OF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTES	MANDATORY FIELD FOR SUPPLEM	MENT REPORT	,	LOCAL REPORT NUMBER	? *			
D DHOTOS TAKEN 0H-2 0H-3	LOCAL INFORMATION			2 0 2 3	O _ O _ O _ I _	8, 5, 6, 6,			
PHOTOS TAKEN X OH-1P OTHER	REPORTING AGENCY NAME*	NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR				
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Poli	ce 0	6,7,0,3	1 - SOLVED L 2 - UNSOLVED	0 2 0	2 98 - ANIMAL 99 - UNKNOWN			
1 - CITY	, VILLAGE, TOWNSHIP*		CRASH DATE / TIME* CRASH SEVERITY						
6,7 1 2-VILLAGE Kent				111182023	12027 5	- SERIOUS INJURY			
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH S - SOUTH L E - EAST L W. WEST	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		SUSPECTED			
S R 43 L E-EAST W-WEST	MANTUA		$S \perp T$	$41_{0}160$	5 2 8	- MINOR INJURY SUSPECTED			
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH	REFERENCE ROAD NAME (RO	AD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE D	a sale de constitue de la cons	- INJURY POSSIBLE			
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	830			-8 ₁ 1 ₁ 3 ₁ 5 ₁ 8	9,0,2	- PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE		(a	INTERSECTION RELATE	D			
2 - MILE POST C. COUTH	INTERSTATE ROUTE(TP) FEDERAL US ROUTE		RD - ROAD SQ - SQUARE	WITHIN INTE	RSECTION OR ON APPROA	ACH			
3-H005E # E-EAST	STATE ROUTE		ST - STREET	WITHIN INTE	RCHANGE AREA NUM	MBER OF APPROACHES			
DISTANCE DISTANCE CR-	NUMBERED COUNTY ROUTE		TE - TERRACE TL - TRAIL		ROADWAY				
	NUMBERED TOWNSHIP ROUTE	DR - DRIVE PI - PIKE	WA - WAY	ROADWAY DIV	/IDED				
3-YARDS		HE - HEIGHTS PL - PLACE			T				
LOCATION OF FIRST HARMFUL EVEN' 1 - ON ROADWAY 9 - CROSSOVER		IANNER OF CRASH COLLISION/IMPA IOT COLLISION 4 - REAR-TO-REAR	ACT	DIRECTION OF TRAVE		N TYPE			
0.1 2-ON SHOULDER 10-DRIVEWAY/	ALLEY ACCESS 6	BETWEEN 5 - BACKING		N - NORTH S - SOUTH	(< 4 FEE	TT Commence of the commence of			
3-IN MEDIAN 11-RAILWAY G 4-ON ROADSIDE 12-SHARED US	RADE CROSSING	VEHICLES IN 6-ANGLE TRANSPORT 7-SIDESWIPE, SAN	ME DIRECTION	E - EAST	2 - DIVIDED (≥4 FEET	FLUSH MEDIAN ()			
5- ON GORE TRAILS	540,75	EAR-END 8 - SIDESWIPE, OPP		W-WEST		DEPRESSED MEDIAN RAISED MEDIAN			
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE 7 - ON RAMP 14-TOLL BOOTI		IEAD-ON 9 - OTHER / UNKNO	WN		(ANY TYP	E)			
8-OFF RAMP 99-OTHER / UN	KNOWN	T.			9 - OTHER/UI	NKNOWN			
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	LOCATION OF CRASH IN W 1 - BEFORE THE 1ST		CONTOUR	CONDITIONS	SURFACE			
T	LANE SHIFT/CROSSOVER	WARNING SIGN		1	_1_				
	NORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNI 3 - TRANSITION ARE		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,			
The production and control of the co	INTERMITTENT OR MOVING WO		NF.4	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT			
ACTIVE SCHOOL ZONE	OTHER	5 - TERMINATION AR	KEA	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK			
LIGHT CONDITION 1 - DAYLIGHT	1 - CLEAR	THER 6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE			
3 2-DAWN/DUSK	0.1.2-CLOUDY	7 - SEVERE CROSSWINDS			6 - WATER (STANDING,	5 - DIRT			
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMO 4 - RAIN	OKE 8 - BLOWING SAND, SOIL, DIR' 9 - FREEZING RAIN OR FREEZ	150 m. 100 m		MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN			
5 - DARK – UNKNOWN ROADWAY LIGHTING	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN				
9 - OTHER / UNKNOWN									
NARRATIVE						Indicate the north direction with an "N" on the			
UNIT 1 WAS TRAVELING SOU	THBOUND ON N	N .				compass diagram.			
MANTUA ST. IN THE LEFT I	LANE. UNIT 2					n: 50 HH.			
WAS TRAVELING NORTHBO	OUND ON N MAN	TUA		4	y p nen o				
ST. IN THE LEFT LANE. UNI	T 2 BEGAN TO			Not To Scale					
MAKE A LEFT TURN INTO	THE PARKING LO	OT		Not 10 Scale	<u> </u>	NMANTUAST.			
OF 830 N MANTUA ST BUT F	AILED TO VIELI	D		<u> </u>	Unit 1				
TO UNIT 1 CAUSING THE AC			830						
TO CHITT CAUSING THE AV	CIDENI.			-					
					1111				
					1 1 10 1	E			
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	E	SCENE CLEARED		REPORT TAKEN BY			
$\lfloor 1, 1, 1, 8, 2, 0, 2, 3, /, 2, 0, 2, 7, \lfloor 1, 1, 1, 1 \rfloor$	8,2,0,2,3,/,2,0,2,	8 1,1,1,8,2,0,2,3,/,2	2,0,3,2,1	1,1,8,2,0,2,	$3_1/[2_10_15_19]$				
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT			HECKED BY OFFI			MOTORIST			
MINUT	Knapp, Dere	K Raymond G	Gaydosh,	Kyan BY OFFICER'S BADGE	NUMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)			
0 0 0 0 1 0 0 4			2 1	3					

LOCAL REPORT NUMBER 2 . 0 . 2 . 3 . - . 0 . 0 . 0 . 1 . 8 . 5 . 6 . 6 . OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) OWNER PHONE: INCLUDE ALEA CODE (SAME AS DRIVE DAMAGE Redacted per ORC 149.43(A)(1) BRAVO, SERGIO, NICOLAS DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 2 9148 BEECHMONT CT, Twinsburg, OH 44087 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 **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE LP STATE LICENSE PLATE # 2 0 1 6 Hyundai 5 NPD H4 A E 3 GH7 7 8 7 5 4 O H JJV9740 INSURANCE COMPANY PROCESSES INSURANCE POLICY # COLOR VEHICLE MODEL PROGRESSIVE BLUELANTRA 955656476 TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK DEVICE EQUIPPED MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS. HIT/SKIP UNIT 2 - 10,001 - 26K LBS. $0_{\perp}1$ 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 - WHEFI CHAIR (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 - LINKNOWN OR HIT/SKIP (ATV/UTV) $00_{
m ullet}$ # 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 10-FLAT BED 14-GARBAGE/REFUSE 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 ACCIDENT DEFECTIVE **DEFECTS 3-TAIL LAMPS** 6 - TIRE BLOWOUT -NO DAMAGE [0] - UNDERCARRIAGE [14] 1 - INTERSECTION - MARKED 9 - MEDIAN/CROSSING ISLAND 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 14 - ENTERING OR CROSSING 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 0 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 JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 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 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL 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 4 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION

 0_1 CONTRIBUTING 5 - UNSAFE SPEED SEQUENCE OF EVENTS 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 23 - STRUCK BY FALLING, UNIT / NON-MOTORIST DIRECTION TRAVEL 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGOOR 1 - NORTH 5 - NORTHEAST 19-ANIMAL - OTHER J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13 - OTHER NON-COLLISION 2 - SOUTH 6 - NORTHWEST 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT BY A MOTOR VEHICLE 10 - CROSS MEDIAN 14-PEDESTRIAN FROM 1 TO 2 TRANSPORT 3 - EAST 7 - SOUTHEAST LOSS OR SHIFT 24 - OTHER MOVABLE OBJECT 15 - PEDAL CYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43-CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT / CRASH CUSHION 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51-WALL 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED STRUCTURE 34 - MEDIAN GUARDRAIL SUPPORT 52 - BUILDING 0,3,5 46-FENCE 27 - BRIDGE PIER ORABUTMENT BARRIER 40 - UTILITY POLE 53-TUNNEL 2 - CALCULATED / EDR 47 - MAILBOX 28-BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OR JECT 48-TREE 3 - UNDETERMINED POSTED SPEED _ 29-BRIDGE RAIL OR SUPPORT 99 - OTHER / UNKNOWN 49-FIRE HYDRANT 36 - MEDIAN OTHER BARRIER 30-GUARDRAIL FACE 42 - CULVERT 3 5 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT HSY8304 OH1U 1/19 [760-0820] PAGE 2 OF

LOCAL REPORT NUMBER

2,0,2,3,-,0,0,0,1,8,5,6,6,

UNIT #	OWNER NAME: LAST, FIRS	T, MIDDLE (SAME AS DRIVER)		Redacted per	ORC 149.43(A)(1)	DAMAGE					
	SMITH, RYA					DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE					
365 C.	ASE RD ,BEL	OIT ,OH 446	09	-43		2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
COMMERC	IAL CARRIER: NAME, ADDR	ESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN DAMAGED AREA(S)					
LP STATE	LICENSE PLATE #	VEHICLE	E IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		E ALL THAT APPLY				
	GLA3074		ABXKPJ.8.2.8			12 1	12				
INSURAL VERIFI	INSURANCE COMP. STATEFAR		NSURANCE POLICY #	GRY	RENEGAD	F10 12 2	10 12				
	TYPE OF USE		US DOT #	TOWED BY: COMPAN		11 10 2	10, 2				
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE		HAZARDO	US MATERIAL	9 9 3 3	9 9 3				
INTERI	OCK CHITCHES IN	#UCCUPANTS	HICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS.		CLASS # PLACARD ID #	8 7 5 74	7 5 74				
LEGUIP	PED HIT/SKIP UNIT	0 2 _	2 - 10,001 - 26K LBS. 3 - >26K LBS.	PLACARD	للللا الله	7 6 5	12 7 6 5				
		7 - MOTORCYCLE 2-WHEELED		18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 11	12				
0_1	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE		19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10	11 1 2 2				
UNITTYPE	4 - PICKUP	10 - MOPED OR MOTORIZED		21 - HEAVY EQUIPMENT	26-BICYCLE	9	9 3 3				
	5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	7	8 4 7				
. 00	# of TRAILING UNITS	(ATV/UTV)	1 MOTORFOME		27 - URRIGHTH OR HITTSKIP	12 7	6 5 12				
	WAS VEHICLE OPERATING IN AU	TONOMOUS	D - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	d " IINKNUMN	11 12 1	6 11 12 1				
,	MODE WHEN CRASH OCCURRED			4 - HIGH AUTOMATION	, - UNKNOWN	10 11 1 2	10 11 1 2				
	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3 3	9 10 2 3				
	1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16-FARM	21 - MAIL CARRIER	8 4	8 4 —				
[0,1]		7 - BUS - INTERCITY		17 - MOWING	99-0THER/UNKNOWN	8 7 6 5 4	8 7 6 5 4				
SPECIAL	3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 4 - SCHOOL TRANSPORT 9 - BUS - OTHER			18-SNOW REMOVAL 19-TOWING		7 6	7 6 5				
TONCTION	5 - BUS - TRANSIT/COMMUTER						12 12 12				
0.1		3 - VEHICLE TOWING ANOTHER	0111.0010	8 - POLE	12 - CONCRETE MIXER	12	1 1 🕋				
CARGO	/ NOT APPLICABLE 2 - BUS	MOTORVEHICLE 4 - LOGGING	/ 010001411/FNO 0050 00V	9 - CARGO TANK 10 - Flat Bed	13-AUTOTRANSPORTER 14-GARBAGE/REFUSE	a Ma					
BODY TYPE			7 CONTRICUIDATION DAVIE	11-DUMP	99 - OTHER / UNKNOWN	9 0 3 9	y [©] 3 9 <mark>1</mark> 3 9 3 3				
7 7 7	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6	0				
		5 - STEERING	B - TRAILER EQUIPMENT DEFECTIVE	10-DISABLED FROM PRIOR ACCIDENT		NC 1	6 6 6				
DEFECTS		6 - TIRE BLOWOUT	US\$1002500000			- NO DAMAGE [0	J - UNDERCARRIAGE [14]				
T E T	ADACOUNT V	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED		9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS	12 -FIRST RESPONDER AT INCIDENT SCENE	□- TOP [13]	- ALL AREAS [15]				
NON-MOTORIST LOCATION	2 - INTERSECTION - UNMARKED	CROSSWALK	B - SIDEWALK	11-SHARED USE PATHS OR	99-OTHER/UNKNOWN	<u></u>					
AT IMPACT		5 - TRAVEL LANE - OTHER LOCATION		TRAILS		∐ - UNIT I	NOT AT SCENE [16]				
		1 - STRAIGHT AHEAD 2 - BACKING		13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING	18-APPROACHING OR LEAVING VEHICLE		POINT OF CONTACT				
4	3-STRIKING U 6	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANDING	0 - NO DAMAGE	14 - UNDERCARRIAGE UNIT 15 - VEHICLE NOT AT SCENE				
ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	10 - PARKED	15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE	0 1 1-12 - REFER TO					
		6 - MAKING LEFT TURN		16 - WORKING	DISABLED VEHICLE	13-T0P					
	9-OTHER/UNKNOWN		12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN	1	TRAFFIC				
		7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACD.	DADVED DOCITION	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE	21 -LYING IN ROADWAY 22 -NOT DISCERNIBLE	TRAFFICWAY FLOW	TRAFFIC CONTROL				
0.2		9-IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	EQUIPMENT	23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 6 2 - SIGNAL 5 - YIELD SIGN				
	4 - RAN STOP SIGN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLING/ SPILLING	ROADWAY 99-OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL				
CIRCUMSTANCES		12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING		# of THROUGH LANES	RAIL GRADE CROSSING				
SEQUENCE	OF EVENTS					ON ROAD	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING				
1 2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE		16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING				
1 - 0		7 - SEPARATION OF UNITS	TRAVEL	17-ANIMAL — FARM 18-ANIMAL — DEER	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NON-	MOTORIST DIRECTION				
2		8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	19-ANIMAL — OTHER	SHIFTING CARGOOR ANYTHING SET IN MOTION	amount is section of the Color	1 - NORTH 5 - NORTHEAST				
	5 - CARGO / EQUIPMENT	10 - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE	FROM 2 TO 4	2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST				
3	LOSS OR SHIFT		15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE	24-OTHER MOVABLE OBJECT	FRUM 1U	4 - WEST 8 - SOUTHWEST				
		COLLISIO 31-GUARDRAIL END	DRAIL END 37 - TRAFFIC SIGN POST 43		50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN				
4	OF DELECT OFFICEAD	CUSHION 32 - PORTABLE BARRIER 38 - OVERHEAD		44 - DITCH	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED				
5	STRUCTURE	33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES 34 - MEDIAN GUARDRAIL SUPPORT		45 - EMBANKMENT 46 - FENCE	52-BUILDING	0,1,0,	1 - STATED / ESTIMATED SPEED				
	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCRETE	AT ATHER BOOT BOLE	47 - MAILBOX 48 - TREE	53 - TUNNEL 54 - OTHER FIXED OBJECT		2 - CALCULATED / EDR				
6	29-BRIDGE RAIL 30-GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT	48 - FREE HYDRANT	99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED				
1.	FIRST HARMFUL EVEN	1	IARMFUL EVENT			3 5					
	I INST HAKWIFUL EVEN	MUSI H	MANUFUL EVENT				1				

OFFICIAL SAFETY MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER									
SAFETY - MEN	nce - Paorection	010K151 / 140) IA – IA I	1010	K12	ı			2 0	2 3 -	1010	0.1.	8 5 6	_6	
UNIT#	and the state of t							DATE OF BIRTH AGE GENDER							
									0 4	12141	1 9	9 9	24	M	
	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
0	8 BEECHMONT CT ,Twinsburg ,OH 44087								Redacted per ORC 149.43(A)(1) T						
Z	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDI	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	USED	DOT-C	OMPLIANT		AIR BAG USA	GE EJECTION	TRAPPED	
2 5	BY	LACENCE MUNADED		OFFEN	- CIIA	2050	10041	0,4	MC HE	LIME!) _ 1 _	L		L	
OLSTATE		LICENSE NUMBER TED PER ORC 450	1:1-12	OFFENS	SE CHAI	KGED	CODE	OFFENSE DESC	RIPTION			CHAILON	CITATION NUMBER		
O, H,	ENDORSEMEN	RESTRICTION SELECT	UPTO3 DRIN	VEB.	AL C	OHOL / DRUG SUSPE	CTED	CONDITION	ALO	COHOL TES	T	DF	RUG TEST(S)	
OL OLAGO	SELECT UP TO 2	NEO-MAI TECHNOLOGY		TRACTED	_	LCOHOL MAF		CONDITION	STATUS T	YPE W	ALUE S	STATUS TY	PE RESUL	SELECTUPTO4	
4				1		THER DRUG		1	_1	1	الب	1	1_	لــالــالــ	
UNIT #	NAME: LAST	FIRST, MIDDLE								DATE OF	BIRTH		AGE	GENDER	
0,2		S, SARAH, L							L1_0	10 17	1_9	8 0	43	_ F	
=	: STREET, CITY, S									PHONE - INC			40 42/	Λ\/ 4 \	
0		ST 104 ,Kent ,Ol	H 4424						Reda				49.43(
Ż	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDI	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	USED	DOT-C	OMPLIANT	2 2	ON AIR BAG USAGE EJECTION TRAPPED			
2 5	BY							0_4_	Ш мс не	LMEI	0 1	<u> </u>		L	
OLSTATE		LICENSE NUMBER TED PER ORC 450	1:1-12	331.1		RGED	CODE	OFFENSE DESC				CITATION NUMBER			
O H	ENDORSEMEN	RESTRICTION SELECT	UPTO3 DRIN			OHOL / DRUG SUSPE	X	Right of Way		COHOL TES	T	27151 DRUG TEST(S)			
OL OLASS	SELECT UP TO 2	RESIRIOTION SELECT		TRACTED	_	_	RIJUANA	CONDITION	STATUS T					SELECTUPTO4	
4				1		THER DRUG		1	_1	1.	ا لللا	1	1	الا	
UNIT#	NAME: LAST	FIRST, MIDDLE								DATE OF	BIRTH		AGE	GENDER	
										ш				نــــا	
ADDRESS	: STREET, CITY, S	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
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INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDI	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	USED COLUMN	□ DOT-C	OMPLIANT	ING POSITION	AIR BAG USA	IGE EJECTION	TRAPPED	
OLSTATE		LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL OFFENSE DESCRIPTION				1	CITATION	U UMBER	نـــــا	
ORIS	or Environ			011211	0		CODE								
OL CLASS	ENDORSEMEN	RESTRICTION SELECT			ALC	OHOL / DRUG SUSPE	CTED	CONDITION		COHOL TES			RUG TEST(S		
	SELECT UP TO 2		BY	TRACTED	□ A	LCOHOL MAF	RIJUANA		STATUS	YPE V	ALUE S	STATUS TY	PE RESUL	SELECTOP 104	
					0	THER DRUG	4/			•					
1 - FATAL	JRIES	1-FRONT-LEFT SIDE	1- NOT DEP	IR BAG LOYED	1 (1)	OL CLASS 1-CLASS A	,	OL RESTRIC 1-ALCOHOL INTER		1 - NOT DIST	DISTRACT RACTED	10000	TEST STA	105	
	SERIOUS INJURY	(M0TORCYCLE DRIVER) 2 - FRONT - MIDDLE	2- DEPLOYE			2 - CLASS B		2 - CDL INTRASTAT			LY OPERATING	CATION	TEST REFUSED		
3 - SUSPECTED 4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE	3 - DEPLOYE 4 - DEPLOYE	ED SIDE ED BOTH FRO	NT / SIDE	3 - CLASS C 4 - REGULAR CLASS		3 - CORRECTIVE LE 4 - FARM WAIVER	NSES		TEXTING, TYPI	INC 3-1	FEST GIVEN, CON SAMPLE / UNU SA		
5 - NO APPAREN		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5-NOTAPP			(OHI0 = D)		5 - EXCEPT CLASS	BUS	3 - TALKING	ON HANDS-FRE	tt .	TEST GIVEN, RES		
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9- DEPLOYI	MENT UNKNO	WN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS			ON HAND-HEL		TEST GIVEN, RES UNKNOWN	0L12	
1 - NOT TRANSF	Part Control of the Control	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	Fi	ECTION		OL ENDORSEM	MENT	7 - EXCEPT TRACTO		COMMUN	ICATION DEVICE	E AI	LCOHOL TE	ST TYPE	
2 - EMS	, occur	(M0TORCYCLE SIDE CAR)	1-NOTEJE		TEN	H - HAZMAT		8 - INTERMEDIATE RESTRICTIONS	LICENSE	ELECTRO	NIC DEVICE	1-1	NONE BLOOD		
3 - POLICE 9 - OTHER/UNK	CNOHAN	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	2 - PARTIAL 3 - TOTALLY			M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENG 7 - OTHER D			URINE		
		10 - SLEEPER SECTION OF TRUCK CAB	4- NOTAPP			N-TANKER		10 - LIMITED TO DAY		INSIDE T	HEVEHICLE		BREATH		
1 - NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	TI	RAPPED		Q - MOTOR SCOOTER	TODOVOL F	11 - LIMITED TO EMI		THE VEH	ISTRACTION OF		OTHER		
	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1-NOTTRA		U all	R - THREE-WHEEL MO S - SCHOOL BUS	TURGTGLE	13 - MECHANICAL DI (SPECIAL BRAK	VICES	9-OTHER/U	UNKNOWN		DRUG TEST None	TYPE	
3 - LAP BELT OF 4 - SHOULDER A	NLY USED & LAP BELT USED	PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	TED BY ICAL MEANS		T - DOUBLE & TRIPLE	TRAILERS	CONTROLS, OR O	THER		NDITION		BL00D		
5 - CHILD RESTRAINT SYSTEM - CARGO AREA 3 - FREE			3- FREED B	Y Chanical Mi	ANS	X - TANKER / HAZMAT		14 - MILITARY VEHIC	I PATPALLITE HOMBINE				3 - URINE 4 - OTHER		
FORWARD FACING 13 - TRAILING UNIT NUM-ME 6 - CHILD RESTRAINT SYSTEM - 14 - RIDING ON VEHICLE EXTERIOR				The man		GENDER F-FEMALE		15 - MO TOR VEHICLE AIR BRAKES	S WITHOUT 3 - EMOTIONAL (E.G., DEPRESSED,			SSED,			
REAR FACIN 7 - BOOSTER SE	G	(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO	ANGRY, DISTURBED) 4 - ILLNESS			100 Sept. 200	DRUG TEST RESULT(S) 1 - AMPHETAMINES		
8 - HELMET US		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER)	5 - FELL ASL FATIGUED	EEP, FAINTED,), ETC.		BARBITURATES	re	
9 - PROTECTIVE (ELBOW, KN)								10-UINER		6 - UNDERTH	HE INFLUENCE	1	BENZODIAZEPIN Cannabinoids	E2	
10 - REFLECTIVE										/ALCOHOL		5-(COCAINE		
11 - LIGHTING - / BICYCLE 0										9-OTHER/U	INKNOWN		OPIATES / OPIOII OTHER	OS	
	99 - OTHER / UNKNOWN												NEGATIVE RESU	211	

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Ū	OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER							
_	HAVE A NAME TO STORY HOUSE						2,0,2,3,-,0,0,1,8,5,6,6,							
	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
ь	02 HILL, GEOFFREY, H							0,7,1,7,1,9,7,8,4,5, M						
OCCUPANT	3681 WYNDHAM RIDGE DR 306, Stow, OH 44224							Redacted per ORC 149.43(A)(1)						
8	INJURIES	INJURED	EMS AGENCY (NAME)	2 N. 2 C.	INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	_ 5 _	TAKEN BY					0_14_1	MC HELMET	0 3	1	1	1		
ľ	UNIT # NAME: LAST, FIRST, MIDDLE							DAT	E OF BIRTH		AGE	GENDER		
							ــــــــــــــــــــــــــــــــــــــ		الب		نسا			
0CCUPAN	ADDRESS	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
00	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
Ħ		TAKEN BY			The Article Code of the Company of the Code of the Cod	KARANTEN 1987 (L.16) (F. 1987)	USED	DOT-COMPLIANT MC HELMET			لــــا			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
								سسب	1 1 1	الب	1 6 3			
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0CCUPANT							,							
٥	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
9	ш	ВҮ						MC HELMET	لسلسا	<u> </u>	ســـا			
f	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
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000	THURTES	THURED	FAC A		Lucius co vivis and a second		CAFETY FOUNDMENT		CEATING DOCUTION	LAIR DAG UCAG	LEIEATION	TRADDED		
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIK BAG USAGE	EJECTION	IKAPPED		
			JRIES	SAFET	Y EQUIPMENT USED		SEATING POS			AIR BAG U	SAGE			
	1 - FATA	St. Carlotte		1 - NONE US			IT - LEFT SIDE		1 - NOT DE		ond L			
	2-SUS	PECTEDSE	RIOUS INJURY	VEHICLE	OCCUPANT (MOTORCYCLE DRIV									
					DER BELT ONLY USED 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SID				3 - DEPLO	DEPLOYED SIDE				
	4 - POSS	SIBLE INJU	JRY		LT ONLY USED 4 - SECOND - LEFT (MOTORCYCLE P RESTRAINT SYSTEM - 5 - SECOND - MIDDI				4 - DEPLO					
	5 - NO A	PPARENT	INJURY					ENGER)	FRONT/SIDE 5 - NOT APPLICABLE					
	UNI.	INJURED	TAKEN BY	100 AND 100 AN	D FACING	DE 9 - DEPLOYMENT UNKNOWN								
		TRANSPOR			ESTRAINT SYSTEM -	D - LEFT SIDE ORCYCLE SIDE	CAD							
	2- EMS	EATED AT S	CENE	REAR FA		8 - THIR	1 - NOT EJECTED							
	3- POLI			8 - HELMET		9 - THIR	E 2 - PARTIALLY F							
		ER / UNKNO	OWN		TIVE PADS USED		PER SECTION (ENGER IN OTH		Y EJECTED					
		GEN	NDER		KNEES, ETC.)	CARG	O AREA (NON-TE	RAILING UNIT,	PLICABLE					
	F-FEMA				TIVE CLOTHING		ENGER IN UNE		TRAPPED			MARKET STATE		
	M - MAL				GHTING - PEDESTRIAN CARGO AREA GICYCLE ONLY THER / UNKNOWN 14 - RIDING ON VEHICLE				1 - NOT TRAPPED					
B	U - OTHE	R / UNKNO	WN	99- OTHER /				EXTERIOR	2 - EXTRICATED BY MECHANICAL					
							TRAILING UNIT)		MEANS	BY NON-ME	CHANIC	ΛI		
							MOTORIST CR / UNKNOWN		MEANS		CHANIC	AL		
S	NAME: LAS	ST, FIRST, MIDD	DLE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS	4000000							0011111		السا				
×	AUDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		2911 10		
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