Traffic Crash Report	Local Report Number *		Crash Severity Hit/Skip
Local Information 480E Broadway	2 0 1 8 4 1	5 0	1 - Fatal 1 - Solved 2 - Unsolved 2 - Unsolved
☐ Photos Taken ☐ PDO Under ☐ Private Reporting Agency NCIC * Report	ing Agency Name *	1.	Number of Unit in error
Reportable Units Other Dollar Amount GAR	FIELD HEIGHTS		98 - Animal 99 - Unknown
County*		Crash Date * 1 1 1 1 1 1 2 0 1 8 1	Time of Crash Day of Week 1
Degrees / Minutes / Seconds	De	ecimal Degrees	
Latitude Longitude Longitude	o	1 . 4 2 0 2 1 9	Longitude - 8 1 . 5 8 7 8 6 9
☑ Divided ☐ N - Northbound E - Eastbound S - Southbound W - Westbound ☐ 4 ☐ A	vad Types or Milepost 2 L - Alley CR - Circle V - Avenue CT - Court L - Boulevard DR - Drive	HE - Heights MP - Milepost HW - Highway PK - Parkway LA - Lane PI - Pike	PL - Place ST - Street WA - Way RD - Road TE - Terrace SQ - Square TL - Trail
Location Route Number Loc. Prefix Location Road name	DK-Bive	Route Types 1 IR - Interstate Route (inc. t	turnpike) CR - Numbered County Route
		Type 2 SR - State Route	TR - Numbered Township Route
Distance From Reference Miles Dir From Ref O Reference Reference Route Nu	mber Ref Prefix Refer	rence Name (Road, Milepost, House #)	Reference Road Type
Reference Point Used 1 - Intersection 2 - Mile Post 3 - House Number Crash Location 01 - Not an intersection 06 - Five-point, or more 02 - Four-way Intersection 07 - On Ramp 07 - On Ramp 08 - Off Ramp 09 - Crossover 09	12 - Shared-Use Paths o Trails 99 - Unknown	ising Intersection Related 1 2 3	First Harmful Event - On Roadway 5 - On Gore - On Shoulder 6 - Outside Trafficway - In Median 9 - Unknown - On Roadside
	01 - Dry 05 - Sand, Mu	ud, Dirt, Oil, gravel 09 - Rut, Holes,	Bumps, Uneven
1 - Straight Level 4 - Curve Grade 2 - Straight Grade 9 - Unknown	02 - Wet 06 - Water (Si 03 - Snow 07 - Slush 04 - Ice 08 - Debris*	tanding, Moving) Pavement* 10 - Other 99 - Unknown	* Secondary Condition Only
Manner of Crash Collision/Impact 1 - Not Collision Between 2 - Rear-End 5 - Backing 8 - Sideswi	Weather ipe, Opposite	- Clear 4 - Rain	7 - Severe Crosswinds
Two Motor Vehicles 3 - Head-On 6 - Angle Direction 9 - Unknow	n 1 1 2	- Cloudy 5 - Sleet, Hail - Fog, Smog, Smoke 6 - Snow	
Road Surface 1 - Concrete 2 - Blacktop, Bituminous, 4 - Slag, Gravel, 1 - Concrete 2 - Dawn 2 - Dawn 4 - Slag, Gravel, 1 - Daylight 2 - Dawn	6 - Dark - I	Roadway Not Lighted 9 - Un Unknown Roadway Lighting	sknown School Bus Related School Bus Related Yes, School Bus Directly Involved Related
	7 - Glare* ghted Roadway 8 - Other	* Secondary Cond	Yes, School Bus Indirectly Involved
	termittent or Moving Work	Location of Crash in Work Zone 1 - Before the first Work Zone Wa 2 - Advance Warning Area 3 - Transition Area	arning Sign 4 - Activity Area 5 - Termination Area
Narrative SEE LONG NARRATIVE	Diagra	m	∧ Write an "N" on the
			write an N on the compass diagram to indicate the direction of north.
	_ 4 m	-	-
		IR 450 EAST BEFORE BROADW	'AY AVE EXIT
		N	
		4	<u> </u>
	-	Į.	_
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			_
Report Taken By Supplement (Correction or Addition to	· Var		
Police Agency Motorist Supplement (Confection to Addition to an Existing Report Sent to ODPS)	Arrival Time	Time Cleared Other Inve	stigation Time Total Minutes
[1 1 1 2 0 1 8 1 4 4 0 1 4 4 2	1 4 5 6	1 5 0 9 3 0	
	Officer's Badge Number 023	Checked By	Page of

OHIO DISTANCE OF PURSUE ERICATION - SERVICE - PRINTERINA ERICATION - SERV			1 Report Number * 2 0 1 8 4	4 1 5 0
	ne As Driver) Owner Phone Number - inc. a	area code (🖫 Same A	s Driver)	Damage Scale Damaged Area Front
United Box JOHNSON AMEINA A Owner Address, City, State, Zip (☑ Same As Dri	216-496-4664			2 02 02
2413 UNWIN RD	CLEVELAND	OH 4410	4 5801	
LP State License Plate Number O H HIW9767	Vehicle Identification Number 1	D 6 5 1 7 8 7	# Occupants	2 - Minor 08 10 10 04
Vehicle Year Vehicle Make	Vehicle Model	Vehicle Color		3 - Functional
	CHK Cherokee	RED Rec	1	4 - Disabling 07 06 05
Insurance Shown				9 - Unknown Rear
Carrier Name, Address, City, State, Zip				Carrier Phone - include area code
US DOT Vehicle Weight GVWR/GCWR 1 - Less Than or Equal to 10k Lbs.	Cargo Body Type 01 - No Cargo Body Type/Not Applicab 02 - Bus/Van(9-15 Seats, Inc.Driver)	le 09 - Pole 10 - Cargo Tank	1 - Two-Way, No	
HM Placard ID No. 2 - 10,001 to 26,000 Lbs 3 - More Than 26,000 Lbs.	0 1 02 - Bus/Van(9-15 Seats, Inc.Driver) 03 - Bus(16+ Seats, Inc Driver) 04 - Vehicle Towing Another Vehicle	11 - Flat Bed 12 - Dump 13 - Concrete Mixer	3 - Two-Way, Div	nt Divided, Continuous Left Turn Lane vided, Unprotected (Painted or Grass>4 Ft.) Median vided, Positive Median Barrier
Hazardous Material Released	05 - Logging 06 - Intermodal Container Chassis 07 - Cargo Van/Enclosed Box	14 - Auto Transporter 15 - Garbage/Refuse	5 - One-Way Tra Hit / Skip Unit	fficway
Number Non-Motorist Location Prior to Impact 01 - Intersection - Marked Crosswalk	08 - Grain, Chips, Gravel Unit Type Passenger Vehicle (less than 9 pas	99 - Other/Unknown ssengers) Med/Heavy Trucks of	r Combo Units>10k lb	s Bus/Van/Limo (9 or More Including Driver)
02 - Intersection - No Crosswalk 03 - Intersection - Other 04 - Midblock - Marked Crosswalk	01 - Sub-Compact 02 - Compact 03 - Mid Size	13 - Single Unit Truc 14 - Single Unit Truc 15 - Single Unit Truc		21 - Bus/Van (9-15 Seats, Inc Driver) 22 - Bus(16+ Seats, Inc Driver)
04 - MidDioCk - Marked Crosswark 05 - Travel Lane - Other Location 1 - Personal 06 - Bicycle Lane 2 - Commercia	99 - Unknown 04 - Full Size	16 - Truck/Tractor(B 17 - Tractor/Semi-Tr	obtail)	Non-Motorist
07 - Shoulder/Roadside 3 - Governmer 08 - Sidewalk 09 - Median/Crossing Island	nt 06 - Sports Utility Vehicle 07 - Pickup 08 - Van	18 - Tractor/Double 19 - Tractor/Triples 20 - Other Med/Hea	vv Vehicle	23 - Animal with Rider24 - Animal with Buggy, Wagon, Surrey25 - Bicycle/Pedacyclist
10 - Driveway Access ☐ In Emergen 11 - Shared-Use Path or Trail Response	10 - Motorized Bicycle	Γ_	/ Placard	26 - Pedestrian/Skater 27 - Other Non-Motorist
12 - Non-Trafficway Area 99 - Other/Unknown Special Function 01 - None 09 - Ambula	11 - Snowmobile/ATV 12 - Other Passenger Vehicle nce 17 - Farm Vehicle		ii i iadara	Action
	18 - Farm Equipment y/Maintenance 19 - Motorhome	01 - None 02 - Center Fron 03 - Right Front	08 - Left Side t 09 - Left Front 10 - Top and Wi	99 - Unknown 1 - Non-Contact 2 - Non-Collision
04 - Bus - Scriou (Public of Private) 12 - Milliarly 05 - Bus - Transit 13 - Police 06 - Bus - Charter 14 - Public U		Impact Area 04 - Right Side 05 - Right Rear	11 - Undercarria 12 - Load/Traile	age 4 - Struck r 5 - Striking/Struck
07 - Bus - Shuttle 15 - Other 08 - Bus - Other 16 - Constru		0 6 06 - Rear Center 07 - Left Rear	13 - Total (All Are 14 - Other	9 - Unknown
Pre-Crash Actions Motorist 01 - Straight Ahead 07 - Making 02 - Backing 08 - Entering			rossing Specified Loca	
03 - Changing Lanes 09 - Leaving 99 - Unknown 04 - Overtaking/Passing 10 - Parked	Traffic Lane	17 - Working 18 - Pushing Vehio	cle	, Oyumg
05 - Making Right Turn 11 - Slowing 06 - Making Left Turn 12 - Driverle: Contributing Circumstances	or Stopped in Traffic	19 - Approaching 20 - Standing	or Leaving Vehicle	Vehicle Defects
Motorist Primary	- Improper Backing	Non-Motorist 22 - None		01 - Turn Signals 02 - Head Lamps
03 - Ran Red Light 13	- Improper Start From Parked Position - Stopped or Parked Illegally - Operating Vehicle in Negligent Manner	23 - Improper Crossing 24 - Darting 25 - Lying and/or Illegally	in Roadway	03 - Tail Lamps 04 - Brakes
Secondary	- Swerving to Avoid (Due to External Conditions) - Wrong Side/Wrong Way	26 - Failure to Yield Right 27 - Not Visible (Dark Clo	of Way	05 - Steering 06 - Tire Blowout 07 - Worn or Slick tires
08 - Left of Center 18	- Failure to Control - Vision Obstruction - Operating Defective Equipment	28 - Inattentive 29 - Failure to Obey Traffi /Signals/Officer	ic Signs	08 - Trailer Equipment Defective 09 - Motor Trouble 10 - Disabled From Prior Accident
10 - Improper Lane Change 20 /Passing/Off Road 21	- Load Shifing/Falling/Spilling - Other Improper Action	30 - Wrong Side of the Ro 31 - Other Non-Motorist A		11 - Other Defects
Sequence of Events 1 2 0 2 3 4 5	Non-Collision Events 01 - Overturn/Rollover 02 - Fire/Explosion	06 - Equipment Failure (Blown Tire, Brake Failure,	10 - Cross etc) 11 - Cross	Median Center Line
First Most 99 - Unit	03 - Immersion (nown 04 - Jackknife 05- Cargo/Equipment Loss or S	07 - Separation of Units 08 - Ran Off Road Right hift 09 - Ran Off Road Left	12 - Down	site Direction of Travel hill Runaway Non-Collision
Event Event Collision with Person, Vehicle or Object Not Fixed 14 - Pedestrian 21 - Parked Motor Vehicle	Collision With Fixed Object 25 - Impact Attenuator/Crash Cu			Post, Pole 48 - Tree
15 - Pedalcycle 22 - Work Zone Maintenance 16 - Railway Vehicle (Train,Engine) 23 - Struck by Falling, Shiftin	g Cargo 27 - Bridge Pier or Abutment	34 - Median Guardrail B 35 - Median Concrete B 36 - Median Other Barri	sarrier 42 - Culve	
17 - Animal - Farm or Anything Set in Motior 18 - Animal - Deer Motor Vehicle 19 - Animal - Other 24 - Other Movable Object	29 - Bridge Rail 30 - Guardrail Face	37 - Traffic Sign Post 38 - Overhead Sign Pos	44 - Ditch st 45 - Enba	51 - Wall, Building, Tunnel nkment 52 - Other Fixed Object
20 - Motor Vehicle in Transport	31 - Guardrail End 32 - Portable Barrier	39 - Light/Luminaries Si 40 - Utility Pole	upport 46 - Fence 47 Mailbo	
Unit Speed Posted Speed Traffic Control 01 - No Control 02 - Stop Sign	s 07 - Railroad Crossbucks 08 - Railroad Flashers	13 - Crosswalk Lines 14 - Walk/Don't Walk	From 4 To	1 - North 5 - Northeast 9 - Unknown 2 - South 6 - Northwest
☑ Stated 03 - Yield Sign 04 - Traffic Sign	09 - Railroad Gates nal 10 - Construction Barricade	15 - Other 16 - Not Reported		3 - East 7 - Southeast 4 - West 8 - Southwest
Estimated 05 - Irathic Flas 06 - School Zoi	(35 ,			Page of

OHIO COMPANIES OF PUBLIC SAFETY EDUCATION - PROTECTION DO NOT THE PUBLIC - PROTECTION DO NOT		Local Report	Number *
	☑ Same As Driver) Owner Phone Number - inc. are	ea code (☐ Same As Driver)	Damage Scale Damaged Area
Owner Address, City, State, Zip	216-288-7366		3 Front 02
18019 HARLAND AVE	me As Driver) CLEVELAND	OH 44119	1 - None 09 03
LP State License Plate Number	Vehicle Identification Number 1 G C V K R E H 3 E Z		ccupants 2 - Minor 08 10 04
Vehicle Year Vehicle Make	Vehicle Model	Vehicle Color	3 - Functional 08 10 10 04
2 0 1 4 CHEV Chevrolet	SLV Silverado	BRO Brown	4 - Disabling 07 06 05
Proof of Insurance Company FARMERS	Policy Number 0192968594	Towed By	9 - Unknown Rear
Shown FARIVIERS Carrier Name, Address, City, State, Zip	0102000004		Carrier Phone - include area code
US DOT Vehicle Weight GVWR/GCWR	Cargo Body Type 01 - No Cargo Body Type/Not Applicable	00 - Pole	Description
HM Placard ID No. 1 - Less Than or Equal to 10k I 2 - 10,001 to 26,000 Lbs 3 - More Than 26,000 Lbs.	Lbs. 02 - Bus/Van(9-15 Seats, Inc.Driver) 03 - Bus(16+ Seats, Inc Driver)	10 - Cargo Tank	Fwo-Way, Not Divided Fwo-Way, Not Divided, Continuous Left Turn Lane Fwo-Way, Divided, Unprotected (Painted or Grass>4 Ft.) Median
Hazardous Material	04 - Vehicle Towing Another Vehicle 05 - Logging	12 - Dump 13 - Concrete Mixer	Woo-Way, Divided, Onjoineded (Failled of Glass-4 Ft.) Median Woo-Way, Divided, Positive Median Barrier One-Way Trafficway
HM Class Released Number	06 - Intermodal Container Chassis 07 - Cargo Van/Enclosed Box 08 - Grain, Chips, Gravel	14 - Auto Transporter 15 - Garbage/Refuse 99 - Other/Unknown	/ Skip Unit
Non-Motorist Location Prior to Impact 01 - Intersection - Marked Crosswalk 02 - Intersection - No Crosswalk	of Use Unit Type Passenger Vehicle (less than 9 pass	•	
03 - Intersection - No Crosswark 03 - Intersection - Other 04 - Midblock - Marked Crosswalk	0 7 01 - Sub-Compact 02 - Compact 03 - Mid Size	13 - Single Unit Truck or Van 14 - Single Unit Truck 3+ axle 15 - Single Unit Truck/Trailer	· · · · · · · · · · · · · · · · · · ·
06 - Bicycle Lane 2 - Co	ersonal 99 - Unknown 04 - Full Size or Hit/Skip 05 - Minivan	16 - Truck/Tractor(Bobtail) 17 - Tractor/Semi-Trailer	Non-Motorist
08 - Sidewalk	overnment 06 - Sports Utility Vehicle 07 - Pickup 08 - Van	18 - Tractor/Double 19 - Tractor/Triples 20 - Other Med/Heavy Vehicl	23 - Animal with Rider 24 - Animal with Buggy, Wagon, Surrey e 25 - Bicycle/Pedacyclist
	Emergency 09 - Motorcycle sponse 10 - Motorized Bicycle	Γ_	26 - Pedestrian/Skater 27 - Other Non-Motorist
12 - Non-Trafficway Area 99 - Other/Unknown	11 - Snowmobile/ATV 12 - Other Passenger Vehicle	☐ Has HM Plac	ard
02 - Taxi 10 -	- Ambulance 17 - Farm Vehicle - Fire 18 - Farm Equipment - Highway/Maintenance 19 - Motorhome		- Left Side 99 - Unknown - Left Front Action Action 1 - Non-Contact
04 - Bus - School (Public or Private) 12 -	- Highway/Maintenance 19 - Motorhome - Military 20 - Golf Cart - Police 21 - Train	03 - Right Front 10	- Left Front - Top and Windows - Undercarriage 5 2 - Non-Collision 3 - Striking 4 - Struck
06 - Bus - Charter 14 - 07 - Bus - Shuttle 15 -	- Public Utility 22 - Other (Explain in Narrative) - Other Government	05 - Right Rear 12 06 - Rear Center 13	- Load/Trailer 5 - Striking/Struck - Total (All Areas) 9 - Unknown
08 - Bus - Other 16 - Pre-Crash Actions Motorist	- Construction Equip.	07 - Left Rear 14 Non-Motorist	- Other
	- Making U-Turn 13 - Negotiating a Curve - Entering Traffic Lane 14 - Other Motorist Action	15 - Entering or Crossing S 16 - Walking, Running, Jog	
99 - Unknown 04 - Overtaking/Passing 10 -	- Leaving Traffic Lane - Parked	17 - Working 18 - Pushing Vehicle	
9 9	Slowing or Stopped in Traffic - Driverless	19 - Approaching or Leavin 20 - Standing	-
Primary 01 - None	11 - Improper Backing	Non-Motorist 22 - None	Vehicle Defects 01 - Turn Signals
02 - Failure to Yield 03 - Ran Red Light	12 - Improper Start From Parked Position 13 - Stopped or Parked Illegally	23 - Improper Crossing 24 - Darting	02 - Head Lamps 03 - Tail Lamps 04 - Brakes
04 - Ran Stop Sign Secondary 05 - Exceeded Speed Limit	14 - Operating Vehicle in Negligent Manner15 - Swerving to Avoid (Due to External Conditions)	25 - Lying and/or Illegally in Roadv 26 - Failure to Yield Right of Way	
06 - Unsafe Speed 07 - Improper Turn 08 - Left of Center	16 - Wrong Side/Wrong Way 17 - Failure to Control 18 - Vision Obstruction	27 - Not Visible (Dark Clothing) 28 - Inattentive 29 - Failure to Obey Traffic Signs	07 - Worn or Slick tires 08 - Trailer Equipment Defective 09 - Motor Trouble
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 Road	10 - Disabled From Prior Accident 11 - Other Defects
/Passing/Off Road Sequence of Events	21 - Other Improper Action Non-Collision Events	31 - Other Non-Motorist Action	
1 2 0 2 3 4 5	6 01 - Overturn/Rollover 02 - Fire/Explosion 03 - Immersion	06 - Equipment Failure (Blown Tire, Brake Failure, etc) 07 - Separation of Units	10 - Cross Median 11 - Cross Center Line
First Most Harmful 1	99 - Unknown 04 - Jackknife 05- Cargo/Equipment Loss or Shi	08 - Ran Off Road Right	Opposite Direction of Travel 12 - Downhill Runaway 13 - Other Non-Collision
Event Event Collision with Person, Vehicle or Object Not Fixed 14 - Pedestrian 21 - Parked Motor Ve	Collision With Fixed Object 25 - Impact Attenuator/Crash Cus		41 - Other Post, Pole 48 - Tree
	ntenance Equipment 26 - Bridge Overhead Structure 27 - Bridge Pier or Abutment	34 - Median Guardrail Barrier 35 - Median Concrete Barrier	or Support 49 - Fire Hydrant 42 - Culvert 50 - Work Zone Maintenance
17 - Animal - Farm or Anything Set 18 - Animal - Deer Motor Vehicle	29 - Bridge Rail	36 - Median Other Barrier 37 - Traffic Sign Post 38 - Overhead Sign Post	43 - Curb Equipment 44 - Ditch 51 - Wall, Building, Tunnel 45 - Enbankment 52 - Other Fixed Object
19 - Animal - Other 24 - Other Movable (20 - Motor Vehicle in Transport	Object 31 - Guardrail End 32 - Portable Barrier	39 - Light/Luminaries Support 40 - Utility Pole	46 - Fence 47 Mailbox
Unit Speed Posted Speed Traffic Control	o Controls 07 - Railroad Crossbucks	Unit I 13 - Crosswalk Lines Fron	Direction To 1 - North 5 - Northeast 9 - Unknown
03 - Yi	ield Sign 09 - Railroad Gates	14 - Walk/Don't Walk 15 - Other	4 3 2 - South 6 - Northwest 3 - East 7 - Southeast
☐ Estimated 05 - Tr	raffic Signal 10 - Construction Barricade raffic Flashers 11 - Person (Flagger, Officer) chool Zone 12 - Pavement Markings	16 - Not Reported	4 - West 8 - Southwest Page of
00-30	12 - Lavernent widthings		

OHIO DIMENSI OF PUBLIC OF		l .	Report Number * 2 0 1 8 4	\$ 1 5 0
Unit Number Owner Name: Last, First, Middle (🗹 Sam	ne As Driver) Owner Phone Number - inc. are	ea code (☐∕ Same As	Driver)	Damage Scale Damaged Area
0 1 GIERNACKY DERRICK	216-256-4101			4 Front 02
Owner Address, City, State, Zip (Same As Drive 10716 RAYMOND AVE	ver)	OH 44125	I	1 - None 09 02 03
	Vehicle Identification Number	املململململي		2 - Minor
O H FFF8630 Vehicle Year Vehicle Make	1 F M C U 9 G 9 9 E L	Vehicle Color	0 1	3 - Functional 08 10 04
2 0 1 4 FORD Ford	ECP Escape	SIL Alum	/Silver	4 Disabiling 07 05
Proof of Insurance Company PROGRESSIVE	Policy Number 40937955	Towed By		4 - Disabling 9 - Unknown Rear
Shown PROGRESSIVE Carrier Name, Address, City, State, Zip	40907900			Carrier Phone - include area code
US DOT Vehicle Weight GVWR/GCWR	Cargo Body Type 01 - No Cargo Body Type/Not Applicable	Tra	afficway Description	
1 - Less Than or Equal to 10k Lbs. 2 - 10,001 to 26,000 Lbs	02 - Bus/Van(9-15 Seats, Inc.Driver)	10 - Cargo Tank	1 - Two-Way, No 2 - Two-Way, No	ot Divided ot Divided, Continuous Left Turn Lane
HM Placard ID No. 3 - More Than 26,000 Lbs.	03 - Bus(16+ Seats, Inc Driver) 04 - Vehicle Towing Another Vehicle 05 - Logging	11 - Flat Bed 12 - Dump 13 - Concrete Mixer	4 - Two-Way, Div	vided, Unprotected (Painted or Grass>4 Ft.) Median vided, Positive Median Barrier
Hazardous Material Released	06 - Intermodal Container Chassis 07 - Cargo Van/Enclosed Box	14 - Auto Transporter	5 - One-Way Tra Hit / Skip Unit	fficway
Non-Motorist Location Prior to Impact Type of Use	08 - Grain, Chips, Gravel Unit Type Passenger Vehicle (less than 9 pass	99 - Other/Unknown	•	s Bus/Van/Limo (9 or More Including Driver)
01 - Intersection - Marked Crosswalk 02 - Intersection - No Crosswalk	01 - Sub-Compact	13 - Single Unit Truck	or Van 2axle,6 tires	21 - Bus/Van (9-15 Seats, Inc Driver)
03 - Intersection - Other 04 - Midblock - Marked Crosswalk 05 - Travel Lane - Other Location 1 - Personal	02 - Compact 03 - Mid Size 99 - Unknown 04 - Full Size	14 - Single Unit Truck 15 - Single Unit Truck 16 - Truck/Tractor(Bot	/Trailer	22 - Bus(16+ Seats, Inc Driver)
05 - Travel Lane - Other Location 1 - Personal 06 - Bicycle Lane 2 - Commercia 07 - Shoulder/Roadside 3 - Governmen	or Hit/Skip 05 - Minivan	16 - Truck/Tractor(Bot 17 - Tractor/Semi-Trai 18 - Tractor/Double	,	Non-Motorist 23 - Animal with Rider
08 - Sidewalk 09 - Median/Crossing Island	07 - Pickup 08 - Van	19 - Tractor/Triples 20 - Other Med/Heavy	v Vehicle	24 - Animal with Buggy, Wagon, Surrey 25 - Bicycle/Pedacyclist
10 - Driveway Access ☐ In Emergent 11 - Shared-Use Path or Trail Response		Γ_		26 - Pedestrian/Skater 27 - Other Non-Motorist
12 - Non-Trafficway Area 99 - Other/Unknown	11 - Snowmobile/ATV 12 - Other Passenger Vehicle	☐ Has HM	Placard	
Special Function 01 - None 09 - Ambular 02 - Taxi 10 - Fire	18 - Farm Equipment	Most Damaged Area 01 - None	08 - Left Side	99 - Unknown Action 1 - Non-Contact
04 - Bus - School (Public or Private) 12 - Military	/Maintenance 19 - Motorhome 20 - Golf Cart	02 - Center Front 03 - Right Front	09 - Left Front 10 - Top and Wi	3 - Striking
05 - Bus - Transit 13 - Police 06 - Bus - Charter 14 - Public U 07 - Bus - Shuttle 15 - Other G		Impact Area 04 - Right Side 05 - Right Rear 06 - Rear Center	11 - Undercarria 12 - Load/Traile 13 - Total (All Are	r 5 - Striking/Struck
08 - Bus - Other 16 - Constru		0 2 06 - Rear Center 07 - Left Rear	14 - Other	9 - Unknown
Pre-Crash Actions Motorist 01 - Straight Ahead 07 - Making I	U-Turn 13 - Negotiating a Curve	Non-Motorist 15 - Entering or Cro	ssing Specified Loca	ation 21 - Other Non-Motorist Action
02 - Backing 08 - Entering 03 - Changing Lanes 09 - Leaving		17 - Working	ng, Jogging, Playing	, Cycling
	or Stopped in Traffic	18 - Pushing Vehicle 19 - Approaching or		
06 - Making Left Turn 12 - Driverles Contributing Circumstances Motorist	ss	20 - Standing Non-Motorist		Vehicle Defects
Primary 01 - None 11 -	- Improper Backing - Improper Start From Parked Position	22 - None 23 - Improper Crossing		01 - Turn Signals 02 - Head Lamps
03 - Ran Red Light 13 -	- Improper Start From Parked Position - Stopped or Parked Illegally - Operating Vehicle in Negligent Manner	24 - Darting 25 - Lying and/or Illegally in	n Roadway	03 - Tail Lamps 04 - Brakes
05 - Exceeded Speed Limit 15	- Swerving to Avoid (Due to External Conditions) - Wrong Side/Wrong Way	26 - Failure to Yield Right o 27 - Not Visible (Dark Cloth	of Way	05 - Steering 06 - Tire Blowout 07 - Worn or Slick tires
07 - Improper Turn 17	- Failure to Control - Vision Obstruction	28 - Inattentive 29 - Failure to Obey Traffic		08 - Trailer Equipment Defective 09 - Motor Trouble
10 - Improper Lane Change 20	- Operating Defective Equipment - Load Shifing/Falling/Spilling	/Signals/Officer 30 - Wrong Side of the Roa		10 - Disabled From Prior Accident11 - Other Defects
/Passing/Off Road 21 - Sequence of Events	- Other Improper Action Non-Collision Events	31 - Other Non-Motorist Ac		
1 2 0 2 3 4 5	6 01 - Overturn/Rollover 02 - Fire/Explosion	06 - Equipment Failure (Blown Tire, Brake Failure, etc.		Center Line
First Most 99 - Unk	03 - Immersion nown 04 - Jackknife 05- Cargo/Equipment Loss or Shi	07 - Separation of Units 08 - Ran Off Road Right ft 09 - Ran Off Road Left	12 - Down	site Direction of Travel hill Runaway
Event Event Collision with Person, Vehicle or Object Not Fixed	Collision With Fixed Object			Non-Collision Post. Pole 48 - Tree
14 - Pedestrian 21 - Parked Motor Vehicle 15 - Pedalcycle 22 - Work Zone Maintenance	27 - Bridge Dier or Abutment	hion 33 - Median Cable Barrier 34 - Median Guardrail Ba 35 - Median Concrete Ba	rrier or Su	pport 49 - Fire Hydrant
16 - Railway Vehicle (Train,Engine) 23 - Struck by Falling, Shifting 17 - Animal - Farm or Anything Set in Motion	28 - Bridge Paranet	36 - Median Other Barrier 37 - Traffic Sign Post		Equipment 51 - Wall, Building, Tunnel
18 - Animal - Deer Motor Vehicle 19 - Animal - Other 24 - Other Movable Object 20 - Motor Vehicle in Transport	30 - Guardrail Face 31 - Guardrail End	38 - Overhead Sign Post 39 - Light/Luminaries Sup	45 - Enba	nkment 52 - Other Fixed Object
Unit Speed Posted Speed Traffic Control	32 - Portable Barrier	40 - Utility Pole	47 Mailbo	
2 0 6 0 1 2 00 01 - No Control 1 2 02 - Stop Sign		13 - Crosswalk Lines 14 - Walk/Don't Walk	From 4 To	1 - North 5 - Northeast 9 - Unknown 2 - South 6 - Northwest
☑ Stated ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	09 - Railroad Gates	15 - Other 16 - Not Reported	ت ا	3 - East 7 - Southeast 4 - West 8 - Southwest
☐ Estimated 05 - Traffic Flas 06 - School Zor	hers 11 - Person (Flagger, Officer)			Page of
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Motorist / Non-Motorist / Occupant

	Loca	al Rep	oort N	lumb	er *								
4		2	0	1	8	4	1	5	0				

				1	
	Unit Number Name: Last, First, Middle	AMEINA	Α	Date of Birth	Age Gender F - Female M - Male
	Address, City, State, Zip			Contact Phone - inclu	de area code
	2413 UNWIN RD Injuries Injured Taken By EMS Agency	CLEVE		104 5801 216-496-46	·
			9 9	Motorcycle Helmet 0 1	
	OL State Operator License Number OL Class ST833234 OL Class	No Valid OL End Condition Alc	cohol/Drug Suspected Alcohol Test Status	Alcohol Test Type Alcohol Test Value	Drug Test Status Drug Test Type
	Offense Charged (☐ Local Code)	rense Description	Citation Number		Hands-Free Driver Distracted By Device Used 1
	Unit Number Name: Last, First, Middle WARREN	ARCHARD		Date of Birth 0 6 2 7 1 9 5	Age Gender F - Female M - Male
IOIOIISI	Address, City, State, Zip 18019 HARLAND AVE	CLEVE	ELAND OH 44	119 Contact Phone - inclu 216-288-73	
IOLISUNOII-IV	Injuried Taken By EMS Agency	Medical Facility Injure	Safety Equipment Used	DOT Compliant Seating Position Motorcycle Helmet DOT Compliant Do 1	n Air Bag Usage Ejection Trapped
IVIC	OL State Operator License Number OL Class O H RM771755 4	No Valid OL End Condition Alc	cohol/Drug Suspected Alcohol Test Status	Alcohol Test Type Alcohol Test Value	e Drug Test Status Drug Test Type
	Offense Charged (□ Local Code)	ffense Description	Citation Number		Hands-Free Driver Distracted By Device Used
	Injuries Injured Taken By	Safety Equipment Used	99 - Unknown Safety Equipme		
	1 - No Injury/None Reported 1 - Not Transporte 2 - Possible Treated at Sce 3 - Non-Incapacitating 2 - EMS 4 - Incapacitating 3 - Police 5 - Fatal 4 - Other 9 - Unknown	Non-Motorist orward Facing 09 - None Use ear Facing 10 - Helmet Us 11 - Protective (Elbows, Kne	sed 13 - Lighting Pads Used 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 Ca 08 - Third - Middle 09 - Third - Right Side 10 - Sleeper Section of Cab (Truck) 11 - Passenger in Other Enclosed Cat (Non-Trailing Unit Such as a Bus, Pick- Cab)	13 - Trailing Unit 14 - Riding on Ve 15 - Non-Motoris irgo Area 16 - Other	ehicle Exterior (Non-Trailing Unit)	Air Bag Usage 1 - Not Deployed 2 - Deployed Front 3 - Deployed Side 4 - Deployed Both Front/Side 5 - Not Applicable 9 - Deployment Unknown
	Ejection Trapped 1 - Not Ejected 1 - Not Trapped 2 - Totally Ejected 2 - Extricated by 3 - Partially Ejected Mechanical Means	Operator License Class 1 - Class A 2 - Class B	Condition 1 - Apparently Normal 2 - Physical Impairment	5 - Fell Asleep, Fainted, Fatigued 6 - Under The Influence of	Alcohol/Drug Suspected 1 - None 2 - Yes - Alcohol Suspected
	4 - Not Applicable 3 - Extricated by Non-Mechanical Means	3 - Class C 4 - Regular Class (Ohio is "D")	3 - Emotional (Depressed, Angry, Disturbed) 4 - Illness	Medications, Drugs, Alcohol 7 - Other	3 - Yes - HBD Not Impaired 4 - Yes - Drugs Suspected 5 - Yes - Alcohol and Drugs Suspected
	4 - Not Applicable 3 - Extricated by Non-Mechanical Means	3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only Alcohol Test Type 1 - None 2 - Blood 1 - Vone Given 2 - Test Refused	4 - Illness Drug Test 1 - Non 2 - Bloo ontaminated Sample/Unusable esults Known 4 - Othe	7 - Other Type Driver Distracted By 1 - No Distraction Reported 2 - Phone 3 - Texting/E-mailing	4 - Yes - Drugs Suspected 5 - Yes - Alcohol and Drugs Suspected 6 - Other Inside the Vehicle 7 - External Distraction
	4 - Not Applicable 3 - Extricated by Non-Mechanical Means Alcohol Test Status 1 - None Given 2 - Test Refused 3 - Test Given, Contaminated Sample/Unusable 4 - Test Given, Results Known	3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only Alcohol Test Type 1 - None 2 - Blood 3 - Urine 3 - Urine 4 - Breath 2 - Fast Given, Co 4 - Breath 3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only 1 - None Given 2 - Test Refused 3 - Test Given, Co 4 - Test Given, Re	4 - Illness Drug Test 1 - Non 2 - Bloo 3 - Urin 4 - Othe esults Unknown	7 - Other Type e 1 - No Distracted By 1 - No Distraction Reported 2 - Phone 3 - Texting/E-mailing 4 - Electronic Communication 5 - Other Electronic Device	4 - Yes - Drugs Suspected 5 - Yes - Alcohol and Drugs Suspected 6 - Other Inside the Vehicle 7 - External Distraction
Scupant	4 - Not Applicable 3 - Extricated by Non-Mechanical Means 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	3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only Alcohol Test Type 1 - None 2 - Blood 3 - Urine 3 - Urine 4 - Breath 2 - Fast Given, Co 4 - Breath 3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only 1 - None Given 2 - Test Refused 3 - Test Given, Co 4 - Test Given, Re	4 - Illness Drug Test 1 - Non 2 - Bloo 3 - Urin 4 - Othe esults Unknown	7 - Other Type e	4 - Yes - Drugs Suspected 5 - Yes - Alcohol and Drugs Suspected 6 - Other Inside the Vehicle 7 - External Distraction Device) Age Gender F - Female M - Male
Occupant	4 - Not Applicable 3 - Extricated by Non-Mechanical Means 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 Unit Number Name: Last, First, Middle	3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only Alcohol Test Type 1 - None 2 - Blood 3 - Urine 3 - Urine 4 - Breath 2 - Fast Given, Co 4 - Breath 3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only 1 - None Given 2 - Test Refused 3 - Test Given, Co 4 - Test Given, Re	Drug Test 1 - Non 2 - Bloo 3 - Urin 4 - Othe	7 - Other Type e	4 - Yes - Drugs Suspected 5 - Yes - Alcohol and Drugs Suspected 6 - Other Inside the Vehicle 7 - External Distraction Device) Age Gender F - Female M - Male e area code
Occupant	4 - Not Applicable 3 - Extricated by Non-Mechanical Means 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 Unit Number Name: Last, First, Middle	3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only Alcohol Test Type 1 - None 2 - Blood 3 - Urine 4 - Breath 5 - Other 1 - None Given 2 - Test Refused 3 - Test Given, Co 4 - Test Given, Re 5 - Test Given, Re	Drug Test 1 - Non 2 - Bloo 3 - Urin 4 - Other and Taken To Safety Equipment User	7 - Other Priver Distracted By 1 - No Distraction Reported 2 - Phone 3 - Texting/E-mailing 4 - Electronic Communication 5 - Other Electronic Device (Navigation Device, Radio, DVD Date of Birth Contact Phone - includ DOT Compliant Motorcycle Seating Positio	4 - Yes - Drugs Suspected 5 - Yes - Alcohol and Drugs Suspected 6 - Other Inside the Vehicle 7 - External Distraction Device) Age Gender F - Female M - Male e area code n Air Bag Usage Ejection Trapped
Decupant	4 - Not Applicable 3 - Extricated by Non-Mechanical Means 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 Unit Number Unit Number Address, City, State, Zip Injuries Injuried Taken By EMS Agency	3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only Alcohol Test Type 1 - None 2 - Blood 3 - Urine 4 - Breath 5 - Other 1 - None Given 2 - Test Refused 3 - Test Given, Co 4 - Test Given, Re 5 - Test Given, Re	Drug Test 1 - Non 2 - Bloo 3 - Urin 4 - Other and Taken To Safety Equipment User	7 - Other Driver Distracted By 1 - No Distraction Reported 2 - Phone 3 - Texting/E-mailing 4 - Electronic Communication 5 - Other Electronic Device (Navigation Device, Radio, DVD Date of Birth Contact Phone - includ Motorcycle Helmet Seating Positio	4 - Yes - Drugs Suspected 5 - Yes - Alcohol and Drugs Suspected 6 - Other Inside the Vehicle 7 - External Distraction Device Age Gender F - Female M - Male Age Gender F - Female M - Male
Occupant	4 - Not Applicable 3 - Extricated by Non-Mechanical Means 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 Unit Number Name: Last, First, Middle Injuries Injuries Injured Taken By Unit Number Unit Number Name: Last, First, Middle	3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only Alcohol Test Type 1 - None 2 - Blood 3 - Urine 4 - Breath 5 - Other 1 - None Given 2 - Test Refused 3 - Test Given, Co 4 - Test Given, Re 5 - Test Given, Re	Drug Test 1 - Non 2 - Bloo 3 - Urin 4 - Othe and Taken To Safety Equipment Use	7 - Other Priver Distracted By 1 - No Distraction Reported 2 - Phone 3 - Texting/E-mailing 4 - Electronic Communication 5 - Other Electronic Device (Navigation Device, Radio, DVD Date of Birth Contact Phone - include DOT Compliant Motorcycle Helmet Contact Phone - include	4 - Yes - Drugs Suspected 5 - Yes - Alcohol and Drugs Suspected 6 - Other Inside the Vehicle 7 - External Distraction Device Age Gender F - Female M - Male e area code Age Gender F - Female M - Male e area code



Motorist / Non-Motorist / Occupant

Local Report Number	*				
2 0 1 8	4 1	5	0		

	Unit Number Name: Last, First, Middle GIERNACKY	DERRICK	Date of Birth 0 6 1 9 1 9 8	Age Gender F - Female M M - Male
2	Address, City, State, Zip 10716 RAYMOND AVE	CLEVELAND	Contact Phone - included Phone - include	ude area code
	Injuries Injured Taken By EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used DOT Compliant Seating Position Motorcycle	on Air Bag Usage Ejection Trapped
	OL State Operator License Number OL Clas		cted Alcohol Test Status Alcohol Test Type Alcohol Test Valu	le Drug Test Status Drug Test Type
	Offense Charged (□ Local Code)	Valid OL End 1	Citation Number	Hands-Free Driver Distracted By
	Omense Charged (□ Local Code)			Tidings fiee
	Unit Number Name: Last, First, Middle		Date of Birth	Age Gender F - Female M - Male
lotorist	Address, City, State, Zip		Contact Phone - incli	ude area code
VIOLISVINORI-IV	Injuries Injured Taken By EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used DOT Compliant Motorcycle Helmet Seating Posit	on Air Bag Usage Ejection Trapped
Ĭ	OL State Operator License Number OL Clas	s No Valid OL M/C End Alcohol/Drug Suspec	cted Alcohol Test Status Alcohol Test Type Alcohol Test Valu	Drug Test Status Drug Test Type
	Offense Charged (□ Local Code)	Offense Description	Citation Number	Hands-Free Driver Distracted By Device Used
	Injuries Injured Taken By		99 - Unknown Safety Equipment	
	1 - No Injury/None Reported 1 - Not Transported 2 - Possible Treated at St 3 - Non-Incapacitating 2 - EMS 4 - Incapacitating 3 - Police 5 - Fatal 4 - Other 9 - Unknown		Non-Motorist 05 - Child Restraint System-Forward Facing 06 - Child Restraint System-Rear Facing 10 - Helmet U 07 - Booster Seat 08 - Helmet Used Non-Motorist 10 - Non-Motorist 11 - Protective (Elbows, Kr	sed 13 - Lighting Pads Used 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-Trailling 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 Trapped 1 - Not Ejected 1 - Not Trapped 2 - Totally Ejected 2 - Extricated by Mechanical Means 4 - Not Applicable 3 - Extricated by Non-Mechanical Mean	4 - Regular Class (Ohio is "D") 4 - Illness		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 Samp 4 - Test Given, Results Known 5 - Test Given, Results Unknown	Drug Test Type 1 - None 2 - Blood 3 - Urine 4 - Other 1 - No Distracted By 1 - No Distraction Reported 2 - Phone 3 - Texting/E-mailing 4 - Electronic Communication 5 - Other Electronic Device, (Navigation Device, Radio, DVI	
_	Unit Number Name: Last, First, Middle		Date of Birth	Age Gender F - Female M - Male
Cccupan	Address, City, State, Zip		Contact Phone - include	de area code
	Injuries Injured Taken By EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used DOT Compliant Motorcycle Helmet Seating Position	on Air Bag Usage Ejection Trapped
	Unit Number Name: Last, First, Middle		Date of Birth	Age Gender F - Female M - Male
ccupant	Address, City, State, Zip		Contact Phone - include	
ر	Injuries Injured Taken By EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used DOT Compliant Seating Position	on Air Bag Usage Ejection Trapped
	$ \sqcup \sqcup $		Motorcycle Helmet	



OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 20184150	REPORTING AGENCY GARFIELD HEIGHTS	DATE OF CRASH M 11 D 11 Y 2018
IN COUNTY OF 18	CRASH LOCATION IR 480 480E Broadway	
Driver of Unit #1 was traveli	ing on IR480 E in lane #4, Driver observed traffic	slowing
ahead and was unable to st	top in time, subsequently striking Unit #2 in the ce	enter rear.
Driver of Unit #2 was traveli	ing on IR480 E in lane #4, Driver observed traffic	slowing
ahead and stopped, Unit #2	2 was suddenly struck in the center rear by Unit #	1. While
	#2 was pushed into Unit #3, striking the center rea	
3.		
0.		
Driver of Unit #3 was traveli	ing on IR480 E in lane #4, Driver was stopped in	traffic and
	center rear by Unit #2. Driver of Unit #3 exchange	30
information with Unit #2 and	d #3 and then left prior to police arrival.	
	OFFICER'S SIGNATURE	BADGE NUMBER 023