# Traffic Crash Report

Local Information

| Local Report Number * | Crash Severity | Hit/Skip |
|---|---|---|
| 2015417 9 | 3 (1 - Fatal, 2 - Injury, 3 - PDO) | (1 - Solved, 2 - Unsolved) |

☐ Photos Taken ☐ OH-2 ☐ OH-1P ☐ OH-3 ☐ Other

☐ PDO Under State Reportable Dollar Amount

☐ Private Property

Reporting Agency NCIC *: 01820

Reporting Agency Name *: GARFIELD HEIGHTS

Number of Units: 02

Unit in error: 02 (98 - Animal, 99 - Unknown)

County *: 18

☑ City * ☐ Village * ☐ Township *

City, Village, Township *: GARFIELD HTS

Crash Date *: 12152015

Time of Crash: 1743

Day of Week: TUE

Degrees / Minutes / Seconds — Latitude ___° ___ / ___.___ // Longitude - ___° ___ / ___.___ //

OR

Decimal Degrees — Latitude 41.424754 Longitude -81.573082

Roadway Division: ☑ Divided ☐ Undivided

Divided Lane Direction of Travel: W (N - Northbound, S - Southbound, E - Eastbound, W - Westbound)

Number of Thru Lanes: 05

**Road Types or Milepost** [2]: AL - Alley, AV - Avenue, BL - Boulevard, CR - Circle, CT- Court, DR - Drive, HE - Heights, HW - Highway, LA - Lane, MP - Milepost, PK - Parkway, PI - Pike, PL - Place, RD - Road, SQ - Square, ST - Street, TE - Terrace, TL - Trail, WA - Way

Location Route Type [1]: IR

Location Route Number: 480

Loc. Prefix: ☐ N,S, E,W

Location Road name

Location Road Type [2]

**Route Types** [1]: IR - Interstate Route (inc. turnpike), US - US Route, SR - State Route, CR - Numbered County Route, TR - Numbered Township Route

Distance From Reference: ☐ Miles ☐ Feet ☐ Yards

Dir From Ref: ☐ N,S, E,W

OF

Reference Route Type [1]: SR

Reference Route Number: 14

Ref Prefix: ☐ N,S, E,W

Reference Name (Road, Milepost, House #): EXIT

Reference Road Type [2]: RD

Reference Point Used: 1 (1 - Intersection, 2 - Mile Post, 3 - House Number)

Crash Location: 01 (01 - Not an intersection, 02 - Four-way Intersection, 03 - T-Intersection, 04 - Y-Intersection, 05 - Traffic Circle/Roundabout, 06 - Five-point, or more, 07 - On Ramp, 08 - Off Ramp, 09 - Crossover, 10 - Driveway/Alley Access, 11 - Railway Grade Crossing, 12 - Shared-Use Paths or Trails, 99 - Unknown)

☐ Intersection Related

Location of First Harmful Event: 1 (1 - On Roadway, 2 - On Shoulder, 3 - In Median, 4 - On Roadside, 5 - On Gore, 6 - Outside Trafficway, 9 - Unknown)

Road Contour: 1 (1 - Straight Level, 2 - Straight Grade, 3 - Curve Level, 4 - Curve Grade, 9 - Unknown)

Road Conditions — Primary: 02 Secondary: (01 - Dry, 02 - Wet, 03 - Snow, 04 - Ice, 05 - Sand, Mud, Dirt, Oil, gravel, 06 - Water (Standing, Moving), 07 - Slush, 08 - Debris*, 09 - Rut, Holes, Bumps, Uneven Pavement*, 10 - Other, 99 - Unknown) * Secondary Condition Only

Manner of Crash Collision/Impact: 2 (1 - Not Collision Between Two Motor Vehicles In Transport, 2 - Rear-End, 3 - Head-On, 4 - Rear-to-Rear, 5 - Backing, 6 - Angle, 7 - Sideswipe, Same Direction, 8 - Sideswipe, Opposite Direction, 9 - Unknown)

Weather: 4 (1 - Clear, 2 - Cloudy, 3 - Fog, Smog, Smoke, 4 - Rain, 5 - Sleet, Hail, 6 - Snow, 7 - Severe Crosswinds, 8 - Blowing Sand, Soil, Dirt, Snow, 9 - Other/Unknown)

Road Surface: 2 (1 - Concrete, 2 - Blacktop, Bituminous, Asphalt, 3 - Brick/Block, 4 - Slag, Gravel, Stone, 5 - Dirt, 6 - Other)

Light conditions — Primary: 4 Secondary: (1 - Daylight, 2 - Dawn, 3 - Dusk, 4 - Dark - Lighted Roadway, 5 - Dark - Roadway Not Lighted, 6 - Dark - Unknown Roadway Lighting, 7 - Glare*, 8 - Other, 9 - Unknown) * Secondary Condition Only

☐ School Zone Related

School Bus Related: ☐ Yes, School Bus Directly Involved ☐ Yes, School Bus Indirectly Involved

☐ Work Zone Related

☐ Workers Present ☐ Law Enforcement Present (Officer/Vehicle) ☐ Law Enforcement Present (Vehicle Only)

Type of Work Zone: 1 - Lane Closure, 2 - Lane Shift/Crossover, 3 - Work on Shoulder or Median, 4 - Intermittent or Moving Work, 5 - Other

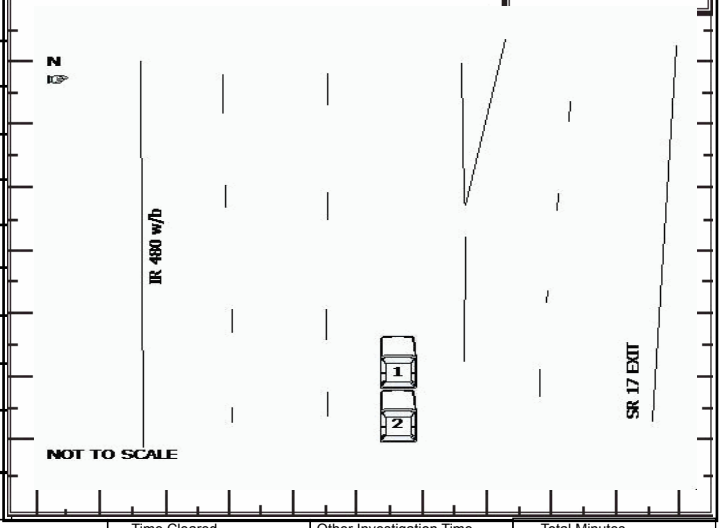
Location of Crash in Work Zone: 1 - Before the first Work Zone Warning Sign, 2 - Advance Warning Area, 3 - Transition Area, 4 - Activity Area, 5 - Termination Area

Narrative

UNIT 1 WAS W/B ON IR480 AT SR 14 EXIT IN LANE #3. UNIT 2 WAS BEHIND UNIT 1. UNIT 1 SLOWED TO A STOP IN HEAVY TRAFFIC AND UNIT 2 WAS UNABLE TO STOP IN TIME AND UNIT 2 STRUCK UNIT 1 IN THE REAR

Diagram

Write an "N" on the compass diagram to indicate the direction of north.




Report Taken By: ☑ Police Agency ☐ Motorist ☐ Supplement (Correction or Addition to an Existing Report Sent to ODPS)

| Date Crash Reported | Time Crash Reported | Dispatch Time | Arrival Time | Time Cleared | Other Investigation Time | Total Minutes |
|---|---|---|---|---|---|---|
| 12152015 | 1743 | 1744 | 1752 | 1820 | 40 | 68 |

| Officer's Name * | Officer's Badge Number | Checked By | Page of |
|---|---|---|---|
| B. Cwiklinski | 009 | S11 T. Vargo | |

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# Unit

Local Report Number *: 2 0 1 5 4 1 7 9

| Unit Number | Owner Name: Last, First, Middle | Owner Phone Number - inc. area code | Damage Scale |
|---|---|---|---|
| 0 2 | PARSONS CHRIS (☑ Same As Driver) | 216-533-9894 (☑ Same As Driver) | 4 |

Damage Scale: 1 - None; 2 - Minor; 3 - Functional; 4 - Disabling; 9 - Unknown

Damaged Area: Front 02; 09; 03; 08; 10; 04; 07; 05; 06; Rear

Owner Address, City, State, Zip (☑ Same As Driver): 507 MARTIN DR RICHMOND HTS VA 40476

| LP State | License Plate Number | Vehicle Identification Number | # Occupants |
|---|---|---|---|
| K Y | 143NPA | 2 H G E J 6 6 7 9 W H 5 8 6 8 3 0 | 0 1 |

| Vehicle Year | Vehicle Make | Vehicle Model | Vehicle Color |
|---|---|---|---|
| 1 9 9 8 | HOND Honda | CIV Civic (And Crx) | GRN Green |

| ☑ Proof of Insurance Shown | Insurance Company | Policy Number | Towed By |
|---|---|---|---|
| | NATIONWIDE | 6316D625968 | |

Carrier Name, Address, City, State, Zip

Carrier Phone - include area code

US DOT

HM Placard ID No.

HM Class Number

Vehicle Weight GVWR/GCWR
- 1 - Less Than or Equal to 10k Lbs.
- 2 - 10,001 to 26,000 Lbs
- 3 - More Than 26,000 Lbs.

☐ Hazardous Material Released

Cargo Body Type: 0 1
- 01 - No Cargo Body Type/Not Applicable
- 02 - Bus/Van(9-15 Seats, Inc.Driver)
- 03 - Bus(16+ Seats, Inc Driver)
- 04 - Vehicle Towing Another Vehicle
- 05 - Logging
- 06 - Intermodal Container Chassis
- 07 - Cargo Van/Enclosed Box
- 08 - Grain, Chips, Gravel
- 09 - Pole
- 10 - Cargo Tank
- 11 - Flat Bed
- 12 - Dump
- 13 - Concrete Mixer
- 14 - Auto Transporter
- 15 - Garbage/Refuse
- 99 - Other/Unknown

Trafficway Description: 4
- 1 - Two-Way, Not Divided
- 2 - Two-Way, Not Divided, Continuous Left Turn Lane
- 3 - Two-Way, Divided, Unprotected (Painted or Grass>4 Ft.) Median
- 4 - Two-Way, Divided, Positive Median Barrier
- 5 - One-Way Trafficway

☐ Hit / Skip Unit

Non-Motorist Location Prior to Impact
- 01 - Intersection - Marked Crosswalk
- 02 - Intersection - No Crosswalk
- 03 - Intersection - Other
- 04 - Midblock - Marked Crosswalk
- 05 - Travel Lane - Other Location
- 06 - Bicycle Lane
- 07 - Shoulder/Roadside
- 08 - Sidewalk
- 09 - Median/Crossing Island
- 10 - Driveway Access
- 11 - Shared-Use Path or Trail
- 12 - Non-Trafficway Area
- 99 - Other/Unknown

Type of Use: 1
- 1 - Personal
- 2 - Commercial
- 3 - Government

☐ In Emergency Response

Unit Type: 0 2
- 99 - Unknown or Hit/Skip

Passenger Vehicle (less than 9 passengers)
- 01 - Sub-Compact
- 02 - Compact
- 03 - Mid Size
- 04 - Full Size
- 05 - Minivan
- 06 - Sports Utility Vehicle
- 07 - Pickup
- 08 - Van
- 09 - Motorcycle
- 10 - Motorized Bicycle
- 11 - Snowmobile/ATV
- 12 - Other Passenger Vehicle

Med/Heavy Trucks or Combo Units>10k lbs
- 13 - Single Unit Truck or Van 2axle,6 tires
- 14 - Single Unit Truck 3+ axles
- 15 - Single Unit Truck/Trailer
- 16 - Truck/Tractor(Bobtail)
- 17 - Tractor/Semi-Trailer
- 18 - Tractor/Double
- 19 - Tractor/Triples
- 20 - Other Med/Heavy Vehicle

☐ Has HM Placard

Bus/Van/Limo (9 or More Including Driver)
- 21 - Bus/Van (9-15 Seats, Inc Driver)
- 22 - Bus(16+ Seats, Inc Driver)

Non-Motorist
- 23 - Animal with Rider
- 24 - Animal with Buggy, Wagon, Surrey
- 25 - Bicycle/Pedacyclist
- 26 - Pedestrian/Skater
- 27 - Other Non-Motorist

Special Function: 0 1
- 01 - None
- 02 - Taxi
- 03 - Rental Truck (Over 10K Lbs)
- 04 - Bus - School (Public or Private)
- 05 - Bus - Transit
- 06 - Bus - Charter
- 07 - Bus - Shuttle
- 08 - Bus - Other
- 09 - Ambulance
- 10 - Fire
- 11 - Highway/Maintenance
- 12 - Military
- 13 - Police
- 14 - Public Utility
- 15 - Other Government
- 16 - Construction Equip.
- 17 - Farm Vehicle
- 18 - Farm Equipment
- 19 - Motorhome
- 20 - Golf Cart
- 21 - Train
- 22 - Other (Explain in Narrative)

Most Damaged Area: 0 2

Impact Area: 0 2
- 01 - None
- 02 - Center Front
- 03 - Right Front
- 04 - Right Side
- 05 - Right Rear
- 06 - Rear Center
- 07 - Left Rear
- 08 - Left Side
- 09 - Left Front
- 10 - Top and Windows
- 11 - Undercarriage
- 12 - Load/Trailer
- 13 - Total (All Areas)
- 14 - Other
- 99 - Unknown

Action: 3
- 1 - Non-Contact
- 2 - Non-Collision
- 3 - Striking
- 4 - Struck
- 5 - Striking/Struck
- 9 - Unknown

Pre-Crash Actions: 0 1
- 99 - Unknown

Motorist
- 01 - Straight Ahead
- 02 - Backing
- 03 - Changing Lanes
- 04 - Overtaking/Passing
- 05 - Making Right Turn
- 06 - Making Left Turn
- 07 - Making U-Turn
- 08 - Entering Traffic Lane
- 09 - Leaving Traffic Lane
- 10 - Parked
- 11 - Slowing or Stopped in Traffic
- 12 - Driverless
- 13 - Negotiating a Curve
- 14 - Other Motorist Action

Non-Motorist
- 15 - Entering or Crossing Specified Location
- 16 - Walking, Running, Jogging, Playing, Cycling
- 17 - Working
- 18 - Pushing Vehicle
- 19 - Approaching or Leaving Vehicle
- 20 - Standing
- 21 - Other Non-Motorist Action

Contributing Circumstances

Primary: 0 9

Secondary: ☐☐

99 - Unknown

Motorist
- 01 - None
- 02 - Failure to Yield
- 03 - Ran Red Light
- 04 - Ran Stop Sign
- 05 - Exceeded Speed Limit
- 06 - Unsafe Speed
- 07 - Improper Turn
- 08 - Left of Center
- 09 - Followed Too Closely/ACDA
- 10 - Improper Lane Change /Passing/Off Road
- 11 - Improper Backing
- 12 - Improper Start From Parked Position
- 13 - Stopped or Parked Illegally
- 14 - Operating Vehicle in Negligent Manner
- 15 - Swerving to Avoid (Due to External Conditions)
- 16 - Wrong Side/Wrong Way
- 17 - Failure to Control
- 18 - Vision Obstruction
- 19 - Operating Defective Equipment
- 20 - Load Shifing/Falling/Spilling
- 21 - Other Improper Action

Non-Motorist
- 22 - None
- 23 - Improper Crossing
- 24 - Darting
- 25 - Lying and/or Illegally in Roadway
- 26 - Failure to Yield Right of Way
- 27 - Not Visible (Dark Clothing)
- 28 - Inattentive
- 29 - Failure to Obey Traffic Signs /Signals/Officer
- 30 - Wrong Side of the Road
- 31 - Other Non-Motorist Action

Vehicle Defects: ☐☐
- 01 - Turn Signals
- 02 - Head Lamps
- 03 - Tail Lamps
- 04 - Brakes
- 05 - Steering
- 06 - Tire Blowout
- 07 - Worn or Slick tires
- 08 - Trailer Equipment Defective
- 09 - Motor Trouble
- 10 - Disabled From Prior Accident
- 11 - Other Defects

Sequence of Events

1: 2 0 2: ☐☐ 3: ☐☐ 4: ☐☐ 5: ☐☐ 6: ☐☐

First Harmful Event: 1 Most Harmful Event: 1

99 - Unknown

**Non-Collision Events**
- 01 - Overturn/Rollover
- 02 - Fire/Explosion
- 03 - Immersion
- 04 - Jackknife
- 05- Cargo/Equipment Loss or Shift
- 06 - Equipment Failure (Blown Tire, Brake Failure, etc)
- 07 - Separation of Units
- 08 - Ran Off Road Right
- 09 - Ran Off Road Left
- 10 - Cross Median
- 11 - Cross Center Line Opposite Direction of Travel
- 12 - Downhill Runaway
- 13 - Other Non-Collision

**Collision with Person, Vehicle or Object Not Fixed**
- 14 - Pedestrian
- 15 - Pedalcycle
- 16 - Railway Vehicle (Train,Engine)
- 17 - Animal - Farm
- 18 - Animal - Deer
- 19 - Animal - Other
- 20 - Motor Vehicle in Transport
- 21 - Parked Motor Vehicle
- 22 - Work Zone Maintenance Equipment
- 23 - Struck by Falling, Shifting Cargo or Anything Set in Motion by a Motor Vehicle
- 24 - Other Movable Object

**Collision With Fixed Object**
- 25 - Impact Attenuator/Crash Cushion
- 26 - Bridge Overhead Structure
- 27 - Bridge Pier or Abutment
- 28 - Bridge Parapet
- 29 - Bridge Rail
- 30 - Guardrail Face
- 31 - Guardrail End
- 32 - Portable Barrier
- 33 - Median Cable Barrier
- 34 - Median Guardrail Barrier
- 35 - Median Concrete Barrier
- 36 - Median Other Barrier
- 37 - Traffic Sign Post
- 38 - Overhead Sign Post
- 39 - Light/Luminaries Support
- 40 - Utility Pole
- 41 - Other Post, Pole or Support
- 42 - Culvert
- 43 - Curb
- 44 - Ditch
- 45 - Enbankment
- 46 - Fence
- 47 Mailbox
- 48 - Tree
- 49 - Fire Hydrant
- 50 - Work Zone Maintenance Equipment
- 51 - Wall, Building, Tunnel
- 52 - Other Fixed Object

Unit Speed: 2 5
- ☑ Stated
- ☐ Estimated

Posted Speed: 6 0

Traffic Control: 0 1
- 01 - No Controls
- 02 - Stop Sign
- 03 - Yield Sign
- 04 - Traffic Signal
- 05 - Traffic Flashers
- 06 - School Zone
- 07 - Railroad Crossbucks
- 08 - Railroad Flashers
- 09 - Railroad Gates
- 10 - Construction Barricade
- 11 - Person (Flagger, Officer)
- 12 - Pavement Markings
- 13 - Crosswalk Lines
- 14 - Walk/Don't Walk
- 15 - Other
- 16 - Not Reported

Unit Direction: From 3 To 4
- 1 - North
- 2 - South
- 3 - East
- 4 - West
- 5 - Northeast
- 6 - Northwest
- 7 - Southeast
- 8 - Southwest
- 9 - Unknown



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# Unit

Local Report Number *: 2015417 9

Unit Number: 01

Owner Name: Last, First, Middle: MORGAN JACQUELYN M (☑ Same As Driver)

Owner Phone Number - inc. area code: 203-376-7375 (☑ Same As Driver)

Damage Scale: 3
1 - None
2 - Minor
3 - Functional
4 - Disabling
9 - Unknown

Damaged Area: 02, 03, 04, 05, 06, 07, 08, 09, 10

Owner Address, City, State, Zip (☑ Same As Driver): 9878 TURNING LEAF TRL BRECKSVILLE OH 44141 3343

LP State: OH
License Plate Number: GHX4759
Vehicle Identification Number: 5FNYF4H98FB013519
# Occupants: 01

Vehicle Year: 2015
Vehicle Make: HOND Honda
Vehicle Model: PLT Pilot
Vehicle Color: BLK Black

☑ Proof of Insurance Shown
Insurance Company: USAA
Policy Number: 015682042U
Towed By:

Carrier Name, Address, City, State, Zip:
Carrier Phone - include area code:

US DOT:
HM Placard ID No.:
HM Class Number:

Vehicle Weight GVWR/GCWR:
1 - Less Than or Equal to 10k Lbs.
2 - 10,001 to 26,000 Lbs
3 - More Than 26,000 Lbs.

☐ Hazardous Material Released

Cargo Body Type: 01
01 - No Cargo Body Type/Not Applicable
02 - Bus/Van(9-15 Seats, Inc.Driver)
03 - Bus(16+ Seats, Inc Driver)
04 - Vehicle Towing Another Vehicle
05 - Logging
06 - Intermodal Container Chassis
07 - Cargo Van/Enclosed Box
08 - Grain, Chips, Gravel
09 - Pole
10 - Cargo Tank
11 - Flat Bed
12 - Dump
13 - Concrete Mixer
14 - Auto Transporter
15 - Garbage/Refuse
99 - Other/Unknown

Trafficway Description: 4
1 - Two-Way, Not Divided
2 - Two-Way, Not Divided, Continuous Left Turn Lane
3 - Two-Way, Divided, Unprotected (Painted or Grass>4 Ft.) Median
4 - Two-Way, Divided, Positive Median Barrier
5 - One-Way Trafficway

☐ Hit / Skip Unit

Non-Motorist Location Prior to Impact:
01 - Intersection - Marked Crosswalk
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07 - Shoulder/Roadside
08 - Sidewalk
09 - Median/Crossing Island
10 - Driveway Access
11 - Shared-Use Path or Trail
12 - Non-Trafficway Area
99 - Other/Unknown

Type of Use: 1
1 - Personal
2 - Commercial
3 - Government

☐ In Emergency Response

Unit Type: 06
99 - Unknown or Hit/Skip

Passenger Vehicle (less than 9 passengers)
01 - Sub-Compact
02 - Compact
03 - Mid Size
04 - Full Size
05 - Minivan
06 - Sports Utility Vehicle
07 - Pickup
08 - Van
09 - Motorcycle
10 - Motorized Bicycle
11 - Snowmobile/ATV
12 - Other Passenger Vehicle

Med/Heavy Trucks or Combo Units>10k lbs
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18 - Tractor/Double
19 - Tractor/Triples
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☐ Has HM Placard

Bus/Van/Limo (9 or More Including Driver)
21 - Bus/Van (9-15 Seats, Inc Driver)
22 - Bus(16+ Seats, Inc Driver)

Non-Motorist
23 - Animal with Rider
24 - Animal with Buggy, Wagon, Surrey
25 - Bicycle/Pedacyclist
26 - Pedestrian/Skater
27 - Other Non-Motorist

Special Function: 01
01 - None
02 - Taxi
03 - Rental Truck (Over 10K Lbs)
04 - Bus - School (Public or Private)
05 - Bus - Transit
06 - Bus - Charter
07 - Bus - Shuttle
08 - Bus - Other
09 - Ambulance
10 - Fire
11 - Highway/Maintenance
12 - Military
13 - Police
14 - Public Utility
15 - Other Government
16 - Construction Equip.
17 - Farm Vehicle
18 - Farm Equipment
19 - Motorhome
20 - Golf Cart
21 - Train
22 - Other (Explain in Narrative)

Most Damaged Area: 06
01 - None
02 - Center Front
03 - Right Front
04 - Right Side
05 - Right Rear
06 - Rear Center
07 - Left Rear
08 - Left Side
09 - Left Front
10 - Top and Windows
11 - Undercarriage
12 - Load/Trailer
13 - Total (All Areas)
14 - Other
99 - Unknown

Impact Area: 06

Action: 4
1 - Non-Contact
2 - Non-Collision
3 - Striking
4 - Struck
5 - Striking/Struck
9 - Unknown

Pre-Crash Actions: 11
99 - Unknown

Motorist
01 - Straight Ahead
02 - Backing
03 - Changing Lanes
04 - Overtaking/Passing
05 - Making Right Turn
06 - Making Left Turn
07 - Making U-Turn
08 - Entering Traffic Lane
09 - Leaving Traffic Lane
10 - Parked
11 - Slowing or Stopped in Traffic
12 - Driverless
13 - Negotiating a Curve
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Non-Motorist
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16 - Walking, Running, Jogging, Playing, Cycling
17 - Working
18 - Pushing Vehicle
19 - Approaching or Leaving Vehicle
20 - Standing
21 - Other Non-Motorist Action

Contributing Circumstances

Primary: 01
Secondary:
99 - Unknown

Motorist
01 - None
02 - Failure to Yield
03 - Ran Red Light
04 - Ran Stop Sign
05 - Exceeded Speed Limit
06 - Unsafe Speed
07 - Improper Turn
08 - Left of Center
09 - Followed Too Closely/ACDA
10 - Improper Lane Change /Passing/Off Road
11 - Improper Backing
12 - Improper Start From Parked Position
13 - Stopped or Parked Illegally
14 - Operating Vehicle in Negligent Manner
15 - Swerving to Avoid (Due to External Conditions)
16 - Wrong Side/Wrong Way
17 - Failure to Control
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19 - Operating Defective Equipment
20 - Load Shifing/Falling/Spilling
21 - Other Improper Action

Non-Motorist
22 - None
23 - Improper Crossing
24 - Darting
25 - Lying and/or Illegally in Roadway
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27 - Not Visible (Dark Clothing)
28 - Inattentive
29 - Failure to Obey Traffic Signs /Signals/Officer
30 - Wrong Side of the Road
31 - Other Non-Motorist Action

Vehicle Defects:
01 - Turn Signals
02 - Head Lamps
03 - Tail Lamps
04 - Brakes
05 - Steering
06 - Tire Blowout
07 - Worn or Slick tires
08 - Trailer Equipment Defective
09 - Motor Trouble
10 - Disabled From Prior Accident
11 - Other Defects

Sequence of Events
1: 20 2: 3: 4: 5: 6:
First Harmful Event: 1
Most Harmful Event: 1
99 - Unknown

**Non-Collision Events**
01 - Overturn/Rollover
02 - Fire/Explosion
03 - Immersion
04 - Jackknife
05- Cargo/Equipment Loss or Shift
06 - Equipment Failure (Blown Tire, Brake Failure, etc)
07 - Separation of Units
08 - Ran Off Road Right
09 - Ran Off Road Left
10 - Cross Median
11 - Cross Center Line Opposite Direction of Travel
12 - Downhill Runaway
13 - Other Non-Collision

**Collision with Person, Vehicle or Object Not Fixed**
14 - Pedestrian
15 - Pedalcycle
16 - Railway Vehicle (Train,Engine)
17 - Animal - Farm
18 - Animal - Deer
19 - Animal - Other
20 - Motor Vehicle in Transport
21 - Parked Motor Vehicle
22 - Work Zone Maintenance Equipment
23 - Struck by Falling, Shifting Cargo or Anything Set in Motion by a Motor Vehicle
24 - Other Movable Object

**Collision With Fixed Object**
25 - Impact Attenuator/Crash Cushion
26 - Bridge Overhead Structure
27 - Bridge Pier or Abutment
28 - Bridge Parapet
29 - Bridge Rail
30 - Guardrail Face
31 - Guardrail End
32 - Portable Barrier
33 - Median Cable Barrier
34 - Median Guardrail Barrier
35 - Median Concrete Barrier
36 - Median Other Barrier
37 - Traffic Sign Post
38 - Overhead Sign Post
39 - Light/Luminaries Support
40 - Utility Pole
41 - Other Post, Pole or Support
42 - Culvert
43 - Curb
44 - Ditch
45 - Enbankment
46 - Fence
47 Mailbox
48 - Tree
49 - Fire Hydrant
50 - Work Zone Maintenance Equipment
51 - Wall, Building, Tunnel
52 - Other Fixed Object

Unit Speed: 0
☑ Stated
☐ Estimated

Posted Speed: 60

Traffic Control: 01
01 - No Controls
02 - Stop Sign
03 - Yield Sign
04 - Traffic Signal
05 - Traffic Flashers
06 - School Zone
07 - Railroad Crossbucks
08 - Railroad Flashers
09 - Railroad Gates
10 - Construction Barricade
11 - Person (Flagger, Officer)
12 - Pavement Markings
13 - Crosswalk Lines
14 - Walk/Don't Walk
15 - Other
16 - Not Reported

Unit Direction
From 3 To 4
1 - North
2 - South
3 - East
4 - West
5 - Northeast
6 - Northwest
7 - Southeast
8 - Southwest
9 - Unknown



HSY8304 OH1U (Rev 01/12)

# Motorist / Non-Motorist / Occupant

Local Report Number *: 2015417 9

## Motorist/Non-Motorist

| Unit Number | Name: Last, First, Middle | Date of Birth | Age | Gender |
|---|---|---|---|---|
| 02 | PARSONS CHRIS | 11151980 | 35 | M (F - Female, M - Male) |

| Address, City, State, Zip | Contact Phone - include area code |
|---|---|
| 507 MARTIN DR RICHMOND HTS VA 40476 | 216-533-9894 |

| Injuries | Injured Taken By | EMS Agency | Medical Facility Injured Taken To | Safety Equipment Used | DOT Compliant Motorcycle Helmet | Seating Position | Air Bag Usage | Ejection | Trapped |
|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | 04 | ☐ | 01 | 1 | 1 | 1 |

| OL State | Operator License Number | OL Class | No Valid OL | M/C End | Condition | Alcohol/Drug Suspected | Alcohol Test Status | Alcohol Test Type | Alcohol Test Value | Drug Test Status | Drug Test Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| KY | P96892019 | | ☐ | ☐ | 1 | 1 | 1 | 1 | . | 1 | 1 |

| Offense Charged (☐ Local Code) | Offense Description | Citation Number | Hands-Free Device Used | Driver Distracted By |
|---|---|---|---|---|
| 333.03 | ACDA | | ☐ | 1 |

## Motorist/Non-Motorist

| Unit Number | Name: Last, First, Middle | Date of Birth | Age | Gender |
|---|---|---|---|---|
| 01 | MORGAN JACQUELYN M | 03181976 | 39 | F (F - Female, M - Male) |

| Address, City, State, Zip | Contact Phone - include area code |
|---|---|
| 9878 TURNING LEAF TRL BRECKSVILLE OH 44141 3343 | 203-376-7375 |

| Injuries | Injured Taken By | EMS Agency | Medical Facility Injured Taken To | Safety Equipment Used | DOT Compliant Motorcycle Helmet | Seating Position | Air Bag Usage | Ejection | Trapped |
|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | 04 | ☐ | 01 | 1 | 1 | 1 |

| OL State | Operator License Number | OL Class | No Valid OL | M/C End | Condition | Alcohol/Drug Suspected | Alcohol Test Status | Alcohol Test Type | Alcohol Test Value | Drug Test Status | Drug Test Type |
|---|---|---|---|---|---|---|---|---|---|---|---|
| OH | TM644782 | 4 | ☐ | ☐ | 1 | 1 | 1 | 1 | . | 1 | 1 |

| Offense Charged (☐ Local Code) | Offense Description | Citation Number | Hands-Free Device Used | Driver Distracted By |
|---|---|---|---|---|
| | | | ☐ | 1 |

**Injuries**
1 - No Injury/None Reported
2 - Possible
3 - Non-Incapacitating
4 - Incapacitating
5 - Fatal

**Injured Taken By**
1 - Not Transported / Treated at Scene
2 - EMS
3 - Police
4 - Other
9 - Unknown

**Safety Equipment Used**
99 - Unknown Safety Equipment

**Motorist**
01 - None Used - Vehicle Occupant
02 - Shoulder Belt Only Used
03 - Lap Belt Only Used
04 - Shoulder Belt and Lap Belt Used
05 - Child Restraint System-Forward Facing
06 - Child Restraint System-Rear Facing
07 - Booster Seat
08 - Helmet Used

**Non-Motorist**
09 - None Used
10 - Helmet Used
11 - Protective Pads Used (Elbows, Knees, Etc)
12 - Reflective Clothing
13 - Lighting
14 - Other

**Seating Position**
01 - Front - Left Side (Motorcycle Driver)
02 - Front - Middle
03 - Front - Right Side
04 - Second - Left Side (Motorcycle Passenger)
05 - Second - Middle
06 - Second - Right Side
07 - Third - Left Side (Motorcycle Side Car)
08 - Third - Middle
09 - Third - Right Side
10 - Sleeper Section of Cab (Truck)
11 - Passenger in Other Enclosed Cargo Area (Non-Trailing Unit Such as a Bus, Pick-up with Cab)
12 - Passenger in Unenclosed Cargo Area
13 - Trailing Unit
14 - Riding on Vehicle Exterior (Non-Trailing Unit)
15 - Non-Motorist
16 - Other
99 - Unknown

**Air Bag Usage**
1 - Not Deployed
2 - Deployed Front
3 - Deployed Side
4 - Deployed Both Front/Side
5 - Not Applicable
9 - Deployment Unknown

**Ejection**
1 - Not Ejected
2 - Totally Ejected
3 - Partially Ejected
4 - Not Applicable

**Trapped**
1 - Not Trapped
2 - Extricated by Mechanical Means
3 - Extricated by Non-Mechanical Means

**Operator License Class**
1 - Class A
2 - Class B
3 - Class C
4 - Regular Class (Ohio is "D")
5 - MC/Moped Only

**Condition**
1 - Apparently Normal
2 - Physical Impairment
3 - Emotional (Depressed, Angry, Disturbed)
4 - Illness
5 - Fell Asleep, Fainted, Fatigued
6 - Under The Influence of Medications, Drugs, Alcohol
7 - Other

**Alcohol/Drug Suspected**
1 - None
2 - Yes - Alcohol Suspected
3 - Yes - HBD Not Impaired
4 - Yes - Drugs Suspected
5 - Yes - Alcohol and Drugs Suspected

**Alcohol Test Status**
1 - None Given
2 - Test Refused
3 - Test Given, Contaminated Sample/Unusable
4 - Test Given, Results Known
5 - Test Given, Results Unknown

**Alcohol Test Type**
1 - None
2 - Blood
3 - Urine
4 - Breath
5 - Other

**Drug Test Status**
1 - None Given
2 - Test Refused
3 - Test Given, Contaminated Sample/Unusable
4 - Test Given, Results Known
5 - Test Given, Results Unknown

**Drug Test Type**
1 - None
2 - Blood
3 - Urine
4 - Other

**Driver Distracted By**
1 - No Distraction Reported
2 - Phone
3 - Texting/E-mailing
4 - Electronic Communication Device
5 - Other Electronic Device (Navigation Device, Radio, DVD)
6 - Other Inside the Vehicle
7 - External Distraction

## Occupant

| Unit Number | Name: Last, First, Middle | Date of Birth | Age | Gender |
|---|---|---|---|---|
| | | | | F - Female, M - Male |

| Address, City, State, Zip | Contact Phone - include area code |
|---|---|
| | |

| Injuries | Injured Taken By | EMS Agency | Medical Facility Injured Taken To | Safety Equipment Used | DOT Compliant Motorcycle Helmet | Seating Position | Air Bag Usage | Ejection | Trapped |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | ☐ | | | | |

## Occupant

| Unit Number | Name: Last, First, Middle | Date of Birth | Age | Gender |
|---|---|---|---|---|
| | | | | F - Female, M - Male |

| Address, City, State, Zip | Contact Phone - include area code |
|---|---|
| | |

| Injuries | Injured Taken By | EMS Agency | Medical Facility Injured Taken To | Safety Equipment Used | DOT Compliant Motorcycle Helmet | Seating Position | Air Bag Usage | Ejection | Trapped |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | ☐ | | | | |