| OHIO DEPARTMENT TRAFFIC CRASH | LOCAL REPORT NUMBER* | | | | | | | |
|--|------------------------------------|--|-----------------------------|---|--|--|--|--|
| PHOTOS TAKEN OH-2 OH-3 | | 2 0 2 5 - 0 0 0 1 5 1 3 7 | | | | | | |
| X OH-1P OTHER | | NCIC* HIT/SKIP NUMBER OF UNITS | | | UNIT IN ERROR | | | |
| SECONDARY CRASH PRIVATE PROPERTY | City of Kent Police | 0 | 6,7,0,3 | 1 - SOLVED L 2 - UNSOLVED | 0_2_0 | 1 98 - ANIMAL 99 - UNKNOWN | | |
| COUNTY* LOCALITY* LOCATION: CITY | CRASH DATE / TIME* CRASH SEVERITY | | | | | | | |
| 6 7 1 2-VILLAGE Kent | | | | 1020202025 | / ₁ 7 ₂ 5 ₂ | - SERIOUS INJURY | | |
| 2-SOUTH | LOCATION ROAD NAME | | ROAD TYPE | LATITUDE DE | - | SUSPECTED - MINOR INJURY | | |
| 4 - WEST | HAYMAKER WY | | PK | 41,15,1 | 2,0,6 | SUSPECTED | | |
| 2 - SOUTH | REFERENCE ROAD NAME (ROAD, | MILEPOST, HOUSE #) | ROAD TYPE | LONGITUDE D | | - INJURY POSSIBLE - PROPERTY DAMAGE | | |
| 3 - EAST 4 - WEST | STOW | | S T | -8 ₁ 1 ₀ 3 ₆ 6 | 0 8 4 | ONLY | | |
| REFERENCE POINT DIRECTION 1-INTERSECTION FROM REFERENCE IR - | ROUTE TYPE INTERSTATE ROUTE(TP) AL | - ALLEY HW- HIGHWAY | RD - ROAD | [22] | INTERSECTION RELATE | | | |
| 1 2-MILE POST 4 2-SOUTH US- | | | SQ - SQUARE | WITHIN INTE | RSECTION OR ON APPROA | , 4 | | |
| 4 - WEST SR- | STATE RUUTE | | ST - STREET TE - TERRACE | ☐ WITHIN INTE | RCHANGE AREA NUM | IBER OF APPROACHES | | |
| FROM REFERENCE UNIT OF MEASURE | NUMBERED COUNTY ROUTE CT | | TL - TRAIL | | ROADWAY | | | |
| 2 2-FEET | ROUTE | - DRIVE PI - PIKE - HEIGHTS PL - PLACE | WA - WAY | ROADWAY DIV | IDED | | | |
| LOCATION OF FIRST HARMFUL EVEN | | NER OF CRASH COLLISION/IMPA | VCT. | DIDECTION OF TOAKE | MENA | NITYDE | | |
| 1 - ON ROADWAY 9 - CROSSOVER | 1 - NOT | COLLISION 4 - REAR-TO-REAR | | DIRECTION OF TRAVE 1 - NORTH | | N TYPE LUSH MEDIAN | | |
| 0 1 2- ON SHOULDER 10-DRIVEWAY/ | TWO | WEEN 5-BACKING MOTOR 6-ANGLE | | 2 - SOUTH | (< 4 FEET | LUSH MEDIAN | | |
| 4 - ON ROADSIDE 12-SHARED US | E PATHS OR TRAN | NSPORT 7 - SIDESWIPE, SAN | | 3 - EAST 4 - WEST | (≥4 FEET | 4 FEET) | | |
| 5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE | 2 - REAF 3 - HEAD | (1) H. C. | | | | - DIVIDED, DEPRESSED MEDIAN - DIVIDED, RAISED MEDIAN | | |
| 7 - ON RAMP 14-TOLL BOOTH | | | | | 9 - OTHER/UN | | | |
| 8-OFF RAMP 99-OTHER/UN | | | ODY ZONE | CONTOUR | CONDITIONS | SURFACE | | |
| WORK ZONE RELATED | WORK ZONE TYPE LANE CLOSURE | 1 - BEFORE THE 1ST | | 1 1 | 1 | 2 | | |
| _ | LANE SHIFT/CROSSOVER | WARNING SIGN 2 - ADVANCE WARNI | NG AREA | 1-STRAIGHT LEVEL 1-DRY 1-CONCRET | | | | |
| LAW ENFORCEMENT PRESENT | NORK ON SHOULDER OR MEDIAN | 3-TRANSITION ARE | 22. | 2 - STRAIGHT GRADE 2 - WET 2 - BLACKTO | | | | |
| The state of the s | INTERMITTENT OR MOVING WORK OTHER | 4 - ACTIVITY AREA 5 - TERMINATION AR | REA | 3 - CURVE LEVEL | 3 - SNOW | BITUMINOUS, ASPHALT | | |
| | | | | 4 - CURVE GRADE | 3 - BRICK/BLOCK | | | |
| LIGHT CONDITION 1 - DAYLIGHT | 1-CLEAR | 6 - SNOW | | 9 - OTHER/UNKNOWN | 4 - SLAG, GRAVEL, STONE | | | |
| 1 2-DAWN/DUSK | 7 - SEVERE CROSSWINDS | | | 5 - DIRT | | | | |
| 3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED | 3 - FOG, SMOG, SMOKE 4 - RAIN | 8 - BLOWING SAND, SOIL, DIR' 9 - FREEZING RAIN OR FREEZ | | | 9 - OTHER/UNKNOWN | | | |
| 5 - DARK - UNKNOWN ROADWAY LIGHTING | 5 - SLEET, HAIL | 99 - OTHER / UNKNOWN | | | 9 - OTHER/UNKNOWN | | | |
| 9 - OTHER / UNKNOWN | | | | | | | | |
| NARRATIVE | | | | | A | Indicate the north direction with | | |
| UNIT 2 WAS STALLED IN THI | E CENTER LANE | | | | 1 | an "N" on the compass diagram. | | |
| ON HAYMAKER PKWY. HEA | ADING EASTBOUN | D | | | | | | |
| NEAR STOW ST. UNIT 1 WAS | REHIND UNIT 2 | | | | | | | |
| AND FAILED TO MAINTAIN | | | HAYMAKER?PH | cwy. | | | | |
| | | | | | | | | |
| CLEAR DISTANCE STRIKIN | G UNIT 2. | _ | 25, 25 25 | 42 - 10 Be - 10 W | | | | |
| | | | | IT 1—UNIT 2 | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | R Z | | SIDWIST | | | | |
| | | | Not To Scale | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| CRASH REPORTED DATE / TIME | DISPATCH DATE / TIME | | SCENE CLEARED | | EPORT TAKEN BY | | | |
| $\lfloor 1,0,2,0,2,0,2,5,/,1,7,2,5, \lfloor 1,0,2,1 \rfloor$ | 0,2,0,2,5,/,1,7,2,5, | 1,0,2,0,2,0,2,5,/,1 | 7311 | . 0, 2, 0, 2, 0, 2, | 5 _{./.1.7.4.9} | A service development of the service | | |
| TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT | | | HECKED BY OFFI | | | MOTORIST | | |
| MINUT | Auckland, Kyle | | lelson, Jo | OSh By Officer's Badge 1 | UMBER* | SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS) | | |
| 0 0 0 0 3 0 0 5 | | J. HOMBER | 2 3 | 2 | | | | |

LOCAL REPORT NUMBER 2 . 0 . 2 . 5 . - . 0 . 0 . 0 . 1 . 5 . 1 . 3 . 7 . OWNER PHONE: INCLUDE AFEA CODE (SAME AS DRIVER)
REDACTED PER ORC 149.43(A)(1) OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) DAMAGE HOOVER, GRAYSON, BENNETT DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER) 2 3272 WEBB RD , Shalersville , OH 44266 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE 2 0 2 1 Ram 1, C 6, S, R, F, B, T, 9, MN 7, 9, 8, 3, 9, 3, O H KFK8755 INSURANCE VERIFIED INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MODEL PROGRESSIVE 903024941 GRY 1500 TYPE OF USE US DOT# TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR INTERLOCK DEVICE #OCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS. HIT/SKIP UNIT 2 - 10,001 - 26K LBS. EQUIPPED 0,2 PLACARD 」 3 - >26K LBS. 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNITTYPE 4 - PICKUP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 -TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - LINKNOWN OR HIT/SKIP (ATV/UTV) # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION AUTONOMOUS 2 - PARTIAL AUTOMATION 1-YES 2-NO 9-0THER/UNKNOWN 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN 0 1 2 - TAXI 7 - BUS - INTERCITY SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18-SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 19-TOWING 9 - BUS - OTHER 14 - PUBLIC UTILITY 5 - BUS - TRANSIT/COMMUTER 10-AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 1 - NO CARGO BODY TYPE 8 - POLE 12 - CONCRETE MIXER 0.1 / NOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER CARGO 2 - RUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 14-GARBAGE/REFUSE 10-FLAT BED BODY * 7 - GRAIN/CHIPS/GRAVEL 11-DUMP 99-OTHER / UNKNOWN 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR 5 - STEERING DEFECTIVE ACCIDENT DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT -NO DAMAGE [0] - UNDERCARRIAGE [14] 9 - MEDIAN/CROSSING ISLAND 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE ☐-TOP [13] - ALL AREAS [15] 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS NON-MOTORIST 2-INTERSECTION - UNMARKED 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11 - SHARED USE PATHS OR LOCATION CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS AT IMPACT 1-NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 1 1 3 - CHANGING LANES 14 - UNDERCARRIAGE 3 3-STRIKING 0 - NO DAMAGE 19-STANDING SPECIFIED LOCATION 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 99 - UNKNOWN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13-TOP 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS TRAFFIC 1-NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY TRAFFIC CONTROL TRAFFICWAY FLOW PARKED POSITION 18-OPERATING DEFECTIVE 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED EQUIPMENT 2 - TWO-WAY 0 8 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 5 - YIELD SIGN 2 - SIGNAL ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # of THROUGH LANES RAIL GRADE CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 4 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 1 2 0 1 - OVERTURNIROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF EQUIPMENT 17 - ANIMAL - FARM 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS UNIT / NON-MOTORIST DIRECTION TRAVEL 23 - STRUCK BY FALLING, 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGOOR 1 - NORTH 5 - NORTHEAST

19-ANIMAL - OTHER

20 - MOTOR VEHICLE IN

21 - PARKED MOTOR VEHICLE

TRANSPORT

45 - EMBANKMENT

49-FIRE HYDRANT

43-CURB

44 - DITCH

46-FENCE

48-TREE

47 - MAILBOX

13 - OTHER NON-COLLISION

COLLISION WITH FIXED OBJECT - STRUCK

37 - TRAFFIC SIGN POST

38 - OVERHEAD SIGN POST

39-LIGHT/LUMINARIES

SUPPORT

40 - UTILITY POLE

OR SUPPORT

42 - CULVERT

41 - OTHER POST, POLE

14-PEDESTRIAN

15 - PEDAL CYCLE

ANYTHING SET IN MOTION

BY A MOTOR VEHICLE

24 - OTHER MOVABLE OBJECT

50 - WORK ZONE MAINTENANCE EQUIPMENT

54 - OTHER FIXED OR JECT

99 - OTHER / UNKNOWN

51-WALL

52 - BUILDING

53-TUNNEL

J 4 - JACKKNIFE

5 - CARGO / EQUIPMENT

25 - IMPACT ATTENUATOR

/ CRASH CUSHION

26 - BRIDGE OVERHEAD

27 - BRIDGE PIER ORABUTMENT

STRUCTURE

28-BRIDGE PARAPET

30-GUARDRAIL FACE

_ 29-BRIDGE RAIL

LOSS OR SHIFT

9 - RAN OFF ROAD LEFT

10 - CROSS MEDIAN

31 - GUARDRAIL END

32 - PORTABLE BARRIER

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

BARRIER

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

33 - MEDIAN CABLE BARRIER

36 - MEDIAN OTHER BARRIER

6 - NORTHWEST

7 - SOUTHEAST

8 - SOUTHWEST

1 - STATED / ESTIMATED SPEED

DETECTED SPEED

2 - CALCULATED / EDR

3 - UNDETERMINED

9 - OTHER / UNKNOWN

2 - SOUTH

3 - EAST

4 - WEST

FROM 4 TO 3

UNIT SPEED

0 0 2

POSTED SPEED

3 5

LOCAL REPORT NUMBER 2 . 0 . 2 . 5 . - . 0 . 0 . 0 . 1 . 5 . 1 . 3 . 7 . OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)
REDACTED PER ORC 149.43(A)(1) DAMAGE CLOUD, EMERSON, MONROE DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 3 - FUNCTIONAL DAMAGE 1 - NONE 1664 18TH ST ,Cuyahoga Falls ,OH 44223 □ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE 2 0 0 0 Porsche $WP_1O_1A_1A_2P_1O_1G_1Y_1S_1G_12_2A_1G_1O_1$ O H KTM3408 INSURANCE POLICY # INSURANCE VERIFIED **INSURANCE COMPANY** COLOR VEHICLE MODEL STATE FARM SIL 2965976SFP35 CARRERA TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR INTERLOCK DEVICE #OCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS RELEASED HIT/SKIP UNIT 2 - 10.001 - 26K LBS EQUIPPED $0_{\perp}1$ PLACARD J 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNITTYPE 4 - PICKUP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 -TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV/UTV) # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 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| 2 | | 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT | 9 - RAN OFF ROAD LEFT 10-CROSS MEDIAN | 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE | 19-ANIMAL — OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE | ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT | FROM 4 TO 3 | 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST |
|-------|---|--|---|--|---|---|--------------|---|
| | | | COLLISIO | N WITH FIXED OBJE | CT - STRUCK | 15 | | 9 - OTHER / UNKNOWN |
| 4L_ | | 25 - IMPACT ATTENUATOR / CRASH CUSHION | 31 - GUARDRAIL END 32 - PORTABLE BARRIER | 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST | 43 - CURB 44 - DITCH | 50 - WORK ZONE MAINTENANCE EQUIPMENT | UNIT SPEED | DETECTED SPEED |
| 5 | | 26-BRIDGE OVERHEAD STRUCTURE 27-BRIDGE PIER ORABUTMENT | 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER | 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE | 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX | 51 - WALL 52 - BUILDING 53 - TUNNEL | 0 0 0 | 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR |
| 6∟ | ب | 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE | 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER | 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT | 48-TREE 49-FIRE HYDRANT | 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN | POSTED SPEED | 3 - UNDETERMINED |
| L | 1 | FIRST HARMFUL EVEN | T 1 MOST | HARMFUL EVENT | | | 3 5 | |

| OFF PUBLIC SAFETY MOTORIST / NON-MOTORIST | | | | | | LOCAL REPORT NUMBER | | | | | | | | | |
|--|---------------------------------|--|----------------------------|------------------------|---------------------------------|---------------------------------------|---|--|---|---|---------------|----------------------------------|----------------------|--|--|
| Control Manual M | | | | | | | 2 + 0 + 2 + 5 + - + 0 + 0 + 0 + 1 + 5 + 1 + 3 + 7 | | | | | | | | |
| UNIT# | NAME: LAST, FIRST, MIDDLE | | | | | | | DATE OF BIRTH AGE GENDER | | | | | | | |
| 0,1 | HOOVER, GRAYSON, BENNETT | | | | | | | 1 1 1 2 0 2 0 0 4 2 0 M | | | | | | | |
| | STREET, CITY, STATE, ZIP | | | | | | | | CONTACT PHONE - INCLUDE AREA CODE REDACTED PER ORC 149.43(A)(1) | | | | | | |
| 5 | WEBB RD ,Shalersville ,OH 44266 | | | | | | | | | | | | | | |
| INJURIES | INJURED TAKEN BY | EMS AGENCY (NAME) | | INJUREDI | AKEN TO | MEDICAL FACILITY | (NAME, CITY) | USED | Прот-с∘ МС НЕ | MPLIANT | AIR BAG U | ISAGE EJECTIO | N TRAPPED | | |
| S OL STATE | | LICENSE NUMBER | | OFFENS | E CHAI | DCEN | LOCAL | OFFENSE DESC | | LMET 0 1 | CITATI | ON NUMBER | | | |
| O. H. | | TED PER ORC 450 | 1:1-12 | | | KGED | CODE | Maximum Sp | | 20006 | | | | | |
| 0 | ENDORSEMEN | | | VER | | OHOL / DRUG SUSP | | CONDITION | ALC | OHOL TEST | | DRUG TEST(| | | |
| | SELECT UP TO 2 | ************************************** | BA | TRACTED | | LCOHOL MA | RIJUANA | | STATUS T | YPE VALUE | | TYPE RESU | LT SELECTUPTO4 | | |
| 4 | ا | | ا لـــ | 1 | 0 | THER DRUG | | 1 | | | 1 | 4 | | | |
| UNIT# | | FIRST, MIDDLE | IOND | OF | | | | | DATE OF BIRTH AGE GENDER OF 1 O 1 O 1 O 1 O 1 O 1 O 1 O 1 O 1 O | | | | | | |
| 0 2 | STREET, CITY, S | D, EMERSON, M | IONK | OE | | | | | 75 | PHONE - INCLUDE AREA O | | | _ M_ | | |
| = | | Γ, Cuyahoga Falls | OH 4 | 4223 | | | | | RED | ACTED PER | RORC | 149.4 | 3(A)(1) | | |
| INJURIES | | EMS AGENCY (NAME) | ,011 4 | | AKEN TO | MEDICAL FACILITY | (NAME, CITY) | SAFETY EQUIPMENT | L | SEATING POSITIO | N AIR BAG U | SAGE EJECTIO | N TRAPPED | | |
| 5 | TAKEN BY | | | | | | | USED 0 4 | □MC HE | MPLIANT | 1 | 1 | 1 1 | | |
| OL STATE | OPERATOR | LICENSE NUMBER | 4.4.40 | OFFENS | SE CHAI | RGED | LOCAL | OFFENSE DESC | RIPTION | | CITATI | ON NUMBER | | | |
| O H | REDAC | TED PER ORC 450 | 1:1-12 | | | | CODE | | | | | | | | |
| OL CLASS | ENDORSEMEN SELECT UP TO 2 | | | VER TRACTED | _ | OHOL / DRUG SUSP | | CONDITION | STATUS T | YPE VALUE | | DRUG TEST(TYPE RESU | S) LT SELECTUPTO4 | | |
| . 4 . | | 1 | BY | 1 . | = | LCOHOL MAI | RIJUANA | . 1 . | 1 | 1 | 1 | 1 | | | |
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| INJURIES | INJURED TAKEN | EMS AGENCY (NAME) | | INJUREDI | AKEN TO | MEDICAL FACILITY | (NAME, CITY) | SAFETY EQUIPMENT | □ рот-с∘ | | N AIR BAG U | SAGE EJECTIO | N TRAPPED | | |
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| OL CLASS | ENDORSEMEN | T RESTRICTION SELECT | UP TO 3 DRI | VER | ALC | OHOL / DRUG SUSP | ECTED | CONDITION | | OHOL TEST | | DRUG TEST(| S) | | |
| | SELECT UP TO 2 | | DIS | TRACTED | | | RIJUANA | 0.0000000000000000000000000000000000000 | STATUS T | YPE VALUE | STATUS | TYPE RESU | LT SELECTOP 104 | | |
| | ا | | | | 0 | THER DRUG | MEV. | | | | | | ــالــالــ | | |
| 1 - FATAL | RIES | 1- FRONT - LEFT SIDE | 1- NOT DEP | IR BAG | 1 | 1-CLASS A | 5 | OL RESTRIC 1-ALCOHOL INTER | | 1 - NOT DISTRACTED | 1000 | - NONE GIVEN | ATUS | | |
| | SERIOUS INJURY | (MOTORCYCLE DRIVER) 2 - FRONT – MIDDLE | 2 - DEPLOYI | | | 2 - CLASS B | | 2 - CDL INTRASTAT | | 2 - MANUALLY OPERATIN ELECTRONIC COMMUN | CATION | -TEST REFUSED | | | |
| 3 - SUSPECTED 4 - POSSIBLE IN | | 3 - FRONT - RIGHT SIDE | 3 - DEPLOYI | ED SIDE ED BOTH FRO | NT/SIDE | 3 - CLASS C 4 - REGULAR CLASS | | 3 - CORRECTIVE LE 4 - FARMWAIVER | NSES | DEVICE (TEXTING, TYI | | SAMPLE / UNU | | | |
| 5 - NO APPAREN | | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) | 5-NOTAPP | | | (0HI0 = D) | | 5 - EXCEPT CLASS | A BUS | 3 - TALKING ON HANDS-FI | KEE _ | - TEST GIVEN, RI | | | |
| INJURED | TAKEN BY | 5 - SECOND - MIDDLE | 9- DEPLOYI | MENT UNKNO | WN | 5 - M/C MOPED ONLY 6 - NO VALID OL | | 6 - EXCEPT CLASS & CLASS B BUS | A | COMMUNICATION DEV 4 - TALKING ON HAND-HE | | -TEST GIVEN, RI UNKNOWN | - 20F12 | | |
| 1 - NOT TRANSP | Programme and the second | 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE | F | ECTION | | OL ENDORSE | MENT | 7 - EXCEPT TRACTO | | COMMUNICATION DE V | ICE | ALCOHOL TE | EST TYPE | | |
| 2 - EMS | JULIE | (M0TORCYCLE SIDE CAR) | 1 - NOTEJE | | | H - HAZMAT | | 8 - INTERMEDIATE RESTRICTIONS | LICENSE | 5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE | | - NONE - BLOOD | | | |
| 3 - POLICE 9 - OTHER / UNK | MONAN | 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE | 2 - PARTIAL 3 - TOTALLY | LY EJECTED | | M - MOTORCYCLE P - PASSENGER | | 9 - LEARNER'S PER RESTRICTIONS | MIT | 6 - PASSENGER 7 - OTHER DISTRACTION | | - BLOOD - URINE | | | |
| | | 10 - SLEEPER SECTION OF TRUCK CAB | 4-NOTAPP | | | N-TANKER | | 10 - LIMITED TO DAY | | INSIDE THE VEHICLE | | - BREATH | | | |
| 1 - NONE USED | QUIPMENT | 11 - PASSENGER IN OTHER | T | RAPPED | | Q - MOTOR SCOOTER | TODOVO F | 11 - LIMITED TO EMI 12 - LIMITED - OTHE | | 8 - OTHER DISTRACTION (THE VEHICLE | OLZINE 2 | - OTHER | | | |
| 2 - SHOULDER B | ELT ONLY USED | ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, | 1-NOTTRA | | U de | R - THREE-WHEEL MC S - SCHOOL BUS | TORCYCLE | 13 - MECHANICAL D | EVICES | 9 - OTHER / UNKNOWN | , | DRUG TES | ТТҮРЕ | | |
| 3 - LAP BELT ON 4 - SHOULDER & | | PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED | 2 - EXTRICA MECHAN | ITED BY IICAL MEANS | | T - DOUBLE & TRIPLE | | (SPECIAL BRAK CONTROLS, OR O | THER | CONDITION | | - BL00D | | | |
| 5 - CHILD RESTR | RAINT SYSTEM - | CARGO AREA 13 - TRAILING UNIT | 3- FREED B | Y Chanical Mi | EANS | X - TANKER / HAZMAT | hien hip | ADAPTIVE DEVI | | 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN | | - URINE I - OTHER | | | |
| | RAINT SYSTEM - | 14 - RIDING ON VEHICLE EXTERIOR | | | | GENDER F-FEMALE | | 15 - MOTOR VEHICLE AIR BRAKES | | | | DRUG TEST RESULT(S) | | | |
| REAR FACING 7 - BOOSTER SE | | (NON-TRAILING UNIT) 15 - NON-MOTORIST | | | | M - MALE | | 16-OUTSIDE MIRRO | OR 4- ILLNESS | | | 1 - AMPHETAMINES | | | |
| 8 - HELMET USI | | 99 - OTHER / UNKNOWN | | | | U -OTHER / UNKNOWN | | 17 - PROSTHETIC AII 18 - OTHER |) | 5 - FELL ASLEEP, FAINTED FATIGUED, ETC. | 100 | - BARBITURATES | | | |
| 9 - PROTECTIVE (ELBOW, KNE | | | | | | | | The state of the s | | 6 - UNDERTHE INFLUENCE OF MEDICATIONS / DRU | E , | - BENZUUTAZEPT - CANNABINOIDS | | | |
| 10 - REFLECTIVE | CLOTHING | | | | | | | | | /ALCOHOL | 5 | - COCAINE | inc | | |
| 11 - LIGHTING - F / BICYCLE ON | | | | | | | | | | 9 - OTHER/UNKNOWN | | - OPIATES / OPIO ' - OTHER | 103 | | |
| 99 - OTHER / UNK | NOWN | | | | | | | | | | 8 | - NEGATIVE RES | ULTS | | |

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| U | OF PUBLIC SAFTY OCCUPANT / WITNESS ADDENDUM | | | | | | LOCAL REPORT NUMBER | | | | | | | | |
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| _ | Z:: | 7.0 | | | | | | $2 \cdot 0 \cdot 2 \cdot 5$ | 0_0 | $10_{1}1_{1}5$ | 113 | <u>.7</u> | | | |
| | UNIT # NAME: LAST, FIRST, MIDDLE | | | | | | | DATE OF BIRTH AGE GENDER | | | | | | | |
| Ļ | 01 MURPHY, RILEY, MORGAN | | | | | | | | 0 4 0 1 2 0 0 5 2 0 F | | | | | | |
| PAN | ADDRESS: STREET, CITY, STATE, ZIP | | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | |
| OCCUPANT | 3214 SUFFOLK DOWNS ,Stow ,OH 44224 | | | | | | | REDACTED PER ORC 149.43(A)(1 | | | | | | | |
| 0 | INJURIES | INJURED TAKEN | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FACILI | ITY (NAME, CITY) | SAFETY EQUIPMENT USED | DOT-COMPLIANT | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED | | | |
| | 5 | ВУ | | | | | $\lfloor 0_{\perp} 4_{\perp}$ | MC HELMET | $\begin{bmatrix} 0 & 3 \end{bmatrix}$ | 1 | 1_1_ | 1 | | | |
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| | | INJU | JRIES | SAFET | Y EQUIPMENT USED | | SEATING POS | ITION | | AIR BAG U | SAGE | الرامات | | | |
| | 1 - FATA | AL | | 1 - NONE US | | | T - LEFT SIDE | ED) | 1 - NOT DE | PLOYED | | | | | |
| | 2 - SUS | PECTEDSE | RIOUS INJURY | | E OCCUPANT (MOTORCYCLE DRIV DER BELT ONLY USED 2 - FRONT – MIDDLE 3 - FRONT – RIGHT SIDI 4 - SECOND – LEFT SID (MOTORCYCLE PASS | | | 2 - DEPLOYED F | | | RONT | | | | |
| | | | NOR INJURY | | | | | | YED SIDE | | | | | | |
| | | SIBLE INJU | | | | | | | 4 - DEPLOYED BOTH FRONT/SIDE | | | | | | |
| | 5 - NO A | PPARENT | INJURY | | RESTRAINT SYSTEM - 5 - SECOND - MIDDLE | | | 5 - NOT APPLICABL | | | BLE | | | | |
| | | INJURED | TAKEN BY | FORWAR | RD FACING 6 - SECOND - RIGHT SIL | | | 9 - DEPLOTIVIENT UNKNOWN | | | | | | | |
| | | TRANSPOR EATED AT S | | 6 - CHILD RI | ESTRAINT SYSTEM - CING | ECAR) EJECTION | | | | | | | | | |
| | 2 - EMS | | | 7 - BOOSTER | | | 1 - NOT EJ | West-Trade | | # HOTE | | | | | |
| | 3 - POLI | | | 8 - HELMET | USED | | D - RIGHT SIDE | E OF TRUCK CAB 2 - PARTIALLY E | | | EJECTED | | | | |
| | 9 - OTH | ER / UNKNO | DWN | 9 - PROTECT | TVE PADS USED | | | HER ENCLOSED 3 - TOTALLY EJECTED | | | | | | | |
| | | GEN | NDER | | KNEES, ETC.) | | O AREA (NON-TH | 4 - NOT ATT LICABLE | | | | | | | |
| E | F-FEMA | ALE | | | TVE CLOTHING | | ENGER IN UNE | | | | | | | | |
| | M - MAL | | | / BICYCL | G – PEDESTRIAN E ONLY | | O AREA | 1 - NOTTRAPPED | | | | | | | |
| H | U - OTHE | R / UNKNO | WN | 99 - OTHER / | UNKNOWN | LING UNIT NG ON VEHICLE | EXTERIOR | | ATED BY MECHANICAL | | | | | | |
| | | | | | | | TRAILING UNIT) | | MEANS | BY NON-ME | CHANIC | AI | | | |
| | | | | | | | MOTORIST R/UNKNOWN | | MEANS | | CHANIC | AL | | | |
| Н | NAME | ST, FIRST, MIDD | I F | | | 77 - OTTIL | IN 7 CHAINIO MIN | DAT | E OF BIRTH | | AGE | GENDER | | | |
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