OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*							
PHOTOS TAKEN OH-2 OH-3	LOCAL INFORMATION			2.0.2.5	- ₁ 0 ₁ 0 ₁ 0 ₁ 1 ₁ 5	5,0,3,5,		
SECONDARY CRASH OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR		
PRIVATE PROPERTY	City of Kent Police	6,7,0,3	L 2 - UNSOLVED		2 99 - UNKNOWN			
COUNTY* LOCALITY* 1-CITY 6-7-1-1-2-VILLAGE Kent	CRASH DATE / TIME* CRASH SEVERITY							
3-TOWNSHIP TENT	LOCATION ROAD NAME	ROAD TYPE	10182025		- SERIOUS INJURY SUSPECTED			
2 - SOUTH	MAIN		ST	41,15,2	2	- MINOR INJURY		
T-WEST	REFERENCE ROAD NAME (ROAD, N	MILEPOST HOUSE #)	ROAD TYPE	LONGITUDE DE		SUSPECTED - INJURY POSSIBLE		
Z - SOUTH	312			-8 ₁ ,3 ₆ ,1		- PROPERTY DAMAGE		
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE			NTERSECTION RELATE	ONLY		
1-INTERSECTION FROM REFERENCE 1-NORTH IR -	INTERSTATE ROUTE(TP) AL -	- ALLEY HW- HIGHWAY R	RD - ROAD		RSECTION OR ON APPROA	200		
3- HOUSE # 3- EAST	I EDENAL OU NOUTE		SQ - SQUARE ST - STREET	MITHIN INTE	RCHANGE AREA NUM	IBER OF APPROACHES		
DISTANCE DISTANCE CR-	NUMBERED COUNTY ROUTE CR -		E - TERRACE		ROADWAY			
	MUMPEDED TOWNSHIP		TL - TRAIL VA - WAY	ROADWAY DIV	IDED			
3-YARDS	HE -	- HEIGHTS PL - PLACE		ROADWAY DIV	1020			
LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 9 - CROSSOVER		NER OF CRASH COLLISION/IMPA COLLISION 4 - REAR-TO-REAR	СТ	DIRECTION OF TRAVE		N TYPE		
0 1 2-ON SHOULDER 10-DRIVEWAY/	ALLEY ACCESS TWO	WEEN 5-BACKING MOTOR 5-BACKING		1 - NORTH 2 - SOUTH	(<4 FEET			
4 - ON ROADSIDE 12-SHARED US	VEHI	CLES IN 6 - ANGLE VSPORT 7 - SIDESWIPE, SAME	E DIRECTION	3 - EAST 4 - WEST	(≥4 FEET			
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAR 3 - HEAD	1971 P				DEPRESSED MEDIAN RAISED MEDIAN		
7 - ON RAMP 14-TOLL BOOTH	1	-on y-oniek/onknov			(ANY TYP 9 - OTHER/UN	S. State and the second second		
8-OFF RAMP 99-OTHER/UN		LOCATION OF ODAGU IN WO	DV ZONE	CONTOUR	CONDITIONS	SURFACE		
WORK ZONE RELATED	WORK ZONE TYPE ANE CLOSURE	1 - BEFORE THE 1ST		1 1	1	2		
	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING SIGN 2 - ADVANCE WARNIN	IG AREA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE		
LAW ENFORCEMENT PRESENT	OR MEDIAN	3-TRANSITION AREA	7	2 - STRAIGHT GRADE 2 - WET 2 - BLACK				
The production of the product of the	NTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AREA 5 - TERMINATION ARE	EA	3 - CURVE LEVEL 3 - SNOW BITUMIN ASPHALT				
LIGHT CONDITION	WEATHE	IR		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK		
1 - DAYLIGHT	1-CLEAR	6 - SNOW		y - OTTIEROUNKNOWN	OIL, GRAVEL	4 - SLAG, GRAVEL, STONE		
1 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	0 1 2 - CLOUDY 3 - FOG, SMOG, SMOKE	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT,	SNOW		6 - WATER (STANDING, MOVING)	5 - DIRT		
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FREEZI 99 - OTHER / UNKNOWN	G RAIN OR FREEZING DRIZZLE 7-SLUSH 9-OTHER					
9 - OTHER / UNKNOWN	5-SLEET, HAIL	99-OTHER/ONKNOWN			9 - OTHER/UNKNOWN			
NARRATIVE					<u> </u>	Indicate the north		
UNIT 1 STRUCK UNIT 2 WHII	E UNIT 2 WAS					direction with an "N" on the compass diagram.		
		OM				compass diagram.		
MAKING IN IMPROPER LEI		OM			/ / /			
THE RIGHT LANE INTO 312	W. MAIN ST.				/ / /			
			?W.?MAIN?ST.		Jun 1 /			
		312	TW. TMAINTS I.					
				٠ ا	NIT 1			
				/	// / N			
			5/ /	/ Not 7	o Scale			
					1401			
				N. 38WER	/			
				N NAMER I				
						31		
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED I	DATE/TIME R	EPORT TAKEN BY		
	DISPATCH DATE / TIME $8 \cdot 2 \cdot 0 \cdot 2 \cdot 5 \cdot / \cdot 1 \cdot 5 \cdot 0 \cdot 3 \cdot $				DATE/TIME R	POLICE AGENCY		
1.0.1.8.2.0.2.5./.1.4.4.01.0.1. TOTAL TIME OTHER TOTAL	8,2,0,2,5,/,1,5,0,3, OFFICER'S NAME*	1,0,1,8,2,0,2,5,/,1	5,0,5,1	0,1,8,2,0,2,5 CER'S NAME*	DATE/TIME R	POLICE AGENCY MOTORIST		
$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	8,2,0,2,5,/,1,5,0,3, OFFICER'S NAME*	1,0,1,8,2,0,2,5,/,1 ch	5,0,5,1 HECKED BY OFFI HORT, Jas	0,1,8,2,0,2,5 CER'S NAME*	DATE / TIME X X X X X X X X X	POLICE AGENCY		

LOCAL REPORT NUMBER 2,0,2,5,-,0,0,0,1,5,0,3,5, OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER DAMAGE OWNER PHONE: INCLUDE AIEA CODE (ST SAME AS DRIVER)
REDACTED PER ORC 149.43(A)(1) BROWN, JEANIE, MARIE DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 4 1022 TALLMADGE RD, Brimfield Twp, OH 44240 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 1 5 Ford 1, F, MC, U,9, J,9,0, F, U,A,3,9,1,8,5, O H JTC6541 INSURANCE POLICY # INSURANCE VERIFIED INSURANCE COMPANY COLOR VEHICLE MODEL STATE FARM BLK ESCAPE 2927270SFP345 TYPE OF USE US DOT# TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE **Bakers Towing** HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK DEVICE EQUIPPED MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS. RELEASED HIT/SKIP UNIT 2 - 10,001 - 26K LBS. 0,1PLACARD 」 3 - >26K LBS. 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 0 3 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 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) 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 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN 0 1 2 - TAXI 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 4 - LOGGING 2 - RUS 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 DEFECTIVE ACCIDENT **DEFECTS 3-TAIL LAMPS** 6 - TIRE BLOWOUT -NO DAMAGE [0] - UNDERCARRIAGE [14] 3 - INTERSECTION - OTHER 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER 1 - INTERSECTION - MARKED 6 - BICYCLE LANE 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 0 - NO DAMAGE 14 - UNDERCARRIAGE 3 3-STRIKING 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 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 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 13 - IMPROPER START FROM A 1-NONE 7 - LEFT OF CENTER 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 23 - OPENING DOOR INTO 1 . 2 - TWO-WAY 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 2 - SIGNAL 5 - YIELD SIGN 0 1ILLEGALLY 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 2 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 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 | 2 | TO | 1 | 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 52 - BUILDING 34 - MEDIAN GUARDRAIL SUPPORT 0,2,0 46-FENCE 27 - BRIDGE PIER ORABUTMENT 2 - CALCULATED / EDR BARRIER 40 - UTILITY POLE 53-TUNNEL 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

30-GUARDRAIL FACE

36 - MEDIAN OTHER BARRIER

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

42 - CULVERT

2 5

LOCAL REPORT NUMBER

2 0 2 5 - 0 0 0 1 5 0 3 5

						2 0 2 0	0 0 1 5 0 5 5			
0 2 M	NER NAME: LAST, FIRS [ACK, ARM ESS: STREET, CITY, STATE	ANDO, ANT	ONIO	REDACTED PE	R ORC 149.43(A)(1)	DAMAGE DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE				
		AVE Akron	OH 44301			4 2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
	CARRIER: NAME, ADDR		,0-2 . 10 02	COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN				
						DAMAGED AREA(S)				
	CENSE PLATE # NP4172		E IDENTIFICATION # $\mathbf{H}\mathbf{D}5_{1}\mathbf{K}\mathbf{R2}_{1}5_{1}9_{1}$	0.4.1 VEHICLE YE $2.0.1$		INDICA 12	ITE ALL THAT APPLY			
INSURANCE VERIFIED	_		NSURANCE POLICY # 23407989	GRY	VEHICLE MODEL FUSION	10 11 1 2	10 11 12 1			
COMMERCIA	TYPE OF USE AL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COMPAN City Service	Y NAME	9 0 2 3	3 9 10 2 3 3			
INTERLOCI DEVICE EQUIPPED	HIT/SKIP UNI	#UCCUPANTS	HICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS	MATERIAL RELEASED	CLASS # PLACARD ID #	8 7 6 5	8 7 5 5			
0,1 3.5 UNITTYPE 4.5	PASSENGER VAN (MINIVAN) SPORT UTILITY VEHICLE PICK UP CARGO VAN	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	13-SNOWMOBILE 14-SINGLE UNITTRUCK 15-SEMI-TRACTOR	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	10	12 11 10 2 9 3 8 4 7 5 5			
WAS MO	S VEHICLE OPERATING IN AU DE WHEN CRASH OCCURRED (ES 2-NO 9-OTHER/UNK)	? 0 1	1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN	10 11 12 1 10 9 9 3	6 11 12 1 10 11 1 1 2 9 9 3 3			
O 1 2-1 SPECIAL 3-1 FUNCTION 4-5	TAXI ELECTRONIC RIDE SHARING	9 - BUS - OTHER	12 - MILITARY 13 - POLICE	16-FARM 17-MOWING 18-SNOW REMOVAL 19-TOWING 20-SAFETY SERVICE PATROL	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	7 6 5	8 7 6 5 4 12 12 12			
CARGO 2.8 BODY TYPE	/ NOTAPPLICABLE BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	8 - POLE 9 - CARGOTANK 10 - FLAT BED 11 - DUMP	12-CONCRETE MIXER 13-AUTOTRANSPORTER 14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	9 3 9	3 9 3			
VEHICLE 2-1 DEFECTS 3-1	HEAD LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT		9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT	99 - OTHER / UNKNOWN	6 □-NO DAMAGE [6 6 6 6 6 0 1 Undercarriage [14]			
NON-MOTORIST 2-I	CROSSWALK NTERSECTION - UNMARKED	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	7 - SHOULDER / ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVE WAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	-TOP [13] -ALL AREAS [15]				
4 3-S ACTION 4-5	1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - 2 - NON-COLLISION 0 - 6 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - 3 - STRUCK PRE-CRASH 4 - CVERTAKING/PASSING 10 - PARKED 15 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED 16 - MAKING LEFT TURN 11 - SLOWING OR STOPPED 16 - MAKING LEFT TURN 11 - SLOWING OR STOPPED 16 - MAKING LEFT TURN 16 - MAKING LEFT TURN 17 - MAKING U-TURN 18 - ENTERING TRAFFIC LANE 15 - MAKING RIGHT TURN 18 - ENTERING TRAFFIC LANE 15 - MAKING RIGHT TURN 18 - ENTERING TRAFFIC LANE 15 - MAKING RIGHT TURN 18 - ENTERING TRAFFIC LANE 15 - MAKING RIGHT TURN 18 - ENTERING TRAFFIC LANE 16 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 16 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 16 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 16 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 16 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 16 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 16 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 16 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 16 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 16 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 17 - MAKING LEFT TURN 18 - ENTERING TRAFFIC LANE 18 - ENTERING		13 - NEGOTIATING A CURVE 18 - APPROACHING 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING 15 - WALKING, RUNNING, JOGSING, PLAYING 15 - STANDING OUTSIDE 16 - WORKING 17 - PUSHING VEHICLE 17 - PUSHING VEHICLE 18 - APPROACHING VEHICLE 19 - OTHER / UNKNOWN		O - NO DAMAGE 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 13 - TOP TRAFFIC					
0 6 3-R	FAILURE TO YIELD RAN RED LIGHT RAN STOP SIGN	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACD. 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD	A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/SPILLING 24 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	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			
6-1	MPROPERTURN	12 - IMPROPER BACKING	2			# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED			
SEQUENCE OF	EVENTS		NAN AGU TOTON			2	1 . 2 - INVOLVED-ACTIVE CROSSING			
1 4 0		6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	16-RAILWAY VEHICLE 17-ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - INVOLVED-PASSIVE CROSSING			
2 4 - 5 - (3 4 - 1	JACKKNIFE CARGO / EQUIPMENT LOSS OR SHIFT		12-DOWNHILL RUNAWAY 13-OTHER NON-COLLISION 14-PEDESTRIAN 15-PEDALCYCLE N WITH FIXED OBJECT		23 - STRUCK BY FALLING, SHIFTING CARGOOR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 2 TO	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST			
	LADIAH AHAHIAH	31 - GUARDRAIL END 32 - PORTABLE BARRIER		43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE EQUIPMENT	HAUT COSES	DETECTED COSES			
26· 5 27·	BRIDGE OVERHEAD STRUCTURE BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER	39 - LIGHT / LUMINARIES SUPPORT	45 - EMBANKMENT 46 - FENCE 47 - MAILBOX	51 - WALL 52 - BUILDING 53 - TUNNEL	UNIT SPEED 0 1 5	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR			
629-	BRIDGE PARAPET BRIDGE RAIL GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	41 - OTHER POST, POLE	48-TREE 49-FIRE HYDRANT	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED			
1	RST HARMFUL EVEN	1	ARMFUL EVENT			_ 2 _ 5				

OFF DEPARTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER								
SAFETY - MERVI	CE - PROTECTION	010K121 / 140)	1010	K12	1			2 0	2 5 - 0	0_0_	1,5	0.3	_5	
UNIT#	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER							
0,1	BROWN, JEANIE, MARIE								0 4 3 0 1 9 6 2 6 3 F						
	STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
0	ALLMADGE RD ,Brimfield Twp ,OH 44240							I	REDACTED PER ORC 149.43(A)(1						
INJURIES	INJURED TAKEN	EMS AGENCY (NAME) Kent Fire				MEDICAL FACILITY		USED	Прот-са	MPLIANT	ION AIR BAG	AIR BAG USAGE EJECTION TRAPPED			
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS		eneral Hosp	LOCAL	OFFENSE DESC		LMET 0 1	CITA	ION NU	IMPER		
O. H.		TED PER ORC 450	1:1-12	OFFERS	E CHA	NGED	CODE	OFFERSE DESC	AIF IION		l cria	IION NC	MIDER		
0	ENDORSEMEN				ALC	OHOL / DRUG SUSPI	ECTED	CONDITION		COHOL TEST			TEST(S		
	SELECT UP TO 2		DIST	TRACTED	□ A	LCOHOL MAR	RIJUANA		STATUS	YPE VALUE	STATUS	TYPE	RESULT	SELECTUPTO4	
_4	ے لے	ے سے سے ل	ے اِنت	1	0	THER DRUG		1	_1	1,	_1_		ا ب	ساسا	
UNIT #		FIRST, MIDDLE	NTON	10						DATE OF BIRTH		. .	AGE	GENDER	
0 2	STREET, CITY, S	K, ARMANDO, AN	NION	10					75	2 0 1 9		5 2	9	$\lfloor M \rfloor$	
=		ARDT AVE ,Akro	n OH	1 4430	1				1	PHONE - INCLUDE AREA CTED PER C		19.43	(A)(1))	
INJURIES		EMS AGENCY (NAME)	,01			: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SEATING DOCIT			. , , ,		
3	TAKEN	Kent Fire						USED 0 4	□ MC HE	MPLIANT	- 1	4 . 1 . 1			
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS		RGED	LOCAL	OFFENSE DESC	RIPTION		CITA	CITATION NUMBER			
O, H,	REDAC	TED PER ORC 450	01:1-12	331.1	4		CODE	Signals Befor	e Chang		299	29943			
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED	_	OHOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE	STATUS	DRUG TEST(S) TATUS TYPE RESULT SELECT UP TO 4			
. 4 .			BY	1	=	LCOHOL MAR	RIJUANA	. 1 .	1	1	1.	. 1			
UNIT #	NAME: AST	FIRST, MIDDLE			υ	THER DRUG			الثا	DATE OF BIRTH		Ť	AGE	GENDER	
5.1.3.5	2000-1000	, ,									120				
ADDRESS:	STREET, CITY, S	STATE, ZIP							CONTACT	PHONE - INCLUDE AREA	CODE				
202										1 1 1		- 1	- 1		
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	SEATING POSIT	ION AIR BAG	USAGE	EJECTION	TRAPPED	
{	BY								Ш мс не	LMET			لــــا	ىــــــا	
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	DFFENSE CHARGED LOCAL OFFENSE DESC			RIPTION			CITATION NUMBER				
OL CLASS	ENDORSEMEN	T RESTRICTION SELECT	UP TO 3 DRIN	/ED	41.0	OHOL / DRUG SUSPI		CONDITION	AL C	COHOL TEST		DRUG	TEST(S		
OL CLASS	SELECT UP TO 2			TRACTED		LCOHOL MAR		COMBILION	STATUS T		STATUS			SELECTOP TO 4	
	ــالــا	<u> </u>				THER DRUG				•	رسا		عاسال	لــالــالــ	
1 - FATAL	RIES	SEATING POSITION 1-FRONT-LEFT SIDE	1 - NOT DEP	IR BAG		OL CLASS A	S	OL RESTRIC		DRIVER DISTRA 1 - NOT DISTRACTED	CTION	1 - NONE	EST STA	TUS	
	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2- DEPLOYE			2 - CLASS B		2 - CDL INTRASTAT		2 - MANUALLY OPERAT			REFUSED		
3 - SUSPECTED		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3- DEPLOYE		NT / NIDE	3 - CLASS C		3 - CORRECTIVE LE	NSES	ELECTRONIC COMM DEVICE (TEXTING, T			GIVEN, CON	TAMINATED BLE	
4 - POSSIBLE IN 5 - NO APPAREN		4 - SECOND - LEFT SIDE	5-NOTAPP	/ED BOTH FRONT / SIDE				DIALING			4 - TEST GIVEN, RESULTS KNOWN				
INJURED	TAKEN BY	(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE	9- DEPLOYI	MENT UNKNO	WN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS & CLASS B BUS		COMMUNICATION DE	VICE		GIVEN, RES NOWN	ULTS	
1 - NOT TRANSP	ORTED	6 - SECOND - RIGHT SIDE						7 - EXCEPT TRACTO	R-TRAILER	4 - TALKING ON HAND-H COMMUNICATION DE		ALCO	HOL TES	T TYPE	
/TREATED AT 2 - EMS	SCENE	7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)	1 NOTEJE	ECTION CTED		H - HAZMAT	MENT	8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY WI ELECTRONIC DEVIC		1 - NONE		HAT SAY	
3 - POLICE		8 - THIRD – MIDDLE 9 - THIRD – RIGHT SIDE	2 - PARTIAL			M - MOTORCYCLE		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER		2 - BL00 3 - URIN			
9 - OTHER / UNK	NOWN	10 - SLEEPER SECTION	3-TOTALLY 4-NOTAPP			P - PASSENGER N - TANKER		10 - LIMITED TO DAY	LIGHT ONLY	7 - OTHER DISTRACTION	E	4 - BREA	ATH		
SAFETY E	QUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER	70	RAPPED	gride.	Q - MOTOR SCOOTER		11 - LIMITED TO EMI 12 - LIMITED - OTHE		8 - OTHER DISTRACTION THE VEHICLE	AOUTSIDE	5 - OTHE	R		
2 - SHOULDER B	ELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1- NOTTRA			R - THREE-WHEEL MO S - SCHOOL BUS	TORCYCLE	13 - MECHANICAL D	VICES	9 - OTHER / UNKNOWN		DR.	UG TEST	TYPE	
3 - LAP BELT ON		PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	TED BY		T - DOUBLE & TRIPLE	TRAILERS	CONTROLS, OR O	THER	CONDITION		2 - BL00			
4 - SHOULDER & 5 - CHILD RESTE		CARGO AREA	3- FREED B	Υ		X - TANKER / HAZMAT		ADAPTIVE DEVI		1 - APPARENTLY NORM 2 - PHYSICAL IMPAIRM		3 - URIN			
FORWARD FA	ICING RAINT SYSTEM -	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	NUN-ME	CHANICAL ME	ANS	GENDER		15 - MOTOR VEHICLE AIR BRAKES	ES WITHOUT 3 - EMOTIONAL (E.G., DEPRESSED,			4 - OTHER			
REAR FACING	G	(NON-TRAILING UNIT) 15 - NON-MOTORIST				F - FEMALE M - MALE		16 - OUTSIDE MIRRO	ANGRY, DISTURBED) OR 4- ILLNESS			DRUG TEST RESULT(S) 1-AMPHETAMINES			
7 - BOOSTER SE 8 - HELMET US		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC ALI)	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			BITURATES		
9 - PROTECTIVE (ELBOW, KNE								18-OTHER		6 - UNDERTHE INFLUE			ODIAZEPINI Nabinoids	ES	
10 - REFLECTIVE										OF MEDICATIONS / D /ALCOHOL	7062	5 - C0CA	INE		
11 - LIGHTING - F / BICYCLE ON										9-OTHER/UNKNOWN		6 - OPIA	TES / OPIOID	S	
	39 - OTHER / UNKNOWN												ATIVE RESUL	TS	

HSY8306 OH1M 1/19 [760-1500] PAGE 4 OF 5

U	OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER								
_		_						[2,0,2,5,-,0,0,1,5,0,3,5,-]							
	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER							
	02 SCOTT, TRAEVON, DOUGLAS							1 2 1 0 1 9 9 4 3 0 M							
A	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
OCCUPANT	1318 BURKHARDT AVE ,Akron ,OH 44301								REDACTED PER ORC 149.43(A)(1)						
8	- Augustus and a second	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
	. 5 .	BY . 1 .					USED 0 4	MC HELMET	0 3	. 4	1 1	1 .			
Н	UNIT#	NAMELIAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER			
	ONLY # HAME: LASI, FIRST, MIDDLE								L OI DIKIII		AUL	uenden			
Ę	ADDRESS: STREET, CITY, STATE, ZIP								- INCLUDE AREA CO						
OCCUPAN	ADDICESS	. 31 KEE1, 0111,	STATE, ZIF					CONTACT FIIONE	- INCLUDE AREA CO	DE.					
20	THUDIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	mu (unue amu)	SAFETY EQUIPMENT	IT SEATING POSITION AIR BAG USAGE EJECTION TRAPPE							
	INJUNIES	TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN 10. MEDICAL PAGICI	IIT (NAME, CITY	USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR DAG USAGE	ESECTION	IKAFFED			
Ц									шш		لسا				
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER			
	لــــا														
PAN	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE					
OCCUPANT															
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
		BY						MC HELMET	لــــــــــــــــــــــــــــــــــــــ						
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER			
									1 1 1		E F S	ا			
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
S															
ō	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
	1 1	TAKEN BY					USED	MC HELMET				lc 3			
	N, ET	INJU	JRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE				
	1 - FATA	AL		1 - NONE US			IT - LEFT SIDE	ED)	1 - NOT DE	PLOYED					
	2 - SUSPECTED SERIOUS INJURY				E OCCUPANT (MOTORCYCLE DRIV ER BELT ONLY USED 2 - FRONT – MIDDLE			2 - DEPLOYED FRO							
			INOR INJURY		LT ONLY USED 3 - FRONT - RIGHT SID 4 - SECOND - LEFT SID (MOTORCYCLE PASS				YED SIDE						
	4 - POS	SIBLE INJU	IRY						4 - DEPLOYED BOTH FRONT/SIDE						
	5 - NO A	PPARENT	INJURY		ESTRAINT SYSTEM -	ND - MIDDLE	ENGER)	5 - NOT AP							
		INJURED	TAKEN BY		RD FACING 6 - SECOND - RIGHT SI										
		TRANSPOR			ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE										
		EATED AT S	CENE	REAR FA		1 - NOT EJECTED				A COMPANIES					
	2 - EMS			7 - BOOSTER 8 - HELMET			D – MIDDLE D – RIGHT SIDE				ECTED				
	3 - POLI	ER / UNKNO	NA/N		TVE PADS USED		PER SECTION (LY EJECTED						
	9-0111				KNEES, ETC.)		ENGER IN OTH O AREA (NON-TH	EK ENOLOGED							
	E EEM		NDER	10- REFLECT	TVE CLOTHING		PICK-UP WITH CAI								
	F - FEMA M - MAL				G - PEDESTRIAN		ENGER IN UNE O AREA	NCLOSED	1 NOTED	TRAPP	- U				
	U - OTHE	R / UNKNO	WN	/ BICYCL		1 - NOT TRAPPED			BY MECHANICAL						
				99 - OTHER /	UNKNOWN		NG ON VEHICLE TRAILING UNIT)	EXTERIOR	MEANS		LUITANI	JAL			
							MOTORIST			BY NON-ME	CHANIC	AL			
						99 - OTHE	R / UNKNOWN		MEANS						
	NAME: LA	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER			
WITNESS									1 1 1						
ĹΝ	ADDRESS	: STREET, CITY,	STATE, ZIP				10	CONTACT PHONE	- INCLUDE AREA CO	DE					
											<u> </u>				
S	NAME: LA	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER			
WITNESS									1 1 1	السا		لـــــا			
MIT	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE					
	Marr								E OF PIPE.		105	LAFTER			
SS	NAME: LA	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER			
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
W	APPRE 33	. 31KEE1, UIT,	eini Çzir												

HSY 8355 OH1P 3/19 [760-1500] PAGE 5 0F 5