OF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTES MA	ANDATORY FIELD FOR SUPPLEM	MENT REPORT	ŗ	OCAL REPORT NUMBE	ER*			
PHOTOS TAKEN OH-2 OH-3		$2 \cdot 0 \cdot 2 \cdot 5$	O _ O _ O _ O _	$0_{+}6_{+}3_{+}8_{+}$					
X OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR					
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Police	6,7,0,3	1-SOLVED 0,2 98-ANIMAL 0,2 99-UNKNOWN						
COUNTY* LOCALITY* LOCATION: CITY		CRASH DATE / TIME*  CRASH SEVERITY							
6,7 1 2-VILLAGE Kent	0.1.1.6.2.0.2.5./.0.8.0.3. 5 2 - SERIOUS INJURY								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 2 - SEAST 2 - SEAST 4 - MEET	LATITUDE DECIMAL DEGREES SUSPECTED								
S R 43 2 3-EAST	WATER		$S \perp T$	411 3 MINOR INJUR					
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH	REFERENCE ROAD NAME (ROAD,	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE D	ECIMAL DEGREES	4 - INJURY POSSIBLE			
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	SUMMIT		$S \setminus T$	-8 <sub>1</sub> 1 <sub>0</sub> 3 <sub>5</sub> 8	2 2 5	5 - PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE			INTERSECTION RELAT	ED			
1 - INTERSECTION 1 - NORTH IR -	ALC:	- ALLEY HW- HIGHWAY - AVENUE LA - LANE	RD - ROAD SQ - SQUARE	X WITHIN INTE	RSECTION OR ON APPR	OACH			
3-HOUSE # 3-EAST	TEDERAL OU ROUTE		ST - STREET	MITHIN INTE	RCHANGE AREA NI	JMBER OF APPROACHES			
DISTANCE DISTANCE CR-	NUMBERED COUNTY ROUTE CR	- CIRCLE OV - OVAL	TE - TERRACE		ROADWAY				
	NUMBERED TOWNSHIP DR	- COURT PK - PARKWAY - DRIVE PI - PIKE	TL - TRAIL WA - WAY						
5 0 2 2-FEET 2 3-YARDS	ROUTE	- HEIGHTS PL - PLACE		ROADWAY DIV	IDED				
LOCATION OF FIRST HARMFUL EVEN		NER OF CRASH COLLISION/IMP	ACT	DIRECTION OF TRAVE	L MED	IAN TYPE			
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY	ALLEY ACCESS BET	COLLISION 4 - REAR-TO-REAR WEEN 5 - BACKING	8	1 - NORTH	1 - DIVIDED	FLUSH MEDIAN			
U 3-IN MEDIAN 11-RAILWAY G	RADE CROSSING Z TWO VEH	MOTOR ICLES IN 6-ANGLE		2 - SOUTH 3 - EAST	2 - DIVIDED	FLUSH MEDIAN			
4 - ON ROADSIDE 12-SHARED US 5 - ON GORE TRAILS	E PATHS OR TRAI	NSPORT 7 - SIDESWIPE, SAI R-END 8 - SIDESWIPE, OPF		4 - WEST	(≥4 FEI 3 - DIVIDEI	D, DEPRESSED MEDIAN			
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	3 - HEAI	10 10 10 10 10 10 10 10 10 10 10 10 10 1				IVIDED, RAISED MEDIAN ANY TYPE)			
7 - ON RAMP 14-TOLL BOOT: 8 - OFF RAMP 99-OTHER / UN					9 - OTHER/				
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN W	ORK ZONE	CONTOUR	CONDITIONS	SURFACE			
1-	LANE CLOSURE	1 - BEFORE THE 1ST		1	3	2			
	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING SIGN 2 - ADVANCE WARNI	NG AREA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE			
LAW ENFORCEMENT PRESENT	OR MEDIAN	3-TRANSITION ARE	A	2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP,			
The production of the product of the	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AREA 5 - TERMINATION AI	REA	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT			
LIGHT CONDITION	WEATHE		ing - Petrol State Malife Self-install - and recommendation of the contract of			3 - BRICK/BLOCK			
1 - DAYLIGHT	1-CLEAR	6 - SNOW		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL 4 - SLAG, GRAVE STONE					
1 2 - DAWN/DUSK	0 6 2-CLOUDY	0_6 2-CLOUDY 7-SEVERE CROSSWINDS 3-FOG, SMOG, SMOKE 8-BLOWING SAND, SOIL, DII			6 - WATER (STANDING, MOVING)				
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	4 - RAIN	9 - FREEZING RAIN OR FREEZ	THE PROPERTY OF THE PROPERTY.		7 - SLUSH	9 - OTHER/UNKNOWN			
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN				
						<u> </u>			
NARRATIVE					4	Indicate the north direction with			
UNIT 1 WAS STOPPED IN TRA	AFFIC IN THE				4	an "N" on the compass diagram.			
SOUTHBOUND INSIDE LAN	E OF S WATER ST.								
UNIT 2 ATTEMPTED TO SLO	OW DOWN BUT SL	m		TILL	î Î				
				İ	i				
IN THE SNOW AND STRUCK	CUNIT 1 FROM				NOT TO	BOALE 1			
BEHIND.				S.?WATER?ST.		14			
				S.S.	зиммі	T?ST.			
			Ŷ		26				
		<u> </u>	THAFFIC? SIGNAL						
					! [				
					1				
			i						
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIM	E T	SCENE CLEARED	DATE/TIME	REPORT TAKEN BY			
	6,2,0,2,5,/,0,8,0,5,					POLICE AGENCY			
TOTAL TIME OTHER TOTAL	1		HECKED BY OFFI		5 <sub>1</sub> 7 <sub>1</sub> <b>0</b> 1 <b>0</b> 1 <b>3</b> 1 <b>3</b> 1	MOTORIST			
ROADWAY CLOSED INVESTIGATION TIME MINUT			Vheeler,		Ī	SUPPLEMENT			
	OFFICER'S BAI	DGE NUMBER*	-	Y OFFICER'S BADGE N	NUMBER*	<ul> <li>(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)</li> </ul>			
0 0 0 0 1 0 3	8 2 2 0	a vo as malay	2 1	3					

LOCAL REPORT NUMBER

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

UNIT#	ANNER HAME			OWNED DUONE		DAMAGE				
	OWNER NAME: LAST, FIRST	SIF FI I7A	RETH	REDACTED PI	LUDE AIEA CODE (TXI SAME AS DRIVER) ER ORC 149.43(A)(1)	)				
	DRESS: STREET, CITY, STATE		DETH	L		1-NONE	3 - FUNCTIONAL DAMAGE			
	ARNES DR,T		1 44278			3 2-MINOR DA				
	CIAL CARRIER: NAME, ADDR		1 442/0	C	DUANE	9 - UNKNOWN				
COMMERC	JAL CARRIER: NAME, ADDI	(ESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE					
<u> </u>							AMAGED AREA(S) ATE ALL THAT APPLY			
LP STATE	LICENSE PLATE #		E IDENTIFICATION#	VEHICLE YE	0	I Word	ALE ALE IIIAI AFFEI			
$O_H$	JZS5941		$\mathbf{H}_{7,7}\mathbf{J}_{1}\mathbf{B}_{0,7,3}$		IIOIIGG	12 1	11 12 1			
X INSURA	NCE INSURANCE COMP		NSURANCE POLICY #	COLOR	VEHICLE MODEL	12	12			
VERIFI		KIVI 3	433940-SFP-35	SIL	ODYSSEY	10 11 1 2	10 11 1 2			
<b>—</b>	TYPE OF USE	IN EMERGENCY	US DOT#	TOWED BY: COMPAN	IY NAME	10 2	10 2			
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE		HAZARDI	OUS MATERIAL	9 9 3	3 9 9 3			
INTER	LOCK	#UCCUPANTS	HICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS.	MATERIAL	CLASS # PLACARD ID #	7 5 7	7 5 7			
DEVICE EQUIP	HIT/SKIP UNI	T 0 2	2 - 10,001 - 26K LBS	RELEASED		6	8 6			
LUOIF		0_3_	3 - >26K LBS.	☐ PLACARD		7 6 5	12 7 6			
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED		18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	<	12			
0.2	2 - PASSENGER VAN (MINIVAN)			19-BUS (16+ PASSENGERS)	24-WHEELCHAIR (ANYTYPE)	10/	11 1 2			
UNITTYPE	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE 10 - MOPED OR NOTORIZED		20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25 - OTHER NON-MOTORIST 26 - BICYCLE	. –	9 3 3			
	5 - CARGO VAN	BICYCLE		22 - ANIMAL WITH RIDER OR	27 -TRAIN	\	8 11 4			
		11 - ALL TERRAIN VEHICLE	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 8 5 4			
. 0	6.	(ATV / UTV)					6			
	# of TRAILING UNITS					11 12	6 11 12			
1	WAS VEHICLE OPERATING IN AU			3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	10 12	10 12			
,	MODE WHEN CRASH OCCURRED	1 0 1		4 - HIGH AUTOMATION		10 11 1	10 11 1 2			
	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3	3 9 9 3			
<b>—</b>	1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	8 4	8 4 —			
0.1		7 - BUS - INTERCITY			99 - OTHER / UNKNOWN	8 7 5 4	8 7 5 4			
	3 - ELECTRONIC RIDE SHARING			18 - SNOW REMOVAL	77-0111217 0111101111	6	6			
SPECIAL	4 - SCHOOL TRANSPORT	9 - BUS - OTHER		19-TOWING		6	6			
	5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL						
00200 00000	1 - NO CARGO BODYTYPE	3 - VEHICLE TOWING ANOTHER	5 - INTERMODAL CONTAINER	8 - POLE	12 - CONCRETE MIXER	0.00	12 12 12			
$\lfloor 0 \rfloor 1 \rfloor$	/ NOTAPPLICABLE	MOTORVEHICLE	0111.0010	9 - CARGO TANK	13 - AUTOTRANSPORTER	12				
CARGO BODY	2 - BUS	4 - LOGGING	/ 010001411151101 0050 00V	10-FLAT BED	14-GARBAGE/REFUSE					
TYPE			7 004111/0/1/00/00/00/1/5	11-DUNP	99-OTHER / UNKNOWN	9 0 3 9	9 3 9 3			
87-580/02	1. TUDN CICNAL C	4 DDAVED	7 WARN OR STICK TIRES	O MOTOR TROUBLE	OO OTHER CHIMICANONIA		4 1			
لبليا	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING		9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR	99-OTHER / UNKNOWN	6	10			
	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			6 6 6			
	,		000000000000000000000000000000000000000	0.05400000		- NO DAMAGE (	0] - UNDERCARRIAGE [14]			
	000001111111	3 - INTERSECTION - OTHER		9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER AT INCIDENT SCENE		<b>-</b>			
NON-MOTORIST	CROSSWALK  2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK		10 - DRIVEWAY ACCESS	99 - OTHER / UNKNOWN	☐- <b>TOP</b> [13]	- ALL AREAS [ 15 ]			
LOCATION	ADACOUNT /	5 -TRAVEL LANE - OTHER LOCATION		11 - SHARED USE PATHS OR TRAILS	//-omet/ distionin	□-UNI	T NOT AT SCENE [16]			
AT IMPACT					(1.0)					
		1 - STRAIGHT AHEAD 2 - BACKING		13 - NEGOTIATING A CURVE	18-APPROACHING OR LEAVING VEHICLE	INITIA	L POINT OF CONTACT			
4				14 - ENTERING OR CROSSING SPECIFIED LOCATION	19-STANDING	0 - NO DAMAC	GE 14 - UNDERCARRIAGE			
ACTION	3-31KIKING	3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 4 - OVERTAKING PASSING 10 - PARKED		15 - WALKING, RUNNING,	20 - OTHER NON-MOTORIST		TO UNIT 15 - VEHICLE NOT AT SCENE			
00000000000	5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 -STANDING OUTSIDE	DIAGRA	99 - UNKNOWN			
	& STRUCK	6 - MAKING LEFT TURN	INTRAFFIC 16-WORKING		DISABLED VEHICLE	13-T0P				
	9-OTHER/UNKNOWN		12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC			
	1-NONE	7 - LEFT OF CENTER		17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
9000	2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / ACD		18 - OPERATING DEFECTIVE	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
0.1		9-IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY	EQUIPMENT	23 - OPENING DOOR INTO	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTING	4 - RAN STOP SIGN	10 - IMPROPER PASSING	15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY  99-OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
CIRCUMSTANCES		11 - DROVE OFF ROAD	16 - WRONG WAY	20 - IMPROPER CROSSING	99-UTREK IMPKUPEK ACTION	# of THROUGH LANES	RAIL GRADE CROSSING			
	6-IMPROPERTURN	12 - IMPROPER BACKING				ON ROAD	1 - NOT INVOLVED			
SEQUENCE	OF EVENTS		NAN AALL TATA			4	1 2 - INVOLVED-ACTIVE CROSSING			
2.0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE —	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
1 <b>2 0</b>		7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	17 - ANIMAL — FARM	EQUIPMENT					
l	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL - DEER	23 - STRUCK BY FALLING,	UNIT / NO	N-MOTORIST DIRECTION			
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 OTHER NON COLLICION	19-ANIMAL - OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST			
	5 - CARGO / EQUIPMENT	10 - CROSS MEDIAN	14 - PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE	FROM L 1 L TO L				
3	LOSS OR SHIFT		15 05041 0/015	21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE OBJECT	FRUM LA TO L	4 - WEST 8 - SOUTHWEST			
		COLLISIO	N WITH FIXED OBJECT				9 - OTHER / UNKNOWN			
4	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END		43 - CURB	50 - WORK ZONE MAINTENANCE	gostno estra proximano				
*	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER		44 - DITCH	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED			
	STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT / LUMINARIES SUPPORT	45 - EMBANKMENT 46 - FENCE	52 - BUILDING	0 0 0	1 - STATED / ESTIMATED SPEED			
5	27 - BRIDGE PIER ORABUTMENT	BARRIER	40 - UTILITY POLE	47 - MAILBOX	53 - TUNNEL	$\begin{bmatrix} 0_{\perp} 0_{\perp} 0_{\perp} \end{bmatrix}$	2 - CALCULATED / EDR			
	28 - BRIDGE PARAPET	35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	48 - TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
6	29-BRIDGE RAIL 30-GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99-OTHER/UNKNOWN	FUSIEU SPEED				
1		1				2 5				
1 1	FIRST HARMFUL EVEN	T I I MOST H	IARMEIII EVENT				I			

LOCAL REPORT NUMBER

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

UNIT#	OWNER NAME: LAST, FIRS			OWNER PHONE: INC.	UDE AIEA CODE ( SAMEAS DRIVER) ER ORC 149.43(A)(1)	DAMAGE				
The control of the co	MOSLEY, DO			INCOMOTED TO		DAMAGE SCALE  1 - NONE 3 - FUNCTIONAL DAMAGE				
837 M	ECHANIC AV	,Ravenna,	,ОН 44266			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			E ALL THAT APPLY			
$\mathbf{O}_{\perp}\mathbf{H}_{\parallel}$	KAH4057		$[S_14_18_1E_0_14_1]$			12 1	11 12 1			
INSURAI VERIFI	INSURANCE COMP. STATE FAI		NSURANCE POLICY #	CPR	ENDEAVO	210	10 12			
	TYPE OF USE		US DOT #	TOWED BY: COMPAN		10 1 2	10 2			
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE		HAZARDO	US MATERIAL	9 9 3	9 9 3 9			
INTERI	OCK HIT/SKIP UNIT	#UCCUPANTS	HICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS.		CLASS # PLACARD ID #	8 7 5 74	7 5 4			
FEGUIP	ED HITTSKIP ONI	0 1 _	2 - 10,001 - 26K LBS. 3 - >26K LBS.	PLACARD	للللا لللا	7 6 5	12 7 6 5			
		7 - MOTORCYCLE 2-WHEELED		18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 11	12			
$\begin{bmatrix} 0 & 3 \end{bmatrix}$	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			
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		8 4 7			
. 0	# of TRAILING UNITS	(ATV/UTV)	1 MOTORROWE		27 - UNKNOWN OR HEI/SKIP	12 7	6 5 12			
	WAS VEHICLE OPERATING IN AU	TONOMOUS	D - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	d - IINKNJ/mn	11 12 1	6 11 12 1			
,	MODE WHEN CRASH OCCURRED		1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	7 - UNIVIONI	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			21 - MAIL CARRIER	8 4	8 4 —			
[0,1]	- TAXI 7 - BUS - INTERCITY			17 - MOWING	99-OTHER / UNKNOWN	8 7 6 5 4	8 7 5 4			
SPECIAL	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	8 - BUS - SHUTTLE 9 - BUS - OTHER		18-SNOW REMOVAL 19-TOWING		7 6 5	7 6 5			
FUNCTION	5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT				12 12 12			
0.1		3 - VEHICLE TOWING ANOTHER		8 - POLE	12 - CONCRETE MIXER	12				
	/ NOT APPLICABLE 2 - BUS	MOTORVEHICLE 4 - LOGGING	/ 010001H1/FNO/ 0050 00V	9 - CARGO TANK	13 - AUTOTRANSPORTER	RA .				
BODY TYPE	2 - 503	4 - 20001110	7 00411101110010010011151	10-FLAT BED 11-DUNP	14-GARBAGE/REFUSE 99-OTHER / UNKNOWN	9 3 9 9	2 3 9 <b>1 1</b> 3 9 <b>3</b> 3			
2015 F0775.	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN		7			
	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT	10 - DISABLED FROM PRIOR			6 6 6			
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		☐-NO DAMAGE [ 0	]			
	ADACOUNT V	3 - INTERSECTION - OTHER		9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER AT INCIDENT SCENE		1			
NON-MOTORIST	2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK		10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	99 - OTHER / UNKNOWN	☐- <b>TOP</b> [13]	- ALL AREAS [ 15 ]			
AT IMPACT	ADADOUNAL IV	5 - TRAVEL LANE - OTHER LOCATION		TRAILS		- UNIT N	NOT AT SCENE [16]			
		1 - STRAIGHT AHEAD		13 - NEGOTIATING A CURVE	18-APPROACHING OR LEAVING VEHICLE	INITIAL	POINT OF CONTACT			
3	2-NON-COLLISION 3-STRIKING 1 1	2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19-STANDING	0 - NO DAMAGE	14 - UNDERCARRIAGE			
ACTION	4 - STRUCK PRE-CRASH	CK PRE-CRASH 4 - CVERTAKING/PASSING 10 - PARKED  STRIKING ACTIONS 5 - MAKING RIGHTTURN 11 - SUCCESSION OR STOPPED		15 - WALKING, RUNNING,	20-OTHER NON-MOTORIST	1-12 - REFER TO	UNIT 15 - VEHICLE NOT AT SCENE			
	0 OTRUGE			JOGGING, PLAYING 16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13-T0P	99 - UNKNOWN			
	9-OTHER/UNKNOWN	6 - MAKING LEFT TURN	III I I I I I I I I I I I I I I I I I	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN	Т	RAFFIC			
		7 - LEFT OF CENTER		17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
0.0		8 - FOLLOWING TOO CLOSE / ACD 9 - IMPROPER LANE CHANGE	A PARKED POSITION  14-STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 -NOT DISCERNIBLE 23 -OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
UO	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY	19 - LOAD SHIFTING/FALLING/	ROADWAY	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
CONTRIBUTING CIRCUMSTANCES		11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING 20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	# e= TUDQUEU LANES	30 Per pitterland Schreiber Scheider ausgeber untstehn ein Schreiber (1904)			
	6-IMPROPERTURN  OF EVENTS	12 - IMPROPER BACKING	3			# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED			
SEQUENCE	UF EVENTS		NON-COLLISION			4	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
$_{1}$ $_{2}$ $_{1}$ $_{0}$		6 - EQUIPMENT FAILURE	ARRAGINE BIREARIAN AR	16-RAILWAY VEHICLE 17-ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - INVULVED-PASSIVE CRUSSING			
		7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL — DEER	23 - STRUCK BY FALLING,	UNIT / NON-I	MOTORIST DIRECTION			
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 OTHER NON COLLICION	19 - ANIMAL — OTHER 20 - MOTOR VEHICLE IN	SHIFTING CARGOOR ANYTHING SET IN MOTION	500000	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST			
22 2 2	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM L1 TO L2	2 3 - EAST 7 - SOUTHEAST			
3		COLLISIO	15-PEDALCYCLE N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE - STRUCK		5000	4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
4	LADIANI ANALITAN	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT	1,1100 020 020				
	26 - BRIDGE OVERHEAD	^ ^ ' 이 (1978) (1975) (1975) (1975) (1975) (1975) (1975) (1975) (1975) (1975) (1975) (1975) (1975) (1975)		44 - DITCH 45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED			
5	CTDIICTHDE	34 - MEDIAN GUARDRAIL BARRIER	SUPPORT	46-FENCE	52 - BUILDING 53 - TUNNEL	$\begin{bmatrix} 0 & 1 & 0 \end{bmatrix}$	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR			
	28-BRIDGE PARAPET	35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	47 - MAILBOX 48 - TREE	53 - TUNNEL 54 - OTHER FIXED OBJECT	DOSTED SDEED	3 - UNDETERMINED			
6	29-BRIDGE RAIL 30-GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT	49 - FIRE HYDRANT	99 - OTHER / UNKNOWN	POSTED SPEED	S - MARIEMANEA			
_1_	FIRST HARMFUL EVEN	1	IARMFUL EVENT			2 5				

OFF PUBLIC BAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
SAFETY - MENY	ICE - PROTECTION	1010K121 / 140	) IA - IA	1010	K12	1			2 0	2 5 - 0 0	0.0	0.6	3 8	
UNIT#	NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER					
0,1	VOTA	W, KELSIE, ELIZ	LABET	TH					0 9 1 4 1 9 9 3 3 1 F					
	STREET, CITY, S		9/2022 W 10/2	20110000					CONTACT PHONE - INCLUDE AREA CODE					
0		DR ,Tallmadge ,C	)H 442						REDACTED PER ORC 149.43(A)(1					
INJURIES	TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	USED	□ DOT-C	SEATING POSITIO	N AIR BAG	USAGE EJECT	ION TRAPPED	
2 5	BY							0_4_		LMET 0 1	1	_1	_ _1_	
OL STATE	OPERATOR LICENSE NUMBER REDACTED PER ORC 4501:1-12				E CHA	RGED	CODE	OFFENSE DESC	RIPTION		CITATION NUMBER			
O, H,				<u> </u>					AL C	COHOL TEST		DRUG TES	(S)	
OL CLASS	SELECT UP TO 2		DRIV DIST	TRACTED	_	DHOL / DRUG SUSPI		CONDITION	STATUS T		STATUS		ULT SELECTUPTO4	
4				1 OTHER DRUG 1			1	1	1	1	عالــالــا			
UNIT #	NAME: LAST	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER	
0,2	MOSL	EY, DOUGLAS,	W						1 1	2 7 1 9	9 0	34	M	
ADDRESS:	STREET, CITY, S	STATE, ZIP								PHONE - INCLUDE AREA O				
837 M	<b>IECHA</b>	NIC AVE ,Ravenn	a ,OH	44260	6				REDA	ACTED PER	ORC	149.4	3(A)(1)	
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-C	SEATING POSITIO	ON AIR BAG USAGE EJECTION TRAPPED			
2 5	BY							0_4	<b>Ш</b> мс не	LMET 0 1	1	1	11	
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OL CLASS	SELECT UP TO 2		DIS	VER TRACTED	_	CHOL / DRUG SUSPI	E <b>CTED</b> RIJUANA	CONDITION	STATUS T	YPE VALUE		TYPE RES	T(S) OLT SELECTUPTO4	
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170000000														
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10E										1 1 1	1 1	3		
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C	SEATING POSITIO	N AIR BAG	USAGE EJECT	ION TRAPPED	
ON L	BY					USED			L MC HE				ا	
OL STATE	OPERATOR	LICENSE NUMBER		OFFENSE CHARGED LOCAL OFFENSE DESC			RIPTION			TATION NUMBER				
			200	100									Street John	
OL CLASS	SELECT UP TO 2		DIS	VER Tracted		DHOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE		TYPE RES	T(S) OLT SELECTOP 104	
			BY		=	LCOHOL MAF THER DRUG	KIJOANA		ļ	_ •				
INJU	IRIES	SEATING POSITION	A	IR BAG		OL CLASS	5	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TEST S	TATUS	
1 - FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1-NOTDEP			1 - CLASS A		1 - ALCOHOL INTER		1 - NOT DISTRACTED		1 - NONE GIVEN		
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 OPERATIN ELECTRONIC COMMUN	IICATION .	2 - TEST REFUS 3 - TEST GIVEN.	CONTAMINATED	
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE		ED BOTH FRO	NT / SIDE	4 - REGULAR CLASS		4 - FARM WAIVER		DEVICE (TEXTING, TYP DIALING)		SAMPLE / UN		
5 - NO APPAREN	IT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5-NOTAPP	LICABLE MENT UNKNO	WM.	(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 - TALKING ON HANDS-FF COMMUNICATION DE V	REE	5 - TEST GIVEN,	RESULTS KNOWN RESULTS	
INJURED	TAKEN BY	5 - SECOND - MIDDLE	7- DEFEOTI	MENT UNKNO	YIN.	6 - NO VALID OL		& CLASS B BUS		4 - TALKING ON HAND-HE	LD	UNKNOWN		
1 - NOT TRANSP /TREATED AT	April Control of the Control	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	EJ	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		COMMUNICATION DEV  5 - OTHER ACTIVITY WITH	1010 E	ALCOHOL	TEST TYPE	
2 - EMS		(MOTORCYCLE SIDE CAR)	1-NOTEJE			H - HAZMAT		RESTRICTIONS	LICENSE	ELECTRONIC DEVICE		1 - NONE 2 - BLOOD		
3 - POLICE		8 - THIRD – MIDDLE 9 - THIRD – RIGHT SIDE		LY EJECTED		M - MOTORCYCLE		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER		3 - URINE		
9 - OTHER / UNK	CNO WN	10 - SLEEPER SECTION	3-TOTALLY 4-NOTAPP			P - PASSENGER N - TANKER		10 - LIMITED TO DAY	LIGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE		4 - BREATH		
ELECTRATION AND ADMINISTRATION OF STREET	QUIPMENT	OF TRUCK CAB  11 - PASSENGER IN OTHER			may.	Q - MOTOR SCOOTER		11 - LIMITED TO EMI		8 - OTHER DISTRACTION ( THE VEHICLE	OUTSIDE !	5 - OTHER		
1 - NONE USED	BELT ONLY USED	ENCLOSED CARGO AREA	1- NOTTRA	RAPPED		R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE 13 - MECHANICAL DI		9 - OTHER / UNKNOWN		DRUG TE	STTYPE	
3 - LAP BELT ON		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2-EXTRICA			S - SCHOOL BUS  T - DOUBLE & TRIPLE	TRAILERS	(SPECIAL BRAK)	ES, HAND	CONDITION		1 - NONE 2 - BLOOD		
	LAP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA		IICAL MEANS		X - TANKER / HAZMAT		ADAPTIVE DEVI		1 - APPARENTLY NORMAL		3 - URINE		
	5 - CHILD RESTRAINT SYSTEM -		CHANICAL ME	ANS	GENDER	men duy	14 - MILITARY VEHICLE		2 - PHYSICAL IMPAIRMEN	NT 4-OTHER				
6 - CHILD RESTI REAR FACIN	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		15 - MOTOR VEHICLES WITHOUT AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		DRUG TEST	RESULT(S)	
7 - BOOSTER SE		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO		4 - ILLNESS		1 - AMPHETAMI		
8 - HELMET US		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER		5 - FELL ASLEEP, FAINTED FATIGUED, ETC.	100000000000000000000000000000000000000	2 - BARBITURAT		
9 - PROTECTIVE (ELBOW, KNE								TO VITEN		6 - UNDERTHE INFLUENC	E	3 - BENZODIAZE 4 - Cannabino:		
10 - REFLECTIVE										OF MEDICATIONS / DRU /ALCOHOL	62	5 - COCAINE		
11 - LIGHTING - I										9-OTHER/UNKNOWN		6 - OPIATES / OF	PIOIDS	
	CLE ONLY PUNKNOWN											7 - OTHER 8 - NEGATIVE R	PTILIPE	

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D	OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER						
_								2,0,2,5,-,0,0,0,0,6,3,8,						
	UNIT # NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER					
	01 VOTAW, GREYSON, M								0,2,1,6,2,0,2,3,0,1, M					
CCUPAN	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE					
1000											<u> </u>	1 1		
	_	INJURED TAKEN	EMS AGENCY (NAME)	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG		TRAPPED						
	5	BY			☐MC HELMET	0 7	_ 1	1 1	_1_					
	UNIT #		T, FIRST, MIDDLE	_				DATE OF BIRTH AGE GENDER						
į,	01		W, SCARLET	, R				0,7,1,8,2,0,2,1,0,3,F						
UPAN		STREET, CITY,	2500 00 60 700 00	OH 44	370			CONTACT PHONE - INCLUDE AREA CODE						
000		INJURED	S DR ,Tallmadg	ge ,OH 44.					SEATING POSITION	AID DAC HEACH	LEIECTION	TRAPPED		
	1.000 (1.	TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT MC HELMET	. 0 . 9 .	AIR BAG USAGI	1	1		
Н	5						0,5	500000000000000000000000000000000000000				OF HOUSE		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
Ę	ADDRESS.	STREET, CITY,	STATE 7ID					CONTACT PHONE	THOLUDE ADEA OO					
UPA	ADDRESS.	. STREET, GITT,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	ÜE.				
000	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION   AIR BAG USA		EJECTION	TRAPPED		
		TAKEN BY				, , , , , , , , , , , , , , , , , , , ,	USED	DOT-COMPLIANT MC HELMET						
Н	UNIT #	NAME- LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
	J	MAINE: EAG	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									L		
ANT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE DE				
CUP														
8	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
	1 1	TAKEN BY						MC HELMET		L		ls 9		
		INJU	JRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG L	SAGE			
	1 - FATA	AL.		1 - NONE US			T - LEFT SIDE	ED)	1 - NOT DE	PLOYED				
	2 - SUSI	PECTED SE	RIOUS INJURY		E OCCUPANT (MOTORCYCL ER BELT ONLY USED 2 - FRONT – MIDI			EK)	2 - DEPLOYED FRONT					
			NOR INJURY		LT ONLY USED 3 - FRONT - RIGHT SIDE									
		SIBLE INJU PPARENT I		4 - SHOULDI	4 - S		ND – LEFT SIDI ORCYCLE PASS	TO THE PARTY OF TH	4 - DEPLOYED BOTH FRONT/SIDE					
	J- NOA		<b>加盟福祉</b>		ESTRAINT SYSTEM - 5 - SECOND - MIDDLE			5 - NOT APPLICABLE						
	1 NOT		TAKEN BY		RD FACING 6 - SECOND - RIGHT SID ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE			9 - DEPLOYMENT UNKNOWN						
		TRANSPOR EATED AT S		REAR FA	ACING (MOTORCYCLE SIDE									
55	2 - EMS			7 - BOOSTER	SEAT 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE			F 1 - NOT EJECTED						
	3 - POLI	ICE		8 - HELMET			PER SECTION (	OF TRUCK CAB 2 - PARTIA		ALLY EJECTED				
	9 - OTH	ER / UNKNO	OWN		TVE PADS USED KNEES, ETC.)		ENGER IN OTH			3 - TOTALLY EJECTED				
			IDER		TIVE CLOTHING		O AREA (NON-TE PICK-UP WITH CAI		4 - NOT APPLICABLE					
	F - FEMA				G – PEDESTRIAN		ENGER IN UNE	NCLOSED	TRAPPED					
		R / UNKNO	WN	/ BICYCL		13 - TRAILING UNIT 14 - RIDING ON VEHICLE (NON-TRAILING UNIT) 15 - NON-MOTORIST			1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS					
				99 - OTHER /	UNKNOWN			EXTERIOR						
									3 - FREED BY NON-MECH		CHANIC	AL		
						99 - OTHE	R/UNKNOWN		MEANS					
S	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS	ADDRESS	OTDEET	CTATE ZID					CONTACT PHONE						
M	AUUKE55:	: STREET, CITY,	STALE, ZIP					CUNTACT PHONE	- INCLUDE AREA CO	DE				
Н	NAME-1AS	ST, FIRST, MIDD	I F					DAT	E OF BIRTH		AGE	GENDER		
ESS		.,,						S 50 50 500						
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
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6	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS											P 8 8			
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