		X	Driving onto Roadway			30024				
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)			
6				1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		1	STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4
								1	1		1	1	
UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH		AGE	GENDER				
0 2	SATTERFIELD, CALEB, STEPHEN					0 5 1 0 2 0 0 5		2 0	M				
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
133 LINDEN RD ,Kent ,OH 44240						REDACTED PER ORC 149.43(A)(1)							
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
								<input type="checkbox"/>	0 1				
OL STATE	OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER				
O H	REDACTED PER ORC 4501:1-12												
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)			
4				1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		1	STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4
								1	1		1	1	
UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH		AGE	GENDER				
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
								<input type="checkbox"/>					
OL STATE	OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER				
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)			
					<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG			STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4
INJURIES													
1 - FATAL													
2 - SUSPECTED SERIOUS INJURY													
3 - SUSPECTED MINOR INJURY													
4 - POSSIBLE INJURY													
5 - NO APPARENT INJURY													
INJURED TAKEN BY													
1 - NOT TRANSPORTED / TREATED AT SCENE													
2 - EMS													
3 - POLICE													
9 - OTHER / UNKNOWN													
SAFETY EQUIPMENT													
1 - NONE USED													
2 - SHOULDER BELT ONLY USED													
3 - LAP BELT ONLY USED													
4 - SHOULDER & LAP BELT USED													
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING													
6 - CHILD RESTRAINT SYSTEM - REAR FACING													
7 - BOOSTER SEAT													
8 - HELMET USED													
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)													
10 - REFLECTIVE CLOTHING													
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY													
99 - OTHER / UNKNOWN													
SEATING POSITION													
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)													
2 - FRONT - MIDDLE													
3 - FRONT - RIGHT SIDE													
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)													
5 - SECOND - MIDDLE													
6 - SECOND - RIGHT SIDE													
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)													
8 - THIRD - MIDDLE													
9 - THIRD - RIGHT SIDE													
10 - SLEEPER SECTION OF TRUCK CAB													
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)													
12 - PASSENGER IN UNENCLOSED CARGO AREA													
13 - TRAILING UNIT													
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)													
15 - NON-MOTORIST													
99 - OTHER / UNKNOWN													
AIR BAG													
1 - NOT DEPLOYED													
2 - DEPLOYED FRONT													
3 - DEPLOYED SIDE													
4 - DEPLOYED BOTH FRONT / SIDE													
5 - NOT APPLICABLE													
9 - DEPLOYMENT UNKNOWN													
EJECTION													
1 - NOT EJECTED													
2 - PARTIALLY EJECTED													
3 - TOTALLY EJECTED													
4 - NOT APPLICABLE													
TRAPPED													
1 - NOT TRAPPED													
2 - EXTRICATED BY MECHANICAL MEANS													
3 - FREED BY NON-MECHANICAL MEANS													
OL CLASS													
1 - CLASS A													
2 - CLASS B													
3 - CLASS C													
4 - REGULAR CLASS (OHIO - D)													
5 - M/C MOPED ONLY													
6 - NO VALID OL													
OL RESTRICTION(S)													
1 - ALCOHOL INTERLOCK DEVICE													
2 - CDL INTRASTATE ONLY													
3 - CORRECTIVE LENSES													
4 - FARM WAIVER													
5 - EXCEPT CLASS A BUS													
6 - EXCEPT CLASS A & CLASS B BUS													
7 - EXCEPT TRACTOR-TRAILER													
8 - INTERMEDIATE LICENSE RESTRICTIONS													
9 - LEARNER'S PERMIT RESTRICTIONS													
10 - LIMITED TO DAYLIGHT ONLY													
11 - LIMITED TO EMPLOYMENT													
12 - LIMITED - OTHER													
13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)													
14 - MILITARY VEHICLES ONLY													
15 - MOTOR VEHICLES WITHOUT AIR BRAKES													
16 - OUTSIDE MIRROR													
17 - PROSTHETIC AID													
18 - OTHER													
DRIVER DISTRACTION													
1 - NOT DISTRACTED													
2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)													
3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE													
4 - TALKING ON HAND-HELD COMMUNICATION DEVICE													
5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE													
6 - PASSENGER													
7 - OTHER DISTRACTION INSIDE THE VEHICLE													
8 - OTHER DISTRACTION OUTSIDE THE VEHICLE													
9 - OTHER / UNKNOWN													
TEST STATUS													
1 - NONE GIVEN													
2 - TEST REFUSED													
3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE													
4 - TEST GIVEN, RESULTS KNOWN													
5 - TEST GIVEN, RESULTS UNKNOWN													
ALCOHOL TEST TYPE													
1 - NONE													
2 - BLOOD													
3 - URINE													
4 - BREATH													
5 - OTHER													
DRUG TEST TYPE													
1 - NONE													
2 - BLOOD													
3 - URINE													
4 - OTHER													
DRUG TEST RESULT(S)													
1 - AMPHETAMINES													
2 - BARBITURATES													
3 - BENZODIAZEPINES													
4 - CANNABINOIDS													
5 - COCAINE													
6 - OPIATES / OPIOIDS													
7 - OTHER													
8 - NEGATIVE RESULTS													