Crash Report		Report Number * Crash Severity							
ESNOCHINE - BENGG - PRINTENSH  Local Information		2 0	1 7 4 2	2 5 6	3   2	- Fatal 1 - Solved 2 - Unsolved 2 - Unsolved			
State Property	rting Agency NCIC * Rep	oorting Agency Na	ime *		II .	nber of Unit in error			
☑ OH-2         ☐ OH-1P         State Reportable         Property         ☐ O	820 GA	RFIELD H	IEIGHTS		0 2	0 2 98 - Animal 99 - Unknown			
County *	·			Crash Date *		of Crash Day of Week			
Village * □ Township *				1 1 2 4 2 0	1 7 1	5 4 1   FRI			
Degrees / Minutes / Seconds Latitude Longitude	,		0	Decimal Degrees Latitude	Lo	ongitude			
4 1 ° 2 5 ′ 2 0 3 5 ″ - 8 1 °	° 3 6 7 3 5	<u> </u>	<sup>/</sup> R	<u> </u>		<u> </u> .			
Roadway Division  ☐ Divided ☐ Divided ☐ Undivided ☐ Undivided ☐ Divided ☐ S - Southbound ☐ W - Westbound	Number of Thru Lanes	Road Types or N AL - Alley AV - Avenue BL - Boulevard	CR - Circle CT- Court DR - Drive	HE - Heights MP - Mil HW - Highway PK - Par LA - Lane PI - Pik	kway RD - Road	ST - Street WA - Way TE - Terrace e TL - Trail			
Location Route Number N,S,	ocation Road name		RC	Road Luc Luc .	1 oute (inc. turnpike) e	CR - Numbered County Route TR - Numbered Township Route			
Distance From Reference  ☑ Miles ∴1 □ Feet □ Yards □ N,S, E,W □ F □ N,S, F		Number Ref	<b>T</b> NS	erence Name (Road, Milepost, H	ouse #)	R D Reference Road Type <sup>2</sup>			
Reference Point Used 1 - Intersection 2 - Mile Post 3 - House Number  Crash Location 01 - Not an intersection 02 - Four-way Intersection 03 - T-Intersection 04 - Y-Intersection 05 - Traffic Circle/Roundab	06 - Five-point, or mo 07 - On Ramp 08 - Off Ramp 09 - Crossover out 10 - Driveway/Alley A	12 - S 99 - L	Railway Grade Cro Shared-Use Paths Trails Jnknown	ossing Intersection	ocation of First Harmful 1 - On Roadw 2 - On Should 3 - In Median 4 - On Roadsi	ay 5 - On Gore er 6 - Outside Trafficway 9 - Unknown			
Road Contour  1 - Straight Level 4 - Curve Grade 2 - Straight Grade 3 - Curve Level  Road Conditions Primary  0 1	Secondary	01 - Dry 02 - Wet 03 - Snow 04 - Ice		Standing, Moving) 10 - 0	Rut, Holes, Bumps, Une Pavement* Other Unknown	* Secondary Condition Only			
Manner of Crash Collision/Impact  1 - Not Collision Between Two Motor Vehicles In Transport  2 - Rear-End 3 - Head-On 4 - Rear-to-Rear 7 - Sideswipe, Sa	Direc		1	2 - Cloudy 5 -	Sleet, Hail 8 - B	evere Crosswinds lowing Sand, Soil, Dirt, Snow lther/Unknown			
Road Surface  2 1 - Concrete 4 - Slag, Gravel, 2 - Blacktop, Bituminous, Asphalt 5 - Dirt 3 - Brick/Block 6 - Other	Secondary 1 - Daylig 2 - Dawn 3 - Dusk 4 - Dark -		6 - Dark 7 - Glare		9 - Unknown	School Bus Related  Yes, School Bus Directly Involved  Yes, School Bus Indirectly Involved			
Work Workers Present Type of Work Zone  Law Enforcement Present (Officer/Vehicle)  Law Enforcement Present (Officer/Vehicle)  Law Enforcement Present (Vehicle Only)  1 - Lane Closu 2 - Lane Shiff// 3 - Work on Sh		- Intermittent or M - Other	loving Work	Location of Crash in Work Zon  1 - Before the first Wor 2 - Advance Warning A 3 - Transition Area	k Zone Warning Sign	4 - Activity Area 5 - Termination Area			
UNIT # 1 WAS EASTBOUND ON MCCRACK	EN RD. UNIT#2		Diagr	am	<u>. I . I .</u>	Write an "N" on the			
WAS WESTBOUND, WHEN IT VEERED LEF	T OF CENTER					compass diagram to indicate the direction of north.			
AND STRUCK UNIT #2. UNIT #2 THEN LEF	T THE SCENE								
WITHOUT STOPPING.			_			North_			
			McCrac	ken Road					
			_			+			
			<b> </b>	eg.					
						-			
Report Taken By	plament (O		Diagran	n not to scale					
☑ Police Agency ☐ Motorist ☐ an E	plement (Correction or Addition to existing Report Sent to ODPS)			Time Cleared	Other Investigation Tim	e Total Minutes			
Date Crash Reported   Time Crash Reported   1   1   2   4   2   0   1   7     1   5   4   1	Dispatch Time	Arrival Time	<u> </u>	1 6 3 5	0	4 6			
Officer's Name * B. Foxx		Officer's Badg	je Number	Checked By S14 M. Berdys	27	Page of			

OHIO SINGLE SIPPLIES			Report Number * 2 0 1 7 4	2 5 6								
Unit Number Owner Name: Last, First, Middle	( Same As Driver)											
0 1 SABO EDWARD	216-544-4039			2 Front								
Owner Address, City, State, Zip ( Same A	OH 44125	5 3748	None 09 02 03									
LP State License Plate Number	State License Plate Number Vehicle Identification Number											
O H DVT4394	1 F T P X 1 4 V 7 6		0 1	08   10   04								
Vehicle Year Vehicle Make	Vehicle Model	Vehicle Color										
Proof of Insurance Company	F15 F150 Series	GRY Gray	y 4 - [	Disabling 07 06 05								
☑ Insurance Shown ALLSTATE	092 330 387		9 - 1	Unknown								
Carrier Name, Address, City, State, Zip	•	•	(	Carrier Phone - include area code								
US DOT Vehicle Weight GVWR/GCWR	Cargo Body Type  1.		rafficway Description  1 - Two-Way, Not Di	ivided								
2 - 10,001 to 26,000 Lbs.  HM Placard ID No.  3 - More Than 26,000 Lbs.	0 1 02 - Bus/Van(9-15 Seats, Inc.Driver) 03 - Bus(16+ Seats, Inc Driver)	10 - Cargo Tank 11 - Flat Bed	2 - Two-Way, Not Di	ivided, Continuous Left Turn Lane ed, Unprotected (Painted or Grass>4 Ft.) Median								
Hazardous Material	04 - Vehicle Towing Another Vehicle 05 - Logging	12 - Dump 13 - Concrete Mixer	4 - Two-Way, Divide 5 - One-Way Traffice	ed, Positive Median Barrier way								
HM Class Number	06 - Intermodal Container Chassis 07 - Cargo Van/Enclosed Box 08 - Grain, Chips, Gravel	14 - Auto Transporter 15 - Garbage/Refuse 99 - Other/Unknown	Hit / Skip Unit									
Non-Motorist Location Prior to Impact  Type of U		sengers) Med/Heavy Trucks or	Combo Units>10k lbs	Bus/Van/Limo (9 or More Including Driver)								
01 - Intersection - Marked Crosswalk 02 - Intersection - No Crosswalk 03 - Intersection - Other	01 - Sub-Compact	13 - Single Unit Trucl 14 - Single Unit Trucl		21 - Bus/Van (9-15 Seats, Inc Driver) 22 - Bus(16+ Seats, Inc Driver)								
04 - Midblock - Marked Crosswalk 05 - Travel Lane - Other Location 1 - Perso	onal 99 - Unknown 03 - Mid Size 04 - Full Size	15 - Single Unit Trucl 16 - Truck/Tractor(Bo	k/Trailer	Non-Motorist								
06 - Bicycle Lane 2 - Comr 07 - Shoulder/Roadside 3 - Gove	rnment 06 - Sports Utility Vehicle	17 - Tractor/Semi-Tra 18 - Tractor/Double	ailer	23 - Animal with Rider								
08 - Sidewalk 09 - Median/Crossing Island	07 - Pickup 08 - Van	19 - Tractor/Triples 20 - Other Med/Heav	riples 24 - Animal with Buggy, Wagor									
10 - Driveway Access ☐ In Em 11 - Shared-Use Path or Trail Respo		□ Has HM	1 Placard	26 - Pedestrian/Skater 27 - Other Non-Motorist								
12 - Non-Trafficway Area 99 - Other/Unknown	12 - Other Passenger Vehicle		T T Ideal d	Action								
02 - Taxi 10 - Fi 03 - Rental Truck (Over 10K Lbs) 11 - Hi 04 - Bus - School (Public or Private) 12 - M 05 - Bus - Transit 13 - Pc 06 - Bus - Charter 14 - Pc	ghway/Maintenance         19 - Motorhome           lilitary         20 - Golf Cart           plice         21 - Train           ublic Utility         22 - Other (Explain in Narretive)	Most Damaged Area  01 - None 02 - Center Front 03 - Right Front 04 - Right Side 05 - Right Rear	Front 10 - Top and Windows Side 11 - Undercarriage 4 - Struck Rear 12 - Load/Trailer 5 - Striking/Struck									
	ther Government onstruction Equip.	0 9 06 - Rear Center 07 - Left Rear	13 - Total (All Areas) 14 - Other	9 - Unknown								
02 - Backing 08 - En 03 - Changing Lanes 09 - Le	aking U-Turn 13 - Negotiating a Curve tering Traffic Lane 14 - Other Motorist Action aving Traffic Lane	n 16 - Walking, Runn 17 - Working	ossing Specified Location ning, Jogging, Playing, Cy									
	irked owing or Stopped in Traffic iverless	18 - Pushing Vehic 19 - Approaching c 20 - Standing										
Contributing Circumstances			,	Vehicle Defects								
Primary Motorist 01 - None	11 - Improper Backing	Non-Motorist 22 - None		01 - Turn Signals 02 - Head Lamps								
0 1 02 - Failure to Yield 03 - Ran Red Light	12 - Improper Start From Parked Position 13 - Stopped or Parked Illegally	23 - Improper Crossing 24 - Darting 25 - Lying and/or Illegally in Roadway 05 - Steering										
Secondary  04 - Ran Stop Sign  05 - Exceeded Speed Limit  06 - Unsafe Speed	<ul> <li>14 - Operating Vehicle in Negligent Manner</li> <li>15 - Swerving to Avoid (Due to External Conditions)</li> <li>16 - Wrong Side/Wrong Way</li> </ul>	gent wanter 25 Eying undror megany in reducing										
07 - Improper Turn	17 - Failure to Control  18 - Vision Obstruction	28 - Inattentive 29 - Failure to Obey Traffic	28 - Inattentive 08 - Trailer Equipment Defective									
99 - Unknown 09 - Followed Too Closely/ACDA 10 - Improper Lane Change	19 - Operating Defective Equipment 20 - Load Shifing/Falling/Spilling	/Signals/Officer 30 - Wrong Side of the Ro	nals/Officer 10 - Disabled From Prior Accident									
/Passing/Off Road Sequence of Events	21 - Other Improper Action  Non-Collision Events	31 - Other Non-Motorist A	ction									
1 3 4 5	Non-Collision Events  01 - Overturn/Rollover 02 - Fire/Explosion	06 - Equipment Failure (Blown Tire, Brake Failure, e	10 - Cross Me									
2 0	03 - Immersion 04 - Jackknife	07 - Separation of Units 08 - Ran Off Road Right		Direction of Travel								
Harmful 1 Harmful 1 Event	05- Cargo/Equipment Loss or Si		13 - Other No									
Collision with Person, Vehicle or Object Not Fixed  14 - Pedestrian  21 - Parked Motor Vehicle Collision C		shion 33 - Median Cable Barrie 34 - Median Guardrail Ba										
15 - Pedalcycle 22 - Work Zone Mainter 16 - Railway Vehicle (Train,Engine) 23 - Struck by Falling, S 17 - Animal - Farm or Anything Set in I	Shifting Cargo 27 - Bridge Pier or Abutment	35 - Median Guardian Ba 35 - Median Concrete Ba 36 - Median Other Barrie	arrier 42 - Culvert	•								
18 - Animal - Deer Motor Vehicle 19 - Animal - Other 24 - Other Movable Obj	29 - Bridge Rail	37 - Traffic Sign Post 38 - Overhead Sign Pos	44 - Ditch	51 - Wall, Building, Tunnel								
20 - Motor Vehicle in Transport	31 - Guardrail End 32 - Portable Barrier	39 - Light/Luminaries Su 40 - Utility Pole		· 								
Unit Speed Posted Speed Traffic Control			Unit Direction	1 - North 5 - Northeast 9 - Unknown								
2 5 1 5 01 - No C 02 - Stop 03 - Yield	Sign 08 - Railroad Flashers	13 - Crosswalk Lines 14 - Walk/Don't Walk	From 4 To	3 2 - South 6 - Northwest 3 - East 7 - Southeast								
☑ Stated 04 - Traffi		15 - Other 16 - Not Reported		4 - West 8 - Southwest								
Listimated 06 - Scho				Page of								

OHIO DIPATRICO SERVICE - PROTECTION  ESUCATION - SERVICE - PROTECTION					Lo	cal Report Number *	4 2 5 6	
Unit Number Owner Name: Last, First,	Middle (	as Driver)	Owner Phone Number - in	c. area code	( Same	e As Driver)	Damage Scale	Damaged Area Front
Owner Address, City, State, Zip	(  Same As Driver)			1 - None	09 02 03			
LP State License Plate Number	Vel	nicle Identification	Number			# Occupants	2 - Minor	
Vehicle Year Vehicle Make	<u> </u>	Vehicle Model			Vehicle Color	0 1	. 3 - Functional	08 10 04
HOND	Honda			<b>—</b>	1	ellow	4 - Disabling	07 06 05
Proof of Insurance Company Insurance Shown	Po	olicy Number		Towed By	/		9 - Unknown	Rear
Carrier Name, Address, City, State, Zip	•			-			Carrier Phone -	include area code
HM Placard ID No. 2 - 10,001 to 3 - More Than	or Equal to 10k Lbs. 26,000 Lbs 1 26,000 Lbs.	02 - Bus 03 - Bus 04 - Veh 05 - Log		10 - 11 - 12 - 13 -	Pole Cargo Tank Flat Bed Dump Concrete Mixer		ous Left Turn Lane I (Painted or Grass>4 Ft.) Median dian Barrier	
HM Class Number		07 - Car	ermodal Container Chassis go Van/Enclosed Box iin, Chips, Gravel	15 -	Auto Transporter Garbage/Refuse Other/Unknown	Hit / Skip Unit		
Non-Motorist Location Prior to Impact  01 - Intersection - Marked Crossw 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	1	Unit Type  0 2  99 - Unknown or Hit/Skip	Passenger Vehicle (less than 9 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 - Snownobile/ATV 12 - Other Passenger Veh		13 - Single Unit T 14 - Single Unit T 15 - Single Unit T 16 - Truck/Tractor/Semi 17 - Tractor/Semi 18 - Tractor/Doub 19 - Tractor/Triple 20 - Other Med/H	ruck/Trailer r(Bobtail) -Trailer es	21 - Bus/ 22 - Bus( Non-Motol 23 - Anim 24 - Anim 25 - Bicy 26 - Pede	imo (9 or More Including Driver)  Van (9-15 Seats, Inc Driver)  16+ Seats, Inc Driver)  rist  al with Rider  al with Buggy, Wagon, Surrey  cle/Pedacyclist  strian/Skater  rr Non-Motorist
Special Function		1: aintenance 1: 2: 2 2: 2 2: 2 2: 2 2: 2 3:	7 - Farm Vehicle 8 - Farm Equipment 9 - Motorhome 0 - Golf Cart 1 - Train 2 - Other (Explain in Narrative)	9 9 Impact Are	01 - None 02 - Center Fr 03 - Right Fro 04 - Right Sid 05 - Right Rea	nt 10 - Top and ' e 11 - Undercar ar 12 - Load/Tra	t Windows riage iler	Action  1 - Non-Contact 2 - Non-Collision 3 - Striking 4 - Struck 5 - Striking/Struck 9 - Unknown
Pre-Crash Actions Motorist  0 1 01 - Straight Ahead 02 - Backing 03 - Changing Lane 99 - Unknown 04 - Overtaking/Par 05 - Making Right 1 06 - Making Left Tu	08 - Entering Traces 09 - Leaving Traces 10 - Parked furn 11 - Slowing or S	affic Lane	13 - Negotiating a Cu 14 - Other Motorist Ar		16 - Walking, R 17 - Working 18 - Pushing Ve	Crossing Specified Lounning, Jogging, Playi chicle ng or Leaving Vehicle		21 - Other Non-Motorist Action
Contributing Circumstances  Primary  1 6 01 - None 02 - Failure to Yield 03 - Ran Red Light 04 - Ran Stop Sign 05 - Exceeded Speed 06 - Unsafe Speed 07 - Improper Turn 08 - Left of Center 09 - Followed Too Clo: 10 - Improper Lane Cl //Passing/Off Road	12 - Im 13 - St 14 - O <sub>1</sub> Limit 15 - Sv 16 - W 17 - Fe 18 - Vi sely/ACDA 19 - O <sub>1</sub> nange 20 - Lc		Illegally  Negligent Manner  Due to External Conditions)  Way  Equipment  Spilling	22 23 24 25 26 27 28 29	on-Motorist 2 - None 3 - Improper Crossing 4 - Darting 5 - Lying and/or Illega 5 - Failure to Yield Rik 7 - Not Visible (Dark 0 1 - Inattentive 9 - Failure to Obey Tr //Signals/Officer 9 - Wrong Side of the - Other Non-Motoris	illy in Roadway ght of Way Clothing) affic Signs	02 03 04 05 06 07 08 09	- Turn Signals - Head Lamps - Tail Lamps - Brakes - Steering - Tire Blowout - Worn or Slick tires - Trailer Equipment Defective - Motor Trouble - Disabled From Prior Accident - Other Defects
Sequence of Events  1 2 0 2 3 3 First Harmful 1 Harmful Event Event Collision with Person, Vehicle or Object No. 14. Rectarding.		6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	on-Collision Events  11 - Overturn/Rollover 12 - Fire/Explosion 13 - Immersion 14 - Jackknife 15- Cargo/Equipment Loss of  Ilision With Fixed Object 15 - Impact Attenuator/Crash	07 - 08 - r Shift 09 -	Equipment Failure (Blown Tire, Brake Failu Separation of Units Ran Off Road Right Ran Off Road Left	re, etc) 11 - Cro Opp 12 - Dow 13 - Oth	ss Median ss Center Line sosite Direction of Tra vnhill Runaway er Non-Collision	avel 48 - Tree
15 - Pedalcycle 22 16 - Railway Vehicle (Train,Engine) 23 17 - Animal - Farm 18 - Animal - Deer 19 - Animal - Other 24 20 - Motor Vehicle in Transport	Parked Motor Vehicle Work Zone Maintenance Eq Struck by Falling, Shifting Coor Anything Set in Motion by Motor Vehicle Other Movable Object	uipment 2 argo 2 a 2 3 3	23 - Impact Attenuator Class 26 - Bridge Overhead Struct 27 - Bridge Pier or Abutment 28 - Bridge Parapet 29 - Bridge Rail 30 - Guardrail Face 31 - Guardrail End 32 - Portable Barrier	ıre	33 - Median Cable Bi 34 - Median Guardra 35 - Median Concrett 36 - Median Other Bi 37 - Traffic Sign Post 38 - Overhead Sign F 39 - Light/Luminaries 40 - Utility Pole	il Barrier o e Barrier 42 - C arrier 43 - C - 44 - D Post 45 - E Support 46 - F 47 Ma	r Support ulvert urb itch nbankment ence	49 - Fire Hydrant 50 - Work Zone Maintenance Equipment 51 - Wall, Building, Tunnel 52 - Other Fixed Object
Unit Speed Posted Speed	Traffic Control  1 5 01 - No Controls 02 - Stop Sign 03 - Yield Sign 04 - Traffic Signal 05 - Traffic Flasher 06 - School Zone	08 - Railr 09 - Railr 10 - Cons s 11 - Pers	road Crossbucks road Flashers road Gates struction Barricade ion (Flagger, Officer) ement Markings	13 - Cross 14 - Walk/I 15 - Other 16 - Not Re	Don't Walk	Unit Direction From 3	1 - North 2 - South 3 - East 4 - West	5 - Northeast 6 - Northwest 7 - Southeast 8 - Southwest
<del> </del>	30 GG1001 Z0116	ız-ravt	omoni muningo					



## Motorist / Non-Motorist / Occupant

Local Rep	oort N	lumb	er *								
2	0	1	7	4	2	5	6			Ш	

									_
	10141	Last, First, Middle				Date of Birth	-141010	Age	Gender F - Female
	Address, City, State, Zip	ABO	MATTHEW	E[		ļ	7 1 9 8 Contact Phone - include		M - Male
0101151	•	RLINGTON AVE	GAI	RFIELD HTS	OH 441		216-544-74		
MINOLIN	Injuries Injured Taken By	EMS Agency	Medical Facility	Injured Taken To	Safety Equipment Used	DOT Complia			
NIOIOI IS	OL State Operator Lice	ense Number OL Class	Condition	Alcohol/Drug Suspected	0 4 Alcohol Test Status	Helmet Alcohol Test Type	Alcohol Test Value	Drug Test S	Status Drug Test Type
	O H SC327		No Valid OL End Condition	Alconol/Drug Suspected	1	1	- According to the state of the		Diag lest type  1
	Offense Charged (□ Lo	Offense	e Description	•	Citation Number		_	Hands-Free Device Used	Driver Distracted By
	Unit Number Name:	Last, First, Middle			!	Date of Birth	1 1 1	Age	Gender F - Female
rist	Address, City, State, Zip						Contact Phone - inclu	de area code	M - Male
n-Motc	Injuries Injured Taken By	/ EMS Agency	Medical Facility	Injured Taken To	Safety Equipment Used	<u> </u>	Seating Position	n Air Bag Usa	ge Ejection Trapped
otorist/No			Weddal Ladiny	injured raken to		DOT Complia Motorcycle Helmet	ant Country Country	The bug osa	
Σ	OL State Operator Lic	ense Number OL Class	No Valid OL End Condition	Alcohol/Drug Suspecter	d Alcohol Test Status	Alcohol Test Type	Alcohol Test Value	Drug Test S	Status Drug Test Type
	Offense Charged (□ Lo	ocal Code ) Offens	se Description	<u> </u>	Citation Number			Device	Driver Distracted By
								Used	
	Injuries 1 - No Injury/None Report 2 - Possible	Injured Taken By  1 - Not Transported /  Treated at Scene	Safety Equipment Used Motorist		- Unknown Safety Equipmer		Non-Motorist		
	3 - Non-Incapacitating 4 - Incapacitating 5 - Fatal	2 - EMS 3 - Police 4 - Other	01 - None Used - Vehic 02 - Shoulder Belt Only 03 - Lap Belt Only Use	y Used 06	i - Child Restraint System-Fo i - Child Restraint System-Re ' - Booster Seat		09 - None Used 10 - Helmet Us 11 - Protective	ed 13	2 - Reflective Clothing 3 - Lighting 4 - Other
	Seating Position	9 - Unknown	04 - Shoulder Belt and	Lap Belt Used 08	- Helmet Used		(Elbows, Kne	es, Etc) Air Bag Usage	
	01 - Front - Left Side (Mo		07 - Third - Left Side (Motorcycle S 08 - Third - Middle	Side Car)	12 - Passenger in 13 - Trailing Unit	Unenclosed Cargo		1 - Not Deployed	
	02 - Front - Middle				13 - Halling Unit			2 - Deployed From	nt
	03 - Front - Right Side 04 - Second - Left Side (	Motorcycle Passenger)	09 - Third - Right Side 10 - Sleeper Section of Cab (Truc	· ·	14 - Riding on Vel 15 - Non-Motorist	hicle Exterior (Non-Tra	ailing Unit)	2 - Deployed From 3 - Deployed Side 4 - Deployed Both	e h Front/Side
	03 - Front - Right Side	Motorcycle Passenger)		ed Cargo Area	14 - Riding on Veh	hicle Exterior (Non-Tra	ailing Unit)	3 - Deployed Side	e h Front/Side e
	03 - Front - Right Side 04 - Second - Left Side (I 05 - Second - Middle 06 - Second - Right Side	Motorcycle Passenger)  Trapped	10 - Sleeper Section of Cab (Truc 11 - Passenger in Other Enclose (Non-Trailing Unit Such as a Bus Cab)  Operator License Class	ed Cargo Area s, Pick-up with	14 - Riding on Vel 15 - Non-Motorist 16 - Other 99 - Unknown			3 - Deployed Side 4 - Deployed Bott 5 - Not Applicable 9 - Deployment U	e h Front/Side e Jnknown
	03 - Front - Right Side 04 - Second - Left Side (i 05 - Second - Middle 06 - Second - Right Side	Motorcycle Passenger)	10 - Sleeper Section of Cab (Truc 11 - Passenger in Other Enclose (Non-Trailing Unit Such as a Bus Cab)	Condition  1 - Apparently Nor 2 - Physical Impair	14 - Riding on Vet 15 - Non-Motorist 16 - Other 99 - Unknown	5 - Fell Asleep, 6 - Under The Ir	Fainted, Fatigued	3 - Deployed Side 4 - Deployed Bott 5 - Not Applicable 9 - Deployment U	e h Front/Side e Jnknown spected Suspected
	03 - Front - Right Side 04 - Second - Left Side ( 05 - Second - Middle 06 - Second - Right Side Ejection 1 - Not Ejected 2 - Totally Ejected	Trapped  1 - Not Trapped 2 - Extricated by	10 - Sleeper Section of Cab (Truc 11 - Passenger in Other Enclose (Non-Trailing Unit Such as a Bus Cab)  Operator License Class 1 - Class A 2 - Class B	Condition  1 - Apparently Nor 2 - Physical Impair 3 - Emotional (Dep	14 - Riding on Vel 15 - Non-Motorist 16 - Other 99 - Unknown	5 - Fell Asleep, 6 - Under The Ir	Fainted, Fatigued	3 - Deployed Side 4 - Deployed Bott 5 - Not Applicable 9 - Deployment U Alcohol/Drug Sus 1 - None 2 - Yes - Alcohol 3 - Yes - HBD No 4 - Yes - Drugs S	e h Front/Side  3 Jnknown  spected  Suspected ot Impaired
	03 - Front - Right Side 04 - Second - Left Side ( 05 - Second - Middle 06 - Second - Right Side Ejection 1 - Not Ejected 2 - Totally Ejected 3 - Partially Ejected	Trapped  1 - Not Trapped  2 - Extricated by Mechanical Means 3 - Extricated by Non-Mechanical Means	10 - Sleeper Section of Cab (Truc 11 - Passenger in Other Enclose (Non-Trailing Unit Such as a Bus Cab)  Operator License Class  1 - Class A 2 - Class B 3 - Class C 4 - Regular Class (Ohio is "D" 5 - MC/Moped Only  hol Test Type  Drug Test Sta	condition  1 - Apparently Nor 2 - Physical Impair 3 - Emotional (Dep 4 - Illness	14 - Riding on Vet 15 - Non-Motorist 16 - Other 99 - Unknown  mal ment pressed, Angry, Disturbed)  Drug Test	5 - Fell Asleep, 6 - Under The Ir Medications, 7 - Other	Fainted, Fatigued	3 - Deployed Side 4 - Deployed Bott 5 - Not Applicable 9 - Deployment U  Alcohol/Drug Sus 1 - None 2 - Yes - Alcohol 3 - Yes - HBD No 4 - Yes - Drugs S 5 - Yes - Alcohol	e h Front/Side e e Jnknown  spected  Suspected ot Impaired Suspected and Drugs Suspected
	03 - Front - Right Side 04 - Second - Left Side ( 05 - Second - Middle 06 - Second - Right Side  Ejection 1 - Not Ejected 2 - Totally Ejected 3 - Partially Ejected 4 - Not Applicable  Alcohol Test Status 1 - None Given 2 - Test Refused 3 - Test Given, Contaminal	Trapped  1 - Not Trapped  2 - Extricated by Mechanical Means 3 - Extricated by Non-Mechanical Means  Alcol  1 - 2 2 - 2 3 - 3 - 3	10 - Sleeper Section of Cab (Truc 11 - Passenger in Other Enclose (Non-Trailing Unit Such as a Bus Cab)  Operator License Class  1 - Class A 2 - Class B 3 - Class C 4 - Regular Class (Ohio is "D" 5 - MC/Moped Only  hol Test Type  - None - None - Blood 2 - Test Refu - Urine 3 - Test Give	condition  1 - Apparently Nor 2 - Physical Impair 3 - Emotional (Dep 4 - Illness  atus  ven used en, Contaminated Sample/	14 - Riding on Vet 15 - Non-Motorist 16 - Other 99 - Unknown  mal ment pressed, Angry, Disturbed)  Drug Test  1 - None 2 - Blooc 3 - Urine	5 - Fell Asleep, 6 - Under The Ir Medications, 7 - Other  Type Driver Dis 1 - No Di 2 - Phon 3 - Textir	Fainted, Fatigued Influence of Drugs, Alcohol  tracted By intraction Reported e e ing/E-mailing	3 - Deployed Side 4 - Deployed Bott 5 - Not Applicable 9 - Deployment U  Alcohol/Drug Sus 1 - None 2 - Yes - Alcohol 3 - Yes - HBD No 4 - Yes - Drugs S 5 - Yes - Alcohol	e h Front/Side e e h Inknown  spected  Suspected ot Impaired Suspected
	03 - Front - Right Side 04 - Second - Left Side ( 05 - Second - Middle 06 - Second - Right Side  Ejection 1 - Not Ejected 2 - Totally Ejected 3 - Partially Ejected 4 - Not Applicable  Alcohol Test Status 1 - None Given 2 - Test Refused	Trapped  1 - Not Trapped 2 - Extricated by Mechanical Means 3 - Extricated by Non-Mechanical Means  Alcol  ted Sample/Unusable 3.4	10 - Sleeper Section of Cab (Truc 11 - Passenger in Other Enclose (Non-Trailing Unit Such as a Bus Cab)  Operator License Class  1 - Class A 2 - Class B 3 - Class C 4 - Regular Class (Ohio is "D" 5 - MC/Moped Only  hol Test Type - None - None - None - Blood - Urine - Breath - Test Give	d Cargo Area s, Pick-up with  Condition 1 - Apparently Nor 2 - Physical Impair 3 - Emotional (Deg 4 - Illness  atus  ren used	14 - Riding on Vet 15 - Non-Motorist 16 - Other 99 - Unknown  mal rment oressed, Angry, Disturbed)  Drug Test  1 - None 2 - Blood	5 - Fell Asleep, 6 - Under The Ir Medications, 7 - Other  Type 1 - No Di 2 - Phon 3 - Textir r 4 - Elect 5 - Other	Fainted, Fatigued Influence of Drugs, Alcohol  tracted By istraction Reported e	3 - Deployed Side 4 - Deployed Bott 5 - Not Applicable 9 - Deployment U  Alcohol/Drug Sus 1 - None 2 - Yes - Alcohol 3 - Yes - HBD Nc 4 - Yes - Drugs S 5 - Yes - Alcohol	e h Front/Side a Jnknown spected Suspected ot Impaired Suspected and Drugs Suspected
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## OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER							REPORTING AGENCY										DATE OF CRASH					
20174256 IN COUNTY OF							GARFIELD HEIGHTS CRASH LOCATION										N	M 11 D 24 Y 2017			17	
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