OF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTE:	S MANDATORY FIELD F	OR SUPPLEMENT	REPORT	ı	OCAL REPORT NUMBER	k
PHOTOS TAKEN OH-2 OH-3	LOCAL INFORMATION				2 0 2 4	$-10_{1}0_{1}0_{1}1_{1}2$	7,6,9
X OH-1P OTHER	REPORTING AGENCY NAME	NCI	IC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR	
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Pol	ice	$\lfloor 0 \rfloor 6 \rfloor$	7,0,3	1 - SOLVED 2 - UNSOLVED	0_2_0	1 98 - ANIMAL 99 - UNKNOWN
1 - CITY	TY, VILLAGE, TOWNSHIP*				CRASH DATE /	1.	SH SEVERITY FATAL
6,7 1 2-VILLAGE Kent				l	$0.8 \cdot 2.9 \cdot 2.0 \cdot 2.4$	/1255 5	SERIOUS INJURY
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH S - SOUTH 4 E - EAST	LOCATION ROAD NAME		ROA	AD TYPE	LATITUDE DE		SUSPECTED MINOR INJURY
S R 59 4 E-EAST W-WEST	MAIN		_S	$\mathbf{S}_{\perp}\mathbf{T}_{\perp}$	41,15,2	9,2,0	SUSPECTED
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH		DAD, MILEPOST, HOUSE	(#) RO	AD TYPE	LONGITUDE DE	Proposition and a state of the	INJURY POSSIBLE
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	LOUISE		S	$\mathbf{S}_{\perp}\mathbf{T}_{\perp}$	81,0391	2 ₁ 7 ₁ 1 ₁	PROPERTY DAMAGE ONLY
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE		AD TYPE			INTERSECTION RELATED	Ú.
1 2-MILE POST 3 S-SOUTH	S - FEDERAL US ROUTE		HIGHWAY RD - F LANE SQ - S	SQUARE	WITHIN INTE	RSECTION OR ON APPROA	СН
3-HOUSE # - E-EAST	R - STATE ROUTE			STREET	■ WITHIN INTE	RCHANGE AREA NUM	BER OF APPROACHES
DISTANCE DISTANCE CI	R - NUMBERED COUNTY ROUTE		OVAL TE - T PARKWAY TL - T	TERRACE TRAIL		ROADWAY	
5 0 2 1-MILES TI	R - NUMBERED TOWNSHIP ROUTE		PIKE WA - V	WAY	ROADWAY DIV	IDED	
Januar			PLACE	_	_	Ĭ	
LOCATION OF FIRST HARMFUL EVE 1 - ON ROADWAY 9 - CROSSOVI		MANNER OF CRASH COL NOT COLLISION 4 - REA			DIRECTION OF TRAVE N - NORTH		I TYPE LUSH MEDIAN
	MALLET ACCESS 6 .	TWO MOTOR	CKING		S - SOUTH	(<4 FEET)
3-IN WEDIAN II-NAILWAN	GRADE CROSSING	VEHICLES IN 6-AND TRANSPORT 7-SID	GLE DESWIPE, SAME DIRE	ECTION	E - EAST W - WEST	2 - DIVIDED F (≥4 FEET	LUSH MEDIAN)
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LAN	IF.		DESWIPE, OPPOSITE I	DIRECTION			EPRESSED MEDIAN
7 - ON RAMP 14-TOLL BOO	тн	11EAD-011	HER7 ONKNOWN			(ANY TYPE 9 - OTHER/UN	5)
8-OFF RAMP 99-OTHER/	JNKNOWN	F					
WORK ZONE RELATED	WORK ZONE TYPE - LANE CLOSURE		ORE THE 1ST WORK		CONTOUR	CONDITIONS	SURFACE
WORKERS PRESENT	- LANE SHIFT/CROSSOVER	WAR	RNING SIGN ANCE WARNING AF		1 - STRAIGHT LEVEL	11 - DRY	2
LAW ENFORCEMENT PRESENT	- WORK ON SHOULDER OR MEDIAN	The second secon	-TRANSITION AREA 2-STRAIGHT GRADE 2-WET				1 - CONCRETE 2 - BLACKTOP,
	- INTERMITTENT OR MOVING W - OTHER		- ACTIVITY AREA - TERMINATION AREA 3 - CURVE LEVEL 3 - SNOW				BITUMINOUS, ASPHALT
	1 STATES				4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK
LIGHT CONDITION 1 - DAYLIGHT	1 - CLEAR	ATHER 6 - SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE
1 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	0 1 2-CLOUDY	7 - SEVERE CROS		014		6 - WATER (STANDING, MOVING)	5 - DIRT
4 - DARK - ROADWAY NOT LIGHTED	4 - RAIN	9-FREEZING RA	IN OR FREEZING	STORY COLORS		7 - SLUSH	9 - OTHER/UNKNOWN
5 - DARK – UNKNOWN ROADWAY LIGHTIN 9 - OTHER / UNKNOWN	G 5 - SLEET, HAIL	99 - OTHER / UNK	(NOWN			9 - OTHER/UNKNOWN	
NARRATIVE							Indicate the north
Unit 1 was eastbound on W. M	ain nassing I auisa	C4					direction with an "N" on the
TO THE SALE OF WAR SECURITING COLORS OF SALE PROPERTY OF		31.					compass diagram.
Unit 2 was also eastbound in							
Traffic ahead stopped abrupt	ly. Unit 1 quickly						N
changed into the right lane to	avoid a rear ending	g		W.MainSt		N	ot To Scale
the car ahead. Unit 1 failed to	yield to traffic in						
the right lane and struck Unit	2.				Unit 1		
			1 <			-	Unit 1
				(1)	Jim 2	Unit 2	
				ぢ			
				LouiseSt.			
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ADDIVAL	L DATE / TIME		SCENE CLEARED	DATE/TIME D	EPORT TAKEN BY
	2,9,2,0,2,4,/,1,2,5			1.0	8,2,9,2,0,2,4	□	POLICE AGENCY
TOTAL TIME OTHER TOTAL		0 0 2 9 2 0			0 2 9 2 U 2 '	T//1/3/4/2	MOTORIST
ROADWAY CLOSED INVESTIGATION TIME MINI	Hilbruner, N	430000		eeler, (George		SUPPLEMENT (CORRECTION OR ADDITION
0,0,0,0,0,0,0,0	5 3 2 3 OFFICER'S	S BADGE NUMBER*	2	Снескей ву	OFFICER'S BADGE N	NUMBER*	TO AN EXISTING REPORT SENT TO COPS)

(5) - Intil	SERVICE - PROTECTION					2 0 2 4 -	0,0,0,1,2,7,6,9,			
UNIT #	OWNER NAME: LAST, FIRE MONSOUR, I	ST, MIDDLE (X SAME AS DRIVER)	DAE	REDACTED PE	DE ATEA CODE (SAME AS DRIVER) RORC 149.43(A)(1)		DAMAGE			
	DRESS: STREET, CITY, STATE			1 - NONE	DAMAGE SCALE 3 - FUNCTIONAL DAMAGE					
	ARLISLE CT			2 2-MINOR D						
COMMERC	CIAL CARRIER: NAME, ADDR	RESS, CITY, STATE, ZIP	PHONE: INCLUDE AREA CODE	9 - UNKNOWN DAMAGED AREA(S)						
LP STATE	LICENSE PLATE #	VEHICLE	AR VEHICLE MAKE		CATE ALL THAT APPLY					
$\mathbf{O}_{\mathbf{H}}$	S627396		B ₁ 7 ₁ C ₁ G ₀ ₁ 9 ₁ 5 ₁			11 12	11 12 1			
X INSURA	NCE INSURANCE COMP	L GENERAL2	NSURANCE POLICY #	BLK	SANTA FE	12	10 12			
	TYPE OF USE		US DOT #	TOWED BY: COMPANY		10 2	10, 2			
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE		HAZARDO	US MATERIAL		3 9 9 3			
INTERI	LOCK HIT/SKIP UNI	#OCCUPANTS	HICLEWEIGHT GVWR/GCWR 1 - ≤10K LBS.		CLASS # PLACARD ID #	7 6 7	7 5			
EQUIP	PED MITTISKET ON	0 3	2 - 10,001 - 26K LBS 3 - >26K LBS.	PLACARD L		7 6 5	7 6 5			
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED		18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6	11 12			
0 3	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	15 - SEMI-TRACTOR	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.	7 8 5 7			
. 00	# of TRAILING UNITS	(ATV/UTV)	Tr-morotrionE		yy-onkhown ok minokir	12	7 6 5 12			
	WAS VEHICLE OPERATING IN AU	TONOMOUS	D - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	O HIMMINIMA	11 12 1	6 11 12 1			
,	MODE WHEN CRASH OCCURRED			4 - HIGH AUTOMATION	7 - UNKNOWN	10 11 1	10 11 1			
	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3	3 9 9 3			
	1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16-FARM	21 - MAIL CARRIER	8 4 7	8 4 —			
[0,1]	2 - TAXI	7 - BUS - INTERCITY		17 - MOWING	99 - OTHER / UNKNOWN	8 7 6	8 7 5 4			
SPECIAL FUNCTION	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	9 - BUS - OTHER		18-SNOW REMOVAL 19-TOWING		6 5	7 6 5			
	5 - BUS-TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12			
0.1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	0111.0010	8 - POLE	12 - CONCRETE MIXER	12	1 1 🖹			
CARGO BODY	2 - BUS	4 - LOGGING	/ 01000 W W FWO 0050 00V	9 - CARGO TANK 10 - FLAT BED	13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE					
TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUNP	99-OTHER/UNKNOWN		3 9 7 3 9 8 3			
	1 - TURN SIGNALS	4 - BRAKES		9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6				
	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10-DISABLED FROM PRIOR ACCIDENT			6 6 6			
150,000		3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER	- NO DAMAGE	[0] - UNDERCARRIAGE [14]			
	CROSSWALK	4 - MIDBLOCK - MARKED		10 - DRIVEWAY ACCESS	AT INCIDENT SCENE	☐-TOP [13]	- ALL AREAS [15]			
LOCATION	2 - INTERSECTION - UNMARKED CROSSWALK	CROSSWALK 5 -TRAVEL LANE - OTHER LOCATION	B - SIDEWALK	11-SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN	П-им	IT NOT AT SCENE [16]			
AT IMPACT	1-NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING					
3	2-NON-COLLISION 0 1	2 - BACKING		14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	INITI 0 - NO DAMA	AL POINT OF CONTACT AGE 14 - UNDERCARRIAGE			
ACTION	3-31KIKING	3 - CHANGING LANES 4 - OVERTAKING/PASSING	9 - LEAVINGTRAFFIC LANE 10 - PARKED	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST	0 . 2 . 1-12 - REFE	R TO UNIT 15 - VEHICLE NOT AT SCENE			
no no n	5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED JOGGING, PLAYING		21 -STANDING OUTSIDE	DIAGE 13-TOP	RAM 99 - UNKNOWN			
	& STRUCK 9-OTHER / UNKNOWN	6 - MAKING LEFT TURN	INTRACTIC	16 - WORKING 17 - PUSHING VEHICLE	DISABLED VEHICLE 99 - OTHER / UNKNOWN	20 FR				
	Vincential I	7 - LEFT OF CENTER		17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
9919 5650	2-FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / ACDA	PARKED POSITION 14 - STOPPED OR PARKED	18 - OPERATING DEFECTIVE	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
[0,2]	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING	ILLEGALLY	EQUIPMENT 19-LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTING	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING 20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	•	3 - FLASHER 6 - NO CONTROL			
	6-IMPROPERTURN	12 - IMPROPER BACKING	10 1110110 11111	20-IMPROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED			
SEQUENCE	OF EVENTS		NON-COLLISION			4	1 2 - INVOLVED-ACTIVE CROSSING			
1 2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE —	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - INVOLVED-PASSIVE CROSSING			
	2 - FIRE/EXPLOSION 3 - IMMERSION	TRAVEL		17-ANIMAL — FARM 18-ANIMAL — DEER	23 - STRUCK BY FALLING,	UNIT / NO	ON-MOTORIST DIRECTION			
2 0 8	4 - JACKKNIFE			19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	SHIFTING CARGOOR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST			
₃ 4 3	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14-PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 4 TO	3 3 - EAST 7 - SOUTHEAST			
3 7 3		COLLISIO	N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE - STRUCK	a service of the service of		4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
4	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE EQUIPMENT	HAUT COSES				
	26-BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANKMENT	51 -WALL	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED			
5	STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	AO LITTLETY DOLF	46-FENCE 47-MAILBOX	52 - BUILDING 53 - TUNNEL	$\begin{bmatrix} 0 & 2 & 5 \end{bmatrix}$	2 - CALCULATED / EDR			
20	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE	48 - TREE	54-OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
6	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	49-FIRE HYDRANT	99 - OTHER / UNKNOWN	-				

___ FIRST HARMFUL EVENT _______ MOST HARMFUL EVENT

2 5

LOCAL REPORT NUMBER

SMETT.	SERVICE - PROTECTION UNTIl							2 0 2 4 -	0_	$0_{+}0_{+}1_{+}2_{+}7_{+}6_{+}9_{+}$		
UNIT #	OWNER NAME: LAST, FIRS			REI	DACTED P	ÉR ÖF	RC 149.43(A)(1)			AMAGE		
OWNER A	DDRESS: STREET, CITY, STATE,	ZIP (X SAME AS DRIVER)		DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - 3 MINOR DAMAGE - 4 DISABILING DAMAGE								
4665 ESTES DR , Brimfield Twp ,OH 44240 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN												
COMMERC	SIAL CARRIER: NAME, ADDR	ESS, CITY, STATE, ZIP	E: INCLUDE AREA CODE	DAMAGED AREA(S)								
LP STATE	LICENSE PLATE #		E IDENTIFICATION#	VEHICLE YEAR VEHICLE MAKE				INDICATE ALL THAT APPLY				
	DRW5777 NGE INSURANCE COMP		NSURANCE POLICY #	5 ₁ 9 ₁ 3 ₁	2 0 1		Chevrolet	11 12		11 12		
X INSURA VERIFI	AUTO OW		648541000		BLU MALIB			10 12	2	10 12 1		
Псомме	TYPE OF USE RCIAL GOVERNMENT	IN EMERGENCY	US DOT#	TOW	ED BY: COMPA	NY NAME		9 0 2 3	3	10, 2 2		
		#OCCUPANTS VE	HICLE WEIGHT GVWR/GCWR	HAZARDOUS MATERIAL MATERIAL CLASS # PLACARD ID #			⊢ Ø 1 -	-	0 4 -			
DEVICE EQUIP	E HIT/SKIP UNIT		1 - ≤10KLBS. 2 - 10,001 - 26KLBS.	ΙH	RELEASED	CLASS	# PLACAKU IU #	8 6 5	4	8 7 6 5		
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS. 12-GOLF CART	18 - LIMO (L	IVERY VEHICLE)	23 - PE	DESTRIAN / SKATER	6 5	11	12 7 6 5		
0.1		8 - MOTORCYCLE 3-WHEELED			+ PASSENGERS)		HEELCHAIR (ANY TYPE)	10/	\wedge	1 1 2		
UNITTYPE	3 - SPORT UTILITY VEHICLE 4 - PICK UP	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED		20 - OTHER \ 21 - HEAVY I	ZEHICLE EQUIPMENT	25 - OT I	HER NON-MOTORIST Cycle	9	9			
	5 - CARGO VAN	BICYCLE 11 - ALL TERRAIN VEHICLE	THE STATE OF THE PARTY OF THE P		. WITH RIDER ORDRAWN VEHICLE	27 -TR/	Delice and the second second	+	- 8			
. 00	6 - VAN (9-15 SEATS) # of trailing units	(ATV/UTV)	17 - MOTORHOME	ANIMAL	-BRAWII VEHICLE	99-UN	IKNOWN OR HIT/SKIP	8	Ž,	6		
	2/18/30 18/07/18/07/19/19/19/19/07/19/19/19/19/19/19/19/19/19/19/19/19/19/	TONOMOUS	D. NO AUTOMATION	2 0000171	AHAI AHTAMITIA	N 0 11111	IZNOVA	11 12	,	6 11 12 1		
,	MODE WHEN CRASH OCCURRED	# 10 M (10 M M M M M M M M M M M M M M M M M M M			ONAL AUTOMATION	N 9-UN	KNUWN	10 11 1	2	10 11 1 2		
_ 2	1-YES 2-NO 9-OTHER/UNK	OWN AUTONOMOUS 2 - PARTIAL AUTOMATION !		5 - FULL AUTOMATION				9 9 3	3	9 9 3		
0.1	1 - NONE	6 - BUS - CHARTER/TOUR		16-FARM	500		AIL CARRIER	8 4 -	7.	8 4 7		
[0,1]	2 - TAXI 3 - ELECTRONIC RIDE SHARING	7 - BUS - INTERCITY 8 - BUS - SHUTTLE		17 - MOWING 18 - SNOW REMOVAL		99-0T	HER / UNKNOWN	8 6	4	8 6		
SPECIAL FUNCTION	CTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 1		19-TOWING				6		6			
	5 - BUS - TRANSIT/COMMUTER	15 - CONSTRUCTION EQUIPMENT		SERVICE PATROL				12	2 12 12			
0_1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	MOTORVEHICLE	0111.0010	8 - POLE 9 - CARGOT	ANK		NCRETE MIXER TOTRANSPORTER	12				
CARGO BODY	2 - BUS	4 - LOGGING	T ADMINISTRACIONALIS	10-FLAT BED 11-DUNP			RBAGE/REFUSE	5 P 3	9	√ ⁶ 3 9 7 3 9 8 3		
TYPE	3. TUDNICIONALO	4 - BRAKES	11				HER / UNKNOWN		- 4	.		
VEHICLE	1 - TURN SIGNALS 2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT 10		0 - MOTOR TROUBLE 0 - DISABLED FROM PRIOR		HER / UNKNOWN	6	į			
	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			- NO DAMAGE [0] - UNDERCARRIAGE [14]					
	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER			CROSSING ISLAND		RST RESPONDER INCIDENT SCENE	— □- TOP [13]		-ALL AREAS [15]		
NON-MOTORIST	2-INTERSECTION - UNMARKED CROSSWALK		B - SIDEWALK	11- SHANED OSE PATHS ON			HER / UNKNOWN					
AT IMPACT	CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION		TRAILS				□-0	NIT NO	DT AT SCENE [16]		
	1 - NON-CONTACT 2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING			ATING A CURVE NG OR CROSSING		PROACHING LEAVING VEHICLE					
4		3 - CHANGING LANES	9 - LEAVINGTRAFFIC LANE		IED LOCATION		ANDING HER NON-MOTORIST	0 - NO DAN 1 - 10 1-12 - REF		14 - UNDERCARRIAGE UNIT 15 - VEHICLE NOT AT SCENE		
ACTION	4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTIONS			JOGGING, PLAYING 21 - STANDING OU			ANDING OUTSIDE	13-TOP	GRAM	99 - UNKNOWN		
	& STRUCK 9-OTHER / UNKNOWN	6 - MAKING LEFTTURN	INTRAFFIC 16-WORKING 12-DRIVERLESS 17-PUSHING VEHICLE				SABLED VEHICLE HER / UNKNOWN	13-109				
	1000000 A	7 - LEFT OF CENTER		17 - VISION (OBSTRUCTION	21 -LYI	ING IN ROADWAY	TRAFFICWAY FLOW	TF	TRAFFIC CONTROL		
V211 1341	2-FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / ACD	DADVED DOCITION	18 - OPERAT EQUIPM	ING DEFECTIVE	22 - NO	T DISCERNIBLE	1 - ONE-WAY		1 - ROUNDABOUT 4 - STOP SIGN		
[0,1]	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9-IMPROPER LANE CHANGE 10-IMPROPER PASSING	ILLEGALLY	19-LOAD SH	HIFTING/FALLING/		ENING DOOR INTO ADWAY	2 2 - TWO-WAY		6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
CONTRIBUTING CIRCUMSTANCES) - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLIN 20 - IMPROP	IG ER CROSSING	99-0TF	HER IMPROPER ACTION	# of THROUGH LANES		RAIL GRADE CROSSING		
SEQUENCE	6-IMPROPERTURN OF EVENTS	12 - IMPROPER BACKING						ON ROAD		1 - NOT INVOLVED		
			NON-COLLISION		VIII III E	20 1110	2017 7011 MATERIANOS	_4_	∟	1 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING		
1 2 0		6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	16 - RAILWA' 17 - ANIMAL		EQI	ORK ZONE MAINTENANCE UIPMENT		1011			
0.8	3 - IMMERSION 4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT	12 - DOWNHILL BLINAWAY	18-ANIMAL 19-ANIMAL		SH	RUCK BY FALLING, IFTING CARGOOR	UNIT/I	IUN-M	OTORIST DIRECTION 1 - NORTH 5 - NORTHEAST		
200	5 - CARGO / EQUIPMENT			20 - MOTOR	VEHICLE IN	BY	IYTHING SET IN MOTION 'A MOTOR VEHICLE	FROM 4 TO	. 3	2 - SOUTH 6 - NORTHWEST		
$_{3}$ $\boxed{4}$ $\boxed{3}$	LOSS OR SHIFT			21 - PARKED	TRANSPORT - PARKED MOTOR VEHICLE		HER MOVABLE OBJECT	FROM L4 TO	_ 3	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST		
	25 - IMPACT ATTENUATOR	COLLISIO 31 - GUARDRAIL END	N WITH FIXED OBJECT 37 - TRAFFIC SIGN POST	- STRU 43-CURB	JCK	50 - W0	ORK ZONE MAINTENANCE			9 - OTHER / UNKNOWN		
4	/ CRASH CUSHION	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH 45 - EMBANI	VMENT.	EQI 51 - WA	UIPMENT ALL	UNIT SPEED		DETECTED SPEED		
5	CTDUCTUDE	34 - MEDIAN GUARDRAIL	SUPPORT	46-FENCE		52 - BU	ILDING	0 2 5		1 - STATED / ESTIMATED SPEED		
	28-BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	TI - IIIAILUUA			NNEL HER FIXED OBJECT			2 - CALCULATED / EDR 3 - UNDETERMINED		
6	20 RDINGE DAIL RADDIED OR SUPPORT			9-FIRE HYDRANT 99-OTHER/UNKNOWN				POSTED SPEED		- VIII ENTITLE		

2 5

OFF PUBLIC BAFETY MOTORIST / NON-MOTORIST									LOCAL REPORT NUMBER							
SAPETY - MENY	ICE - PROTECTION	010K131 / 140) 4 - W	1010	KIS				L2_0_	2 4 - 0 0	10_{1}	2.7.6	9			
UNIT#	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDER						
		OUR, ELIZABET	ΓH, RA	4E					0 6 0 2 1 9 9 2 3 2 F							
	STREET, CITY, S ARLISI	LE CT 101 ,Kent ,		REDACTED PER ORC 149.43(A)(1)												
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	□ DOT-C	SEATING POSITIO	N AIR BAG U	SAGE EJECTION	TRAPPED			
0N 5	BY							0 4	□ MC HE	LMET 0 1	1_	11_	_1_			
OL STATE		LICENSE NUMBER CTED PER ORC 450	1.1 12	OFFENS		RGED	LOCAL	OFFENSE DESC	RIPTION	-342		ON NUMBER	A8			
O H	KEDAC			331.1	4		X	Signals Befor			2772					
OL CLASS	ENDORSEMEN SELECT UP TO 2		DIS	VER Tracted	_	CHOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE		TYPE RESUL	T SELECTUPTO4			
4 .			BY	1	=	THER DRUG	KIJUANA	. 1 .	1	1	1	1				
UNIT #	NAME: LAST	FIRST, MIDDLE				31.4574.504.60700				DATE OF BIRTH		AGE	GENDER			
. 0 . 2 .	EVAN	S, MARCIA, L							0.3	$0 \overline{1} \overline{1} \overline{9}$	5.1	7.3	F .			
	: STREET, CITY, S									PHONE - INCLUDE AREA (
4665 I	ESTES 1	DR ,Brimfield Tw	HO, q	44240)				REDA	CTED PER	ORC	149.43	(A)(1)			
INJURIES	INJURED	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C:	SEATING POSITIO	N AIR BAG U	AIR BAG USAGE EJECTION TRAPPED				
2 5	TAKEN BY							USED 0 4	Шмс н Е							
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OL CLASS	ENDORSEMEN SELECT UPTO 2			VER TRACTED	_	OHOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO					
. 4 .			BY	1	=	LCOHOL MAR	RIJUANA	. 1 .	1	1	1	1				
UNIT#	NAME: LAST	FIRST, MIDDLE		_	υ٠	THER DROG				DATE OF BIRTH		AGE	GENDER			
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ADDRESS:	STREET, CITY, S	TATE, ZIP							CONTACT	PHONE - INCLUDE AREA O	ODE					
TORI										1 1 1		1 1	1 1			
INJURIES	INJURED	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C:	SEATING POSITIO	N AIR BAG U	SAGE EJECTION	TRAPPED			
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OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	E CHAI	GED LOCAL OFFENSE DESCRIPTION			RIPTION C			CITATION NUMBER				
OL CLASS	SELECT UP TO 2		DIS	VER Tracted		DHOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE		TYPE RESUL	T SELECTOP 104			
			BY		=	THER DRUG	RIJUANA		ļļ.	_ •			11 11 1			
INJU	RIES	SEATING POSITION	A	IR BAG		OL CLASS	s	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TEST ST				
1 - FATAL	CERTAIN THURS	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP			1 - CLASS A		1 - ALCOHOL INTER		1 - NOT DISTRACTED		- 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 3	-TEST REFUSED -TEST GIVEN, CO				
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		ED BOTH FRO	NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DEVICE (TEXTING, TY) DIALING)		SAMPLE / UNUS - TEST GIVEN, RE				
5 - NO APPAREN	NT INJURY	(M0TORCYCLE PASSENGER)	5-NOTAPP 9-DEPLOYI	LICABLE MENT UNKNO	WN	5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 - TALKING ON HANDS-FI COMMUNICATION DEV	REE	-TEST GIVEN, RE				
INJURED 1 - NOT TRANSP	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS	D TDAILED	4 - TALKING ON HAND-HE COMMUNICATION DEV	ICE	UNKNOWN				
/TREATED A	Part Constitution of the C	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJ	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH	IAN	ALCOHOL TE - NONE	ST TYPE			
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 NOTEJE	CTED LY EJECTED		H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9-LEARNER'S PER	МІТ	6 - PASSENGER		- BLOOD				
9 - OTHER / UNK	KNOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY			P - PASSENGER		RESTRICTIONS		7 - OTHER DISTRACTION INSIDE THE VEHICLE		- URINE - BREATH				
SAFETY E	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP	LICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DAY		8 - OTHER DISTRACTION		- OTHER				
1 - NONE USED	Charles and the state of the same	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	T	RAPPED		R. THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE	R	THE VEHICLE 9 - OTHER / UNKNOWN		DRUG TES	TTYPE			
2 - SHOULDER E 3 - LAP BELT ON	BELT ONLY USED	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA 2 - EXTRICA			S - SCHOOL BUS		13 - MECHANICAL DI (SPECIAL BRAK	ES, HAND		100	- NONE				
	& LAP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHAN	ICAL MEANS		T - DOUBLE & TRIPLE X - TANKER / HAZMAT		CONTROLS, OR O ADAPTIVE DEVI		1 - APPARENTLY NORMAL		- BLOOD - URINE				
5 - CHILD REST FORWARD FA	RAINT SYSTEM – ACING	13-TRAILING UNIT	3- FREED B NON-ME	Y Chanical Me	ANS	GENDER	hien hips	14 - MILITARY VEHICLE		2 - PHYSICAL IMPAIRMEN	1 4	-OTHER				
6 - CHILD REST REAR FACIN	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	I DONITW 6.	3 - EMOTIONAL (E.G., DEPR ANGRY, DISTURBED)		RUG TEST R	ESULT(S)			
7 - BOOSTER SE		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO 17 - PROSTHETIC AL		4 - ILLNESS		- AMPHETAMINE				
8 - HELMET US		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		18 - OTHER		5 - FELL ASLEEP, FAINTED FATIGUED, ETC.	3	- BARBITURATES - BENZODIAZEPII				
9 - PROTECTIVE (ELBOW, KNI										6 - UNDERTHE INFLUENC OF MEDICATIONS / DRU	E 4	- CANNABINOIDS				
10 - REFLECTIVE										/ALCOHOL 9-OTHER/UNKNOWN		- COCAINE - OPIATES / OPIOI	DS			
11 - LIGHTING - / BICYCLE O	NLY.									/- VITIEN, UNKNOWN		-OTHER				
99 - OTHER / UNK	CNOWN										8	- NEGATIVE RESU	JLTS			

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U	OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER							
Ť	•							2,0,2,4,-,0,0,1,2,7,6,9,							
	UNIT#		T, FIRST, MIDDLE						E OF BIRTH		AGE	GENDER			
	01	240 2002000	, JACOB, LEI		0 7 0 3 1 9 9 7 2 7 M										
OCCUPANT		STREET, CITY,		CONTACT PHONE - INCLUDE AREA CODE REDACTED PER ORC 149.43(A)(1)											
1000	936 CARLISLE CT 101, Kent, OH 44240 INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT														
Ē		_ TAKEN USED							0 6	1	1	1			
Н	UNIT# NAME: LAST, FIRST, MIDDLE								E OF BIRTH		AGE	GENDER			
	01 DUNN, MAESION, LEE							0 8 2 2 2 2 0 2 4 0 0 F							
ANT								CONTACT PHONE - INCLUDE AREA CODE							
OCCUPANT	936 CARLISLE CT 101 ,Kent ,OH 44240														
00	INJURIES	JURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT							DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPEL						
	5	TAKEN USED 0.6							0 4	11	1	1			
	UNIT#	NAME OF THE OWNER, OWNE	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER			
	02		ANCUSA, SUZ	AN, CAM	IILLE			$0 \cdot 5 \cdot 0$	3 1 9	5 4	7,0,	F_			
OCCUPANT		STREET, CITY,		T 011	44240			REDACT			1/0/2	2/Δ\/1\			
1000		INJURED	DR ,Brimfield	Twp ,OH		/	SAFETY EQUIPMENT	INLUACI	SEATING POSITION			. , , ,			
	5 I	TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	USED	DOT-COMPLIANT MC HELMET	0 3	AIK BAG USAG	1 I EJECTION	1			
Н	UNIT#		T, FIRST, MIDDLE				0,4	200 200 Pe 20 10 200 California	E OF BIRTH		AGE	GENDER			
	ONII #	NAME: LAS	I, FIRST, MIDDLE					DAI	E OF BIKIN		AGE	GENDER			
ANT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE							
OCCUPANT															
ŏ	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
		BY					U320	MC HELMET	ست	L	ـــا اـــــــا	نـــا			
		INJU	JRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG	USAGE				
Ä	1 - FATA		DIAMO IN IUDV	1 - NONE US VEHICLE	ED - OCCUPANT		T – LEFT SIDE ORCYCLE DRIV	ER)	1 - NOT DE						
E			RIOUS INJURY NOR INJURY	2 - SHOULDI	SHOULDER BELT ONLY USED 2 - FRONT - MIDDLE				2 - DEPLOYED FR						
		SIBLE INJU		3 - LAP BEL	LAP BELT ONLY USED 3 - FRONT - RIGHT SID 4 - SECOND - LEFT SID				YED BOTH						
Ŀ	5 - NO A	PPARENT	INJURY		4 - SHOULDER & LAP BELT USED (MOTORCYCLE PA				FRONT/SIDE						
	- UTV	INJURED	TAKEN BY		ESTRAINT SYSTEM – D FACING	DE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN									
	1 - NOT	TRANSPOR		6 - CHILD RI	ESTRAINT SYSTEM -										
		EATED AT S	CENE	REAR FA		CAR)	1 - NOT EJ	EJECT	ION						
	2 - EMS 3 - POLI			7 - BOOSTER 8 - HELMET				LY EJECTED							
		ER / UNKNO	DWN		TVE PADS USED		PERSECTION O	OF TRUCK CAB HER ENCLOSED 3 - TOTALLY E							
		GEI	NDER		KNEES, ETC.)	CARG	O AREA (NON-TR	TRAILING UNIT, 4 - NOT APPLICABLE							
	F-FEMA	LE			TVE CLOTHING G – PEDESTRIAN		ENGER IN UNE								
Ē	M - MALI	E R/UNKNO	MAN	/ BICYCL			O AREA								
Ē	0 - OTHE	.K / UNKNO	WIN	99- OTHER /	UNKNOWN	KNOWN 13 - TRAILING UNIT 14 - RIDING ON VEHICLE					ED BY MECHANICAL				
							TRAILING UNIT)		MEANS 3 - FREED BY NON-MECHANI			AL			
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S	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER			
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ΙM	ADDRESS	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE					
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