UNIT #1 WAS W/B ON GARFIELD BLVD AND WAS
STOPPED TO TURN LEFT ONTO E. 94TH STREET. UNIT #2 WAS TRAVELING W/B ON GARFIELD BLVD BEHIND UNIT #1 AND ATTEMPTED TO STOP BEHIND UNIT #1 BUT SLID ON THE SNOW COVERED ROADWAY AND STRUCK THE REAR OF UNIT #1.
<table>
<thead>
<tr>
<th>Event Type</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>01 - None</td>
<td>01 - Non-Collision</td>
</tr>
<tr>
<td>02 - Taxi</td>
<td>02 - Collision</td>
</tr>
<tr>
<td>03 - Rental Truck (Over 10K lbs)</td>
<td>03 - Striking</td>
</tr>
<tr>
<td>04 - Bus (School, Public or Private)</td>
<td>04 - Striking/Struck</td>
</tr>
<tr>
<td>05 - Bus</td>
<td>05 - Striking/Struck</td>
</tr>
<tr>
<td>06 - Bus</td>
<td>06 - Striking/Struck</td>
</tr>
<tr>
<td>07 - Bus</td>
<td>07 - Striking/Struck</td>
</tr>
<tr>
<td>08 - Bus</td>
<td>08 - Striking/Struck</td>
</tr>
<tr>
<td>09 - Ambulance</td>
<td>09 - Striking/Struck</td>
</tr>
<tr>
<td>10 - Fire</td>
<td>10 - Striking/Struck</td>
</tr>
<tr>
<td>11 - Highway/Maintenance</td>
<td>11 - Striking/Struck</td>
</tr>
<tr>
<td>12 - Military</td>
<td>12 - Striking/Struck</td>
</tr>
<tr>
<td>13 - Police</td>
<td>13 - Striking/Struck</td>
</tr>
<tr>
<td>14 - Public Utility</td>
<td>14 - Striking/Struck</td>
</tr>
<tr>
<td>15 - Other Government</td>
<td>15 - Striking/Struck</td>
</tr>
<tr>
<td>16 - Control Equipment</td>
<td>16 - Striking/Struck</td>
</tr>
<tr>
<td>17 - Farm Vehicle</td>
<td>17 - Striking/Struck</td>
</tr>
<tr>
<td>18 - Farm Equipment</td>
<td>18 - Striking/Struck</td>
</tr>
<tr>
<td>19 - Motorhome</td>
<td>19 - Striking/Struck</td>
</tr>
<tr>
<td>20 - Golf Cart</td>
<td>20 - Striking/Struck</td>
</tr>
<tr>
<td>21 - Train</td>
<td>21 - Striking/Struck</td>
</tr>
<tr>
<td>22 - Other (Explain in Narrative)</td>
<td>22 - Striking/Struck</td>
</tr>
<tr>
<td>01 - U-Shape</td>
<td>01 - Non-Collision</td>
</tr>
<tr>
<td>02 - Center Line</td>
<td>02 - Non-Collision</td>
</tr>
<tr>
<td>03 - Right Front</td>
<td>03 - Non-Collision</td>
</tr>
<tr>
<td>04 - Right Side</td>
<td>04 - Non-Collision</td>
</tr>
<tr>
<td>05 - Rear</td>
<td>05 - Non-Collision</td>
</tr>
<tr>
<td>06 - Rear Center</td>
<td>06 - Non-Collision</td>
</tr>
<tr>
<td>07 - Left</td>
<td>07 - Non-Collision</td>
</tr>
<tr>
<td>08 - Other</td>
<td>08 - Non-Collision</td>
</tr>
<tr>
<td>09 - Other</td>
<td>09 - Non-Collision</td>
</tr>
<tr>
<td>10 - None</td>
<td>10 - Non-Collision</td>
</tr>
<tr>
<td>11 - Left Side</td>
<td>11 - Non-Collision</td>
</tr>
<tr>
<td>12 - Other</td>
<td>12 - Non-Collision</td>
</tr>
<tr>
<td>13 - Negotiating a Curve</td>
<td>13 - Non-Collision</td>
</tr>
<tr>
<td>14 - Other Motorist Action</td>
<td>14 - Non-Collision</td>
</tr>
<tr>
<td>15 - Entering or Crossing Specific Location</td>
<td>15 - Non-Collision</td>
</tr>
<tr>
<td>16 - Walking, Running, Jogging, Playing, Cycling</td>
<td>16 - Non-Collision</td>
</tr>
<tr>
<td>17 - Working</td>
<td>17 - Non-Collision</td>
</tr>
<tr>
<td>18 - Pushing Vehicle</td>
<td>18 - Non-Collision</td>
</tr>
<tr>
<td>19 - Approaching or Leaving Vehicle</td>
<td>19 - Non-Collision</td>
</tr>
<tr>
<td>20 - Standing</td>
<td>20 - Non-Collision</td>
</tr>
<tr>
<td>21 - Other Non-Motorist Action</td>
<td>21 - Other Non-Motorist Action</td>
</tr>
</tbody>
</table>

### Non-Collision Events
- 01 - Equipment Failure
- 02 - Fire/Explosion
- 03 - Immersion
- 04 - Jackknife
- 05 - Cargo/Equipment Loss or Shift
- 06 - Equipment Failure
- 07 - Separation of Units
- 08 - Run Off Road Right
- 09 - Run Off Road Left
- 10 - Cross Median
- 11 - Cross Center Line
- 12 - Opposite Direction of Travel
- 13 - Other Non-Collision
- 41 - Other Post, Pole or Support
- 42 - Curb
- 43 - Curb
- 44 - Ditch
- 45 - Embankment
- 46 - Fence
- 47 - Mailbox
- 48 - Tree
- 49 - Fire Hydrant
- 50 - Work Zone Maintenance Equipment
- 51 - Wall, Building, Tunnel
- 52 - Other Fixed 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/Luminaire Support
- 40 - Utility Pole

### Contributing Circumstances
#### Primary
- 01 - None
- 02 - Failure to Yield
- 03 - Ran Red Light
- 04 - Ran Stop Sign

#### Secondary
- 05 - Exceeded Speed Limit
- 06 - Unsafe Speed
- 07 - Improper Turn
- 08 - Left of Center
- 09 - Followed Too Closely/ACDA
- 10 - Improper Lane Change
- 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 Shifting/Falling/Rolling
- 21 - Other Improper Action

### Non-Motorist Location Prior to Impact
- 01 - Intersection - Marked Crosswalk
- 02 - Intersection - Other
- 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
- 01 - Personal or Hit/Skip
- 02 - Commercial
- 03 - Government
- 04 - Private
- 05 - Government
- 06 - Government
- 07 - Personal
- 08 - Private
- 09 - Private
- 10 - Private
- 11 - Private
- 12 - Private

### Pre-Crash Actions
#### Motorist
- 01 - Straight Ahead
- 02 - Backing
- 03 - Changing Lanes
- 04 - Overtaking/Passing
- 05 - Making Right Turn
- 06 - Making Left Turn
- 07 - Making U-Turn
- 13 - Negotiating a Curve
- 14 - Other Motorist Action
- 15 - Entering or Crossing Specific Location
- 16 - Walking, Running, Jogging, Playing, Cycling
- 17 - Working
- 18 - Pushing Vehicle
- 19 - Approaching or Leaving Vehicle
- 20 - Standing

### Damage Scale
- 01 - None
- 02 - Minor
- 03 - Functional
- 04 - Disabling
- 05 - Inoperable

### Carrier Information
- Last, First, Middle
- Carrier Identification Number: 910451924
- Carrier Name, Address, City, State, Zip

### HOSR304 OH1U (Rev 01/12)
**Unit Number**: 02  
**Owner Name**: WALKER KEIRRA B  
**Owner Phone Number**: 216-926-1588

**Local Report Number**: 4392784

**Date**: 01/12

<table>
<thead>
<tr>
<th>Carriage</th>
<th>Address/Name, City, State, Zip</th>
<th>Owner Address, City, State, Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>4867 E 90TH ST</td>
<td>WALKER KEIRRA B 216-926-1588</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>License Plate Number</th>
<th>Vehicle Identification Number</th>
<th>Policy Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>HLP1761</td>
<td>4T1SJK12E9NU0598438401</td>
<td>4392784</td>
</tr>
</tbody>
</table>

**Non-Motorist Location Prior to Impact**

<table>
<thead>
<tr>
<th>Type of Use</th>
<th>Unit Type</th>
<th>Most Damaged Area</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>01</td>
<td>09</td>
<td>01 - None</td>
</tr>
<tr>
<td>1</td>
<td>03</td>
<td>17</td>
<td>15 - Operating Vehicle in Negligent Manner</td>
</tr>
</tbody>
</table>

**Pre-Crash Actions**

<table>
<thead>
<tr>
<th>Motorist</th>
<th>Sequence of Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>06</td>
</tr>
</tbody>
</table>

**Contributing Circumstances**

<table>
<thead>
<tr>
<th>Primary</th>
<th>Secondary</th>
</tr>
</thead>
<tbody>
<tr>
<td>09</td>
<td>99 - Unknown</td>
</tr>
</tbody>
</table>

**Collision with Person, Vehicle or Object Not Fixed**

<table>
<thead>
<tr>
<th>Event</th>
<th>Unit Speed</th>
<th>Posted Speed</th>
<th>Traffic Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>07</td>
<td>01 - No Controls</td>
<td></td>
</tr>
</tbody>
</table>

**Non-Collision Events**

<table>
<thead>
<tr>
<th>Event</th>
<th>Unit Speed</th>
<th>Posted Speed</th>
<th>Traffic Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>06</td>
<td>07</td>
<td>01 - No Controls</td>
<td></td>
</tr>
</tbody>
</table>

**Non-Motorist**

- 15 - Operating Vehicle in Negligent Manner
- 21 - 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

**Damage Scale**

- 3

**Damaged Area**

- Hit / Skid Unit

**Has HM Placard**

- Yes

**US DOT**

- 03 - Intersection - Other
- 06 - Bicycle Lane
- 09 - Median/Crossing Island
- 10 - driveway Access
- 11 - Shared-Use Path or Trail
- 12 - Non-Trafficway Area
- 99 - Other/Unknown

**US DOT**

- 03 - Intersection - Other
- 04 - Median/Crossing Island
- 09 - Shared-Use Path or Trail
- 10 - Non-Trafficway Area
- 99 - Other/Unknown

**Traffic Control**

- 01 - No Controls
- 03 - Yield Sign
- 04 - Traffic Signal
- 05 - Traffic Signals
- 06 - School Zone

**Carriage**

- 01 - None
- 10 - Improper Lane Change
- 30 - Wrong Side of the Road
- 31 - Other Non-Motorist Action

**Non-Collision Events**

- 01 - No Controls
- 03 - Red Light
- 05 - Improper Lane Change
- 20 - Other Improper Action

**Hazardous Material**

- 01 - NON-Hazardous
- 02 - Hazardous Material
- 03 - Hazardous Material

**WALKER KEIRRA B**

- 216-926-1588

**Owner Address, City, State, Zip**

- 4867 E 90TH ST

**License Plate Number**

- HLP1761

**Vehicle Identification Number**

- 4T1SJK12E9NU0598438401

**Policy Number**

- 4392784
<table>
<thead>
<tr>
<th>Unit Number</th>
<th>Name: Last, First, Middle</th>
<th>Address, City, State, Zip</th>
<th>Date of Birth</th>
<th>Age</th>
<th>Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td>001</td>
<td>LEE SANTIAGO RODRIGUEZ EDWARD</td>
<td>4866 E 96TH ST GARFIELD HTS OH 44125</td>
<td>06/21/95</td>
<td>23</td>
<td>F - Female</td>
</tr>
<tr>
<td>002</td>
<td>HOWARD KOLIN BF</td>
<td>4867 E 90TH ST GARFIELD HTS OH 44125</td>
<td>03/12/97</td>
<td>17</td>
<td>M - Male</td>
</tr>
</tbody>
</table>

### Injuries

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

### Identity

- 1 - Not Transported / Treated at Scene
- 2 - EMS
- 3 - Police
- 4 - Other
- 5 - Unknown

### Operator License

- OL Class
- No Valid OL
- MC End

### Condition Alcohol/Drug Suspected

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

### Alcohol Test Type

- 1 - None
- 2 - Blood
- 3 - Urine
- 4 - Breath
- 5 - Other

### 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 Inside the Vehicle
- 6 - External Distraction

### DOT Compliant

- Motorcycle Helmet
- Hands-Free Device Used

### Citation Number

- 01
- 02
- 03
- 04
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- 99

### 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

### 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

### Safety Equipment Used

- 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-Front Facing
- 06 - Child Restraint System-Rear Facing
- 07 - Booster Seat
- 08 - Helmet Used
- 09 - Passenger in Other Enclosed Cargo Area (Non-Trailing Unit Such as a Bus, Pick-up with Cab)
- 10 - Sleeper Section of Cab
- 11 - Passenger in Other Enclosed Cargo Area (Motorcycle Side Car)
- 12 - Passenger in Unenclosed Cargo Area
- 13 - Trailing Unit
- 14 - Riding on Vehicle Exterior (Non-Trailing Unit)
- 15 - Non-Motorist
- 16 - Other
- 99 - Unknown

### DOT Compliant

- Motorcycle Helmet
- Hands-Free Device Used

### Driver Distracted By

- 1 - No Distraction Reported
- 2 - Phone
- 3 - Texting/E-mailing
- 4 - Electronic Communication Device
- 5 - Other Inside the Vehicle
- 6 - External Distraction

### Field Sobriety Test

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

### Contact Phone - Include area code

- 216-456-4473
- 216-926-1588