**NARRATIVE**

**UNITS 1 AND 2 WERE STOPPED AT A RED LIGHT ON GRANGER RD / E.98TH IN THE RIGHT LANE. THE LEFT TURN GREEN ARROW ACTIVATED AT WHICH TIME UNIT 1 MISTAKENLY BEGAN TO DRIVE FORWARD, STRIKING UNIT 2 AT THE REAR.**
### VEHICLE INFORMATION

- **Make**: Hyundai
- **Model**: Tucson
- **Owner Address**: 1512 W 4th St, Ontario, OH 44096
- **License Plates**: OH1U 1/19, 7460-0820
- **Type of Use**: Commercial
- **In Emergency Response**: Yes

### TRAFFIC EVENTS

The traffic events include:

- **Oversize/Overload**: 1
- **Fire/Extinguisher**: 2
- **Amber/Flasher**: 4
- **Fog**: 4
- **Impact Attenuator/Cushion**: 25

### COLLISION INFORMATION

- **Fixed Object**: A fixed object
- **Collision Type**: Struck

### DAMAGE INFORMATION

- **Damage Scale**: 3
- **Damage**: Functional Damage

### LOCAL REPORT NUMBER

- **Local Report Number**: 20191097
- **Damage Area**: 
  - 1: None
  - 2: Minor Damage
  - 3: Functional Damage
  - 4: Disabling Damage
  - 5: Unknown

### INITIAL POINT OF CONTACT

- **Primary Location**: 0
- **Type**: 12 - First Responder
- **Area**: 10 - Incident Scene

### TRAFFIC FLOW

- **Roadway Configuration**: 1
  - **Number of Through Lanes**: 4
  - **Traffic Control**: 1 - Roundabout
    - 2 - Two-Way
    - 3 - Flasher
    - 4 - No Control

### UNIT SPEED/DETECTED SPEED

- **Unit Speed**: 1
  - **State/Estimated Speed**: 1
  - **Calculated/EDR**: 2
  - **Undetermined**: 3

### POSTED SPEED

- **Speed Limit**: 30 - Guardrail Face
- **Speed Limit**: 30 - Bridge Rail

### SEQUENCE OF EVENTS

1. Oversize/Overload
2. Fire/Extinguisher
3. Amber/Flasher
4. Fog
5. Impact Attenuator/Cushion
6. Bridge Elevation Structure
7. Bridge Perp加固
8. Bridge Rail
9. Guardrail Face

### CONTRIBUTING CIRCUMSTANCES

- **Defects**: 3 - Immersion
- **Vehicle**: 3 - Immersion
- **Action**: 3 - Immersion
- **Function**: 3 - Immersion

### SPECIAL FUNCTION

- **Type**: 1 - Turn Signals
- **Location**: 1 - Intersection - Other
- **Marked**: 1 - Intersection - Other

### HAZARDOUS MATERIAL

- **description**: Not applicable

### NUMBER OF OCCUPANTS

- **1 - No Occupants
  - 2 - No Occupants
  - 3 - No Occupants
  - 4 - No Occupants

### OWNER ADDRESS

- **Last Name**: Ean Holdings LLC
- **First Name**: Name
- **Middle Name**: Last
- **Street, City, State**: w. 4th, Ontario, OH
- **Zip**: 44096

### VEHICLE IDENTIFICATION

- **License Plates**: OH1U 1/19, 7460-0820
- **Owner Address**: 1512 W 4th St, Ontario, OH 44096
- **Vehicle Make**: Hyundai
- **Vehicle Model**: Tucson
- **License Plate**: OH1U 1/19
- **Vehicle Identification**: GRB1024
- **Vehicle Type**: Non-Motorist Contributing

### UNIT TYPE

- **Type**: 1 - Non-Cargo Body Type
  - **Marked**: 1 - Intersection - Other
  - **Unmarked**: 1 - Intersection - Other
  - **Marked**: 1 - Intersection - Other
  - **Unmarked**: 1 - Intersection - Other

### SITE OF EVENT

- **Type**: 1 - Non-Cargo Body Type
  - **Marked**: 1 - Intersection - Other
  - **Unmarked**: 1 - Intersection - Other

### DAMAGE INFORMATION

- **Damage Class**: 5 - Bus-Transit/Commuter
- **Placard**: 5 - Bus-Transit/Commuter

### MODEL UNIT

- **Type**: 1 - Non-Cargo Body Type
  - **Marked**: 1 - Intersection - Other
  - **Unmarked**: 1 - Intersection - Other

### DAMAGE LOCATION AT IMPACT

- **Nature and Location**: 1 - Intersection - Other
- **Marked**: 1 - Intersection - Other
- **Unmarked**: 1 - Intersection - Other

### ACTION

- **Type**: 3 - Going
  - **Marked**: 3 - Going
  - **Unmarked**: 3 - Going

### CONTRIBUTING CIRCUMSTANCES

- **Defects**: 3 - Immersion
- **Vehicle**: 3 - Immersion
- **Action**: 3 - Immersion
- **Function**: 3 - Immersion

### SEQUENCE OF EVENTS

1. Oversize/Overload
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### CONTRIBUTING CIRCUMSTANCES

- **Defects**: 3 - Immersion
- **Vehicle**: 3 - Immersion
- **Action**: 3 - Immersion
- **Function**: 3 - Immersion
### Event Information

**Event:** 21-0191097

**Date:** 01/19/2021

**Location:** 5237 E 104TH ST, GARFIELD HTS, OH 44125

**Vehicle:** GZX4255, WHI Acadia

**License Plate:** OHGARFIELD HTSE 104TH ST

**Owner:** SHIPLEY WILBERT E

**Commercial Carrier:** NATIONWIDE

### Event Details

**Sequence of Events:**

1. **First Harmful Event:**
   - Driver Assistance
   - Autonomous Mode
   - Sensor Failure
   - Intersection
   - This Event

2. **Next Harmful Event:**
   - Sensor Failure
   - Intersection
   - This Event

**Severe Damage:**

- Impact with Damaged Vehicle
- Loss of Control
- Turn Signal
- Pedestrian
- Intermittent

**Damaged Components:**

- Vehicle Body
- Tire
- Engine
- Body Panel

**Contributing Circumstances:**

- Fuel and Gasoline
- Speed Limit
- Road Surface
- Weather Conditions

**Events:**

- Collision with Fixed Object
- Impact Attenuator
- Crash Barrier
- Bridge Parapet
- Guardrail
- Median
- Utility Pole
- Traffic Sign
- Carrying Cargo
- Equipment Failure
- Off-Route"
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<th>NAME</th>
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**Driver Distraction**

- 1 - Not distracted
- 2 - Physically impaired
- 3 - Prosthetic aid
- 4 - Other distractions

**Ejection**

- 1 - Not ejected
- 2 - Partially ejected
- 3 - Totally ejected
- 4 - Not applicable

**Trapped**

- 1 - Not trapped
- 2 - Extricated by mechanical means
- 3 - Fired by non-mechanical means

**D.O.B.**

- 1 - 1991
- 2 - 1992
- 3 - 1993
- 4 - 1994
- 5 - 1995
- 6 - 1996
- 7 - 1997
- 8 - 1998
- 9 - 1999
- 10 - Other

**Medication**

- 1 - None
- 2 - Urine
- 3 - Saliva
- 4 - Other

**Occupation**

- 1 - Apparent normal
- 2 - Illness
- 3 - Other

**Restraint**

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

**Drug Test**

- 1 - Apparent normal
- 2 - Illness
- 3 - Other

**Drug Test Type**

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

**Drug Test Result**

- 1 - None
- 2 - Positive
- 3 - Negative
- 4 - Other

**Drug Type**

- 1 - Alcohol
- 2 - Opiates/Opioids
- 3 - Cannabis
- 4 - Other

**Legal Age**

- 1 - Not applicable
- 2 - Under
- 3 - Over

**Operator License Restriction(s)**

- 1 - None
- 2 - CDL Intrastate Only
- 3 - Limited - Other
- 4 - learner's permit
- 5 - Motor Scooter
- 6 - Class C
- 7 - Class B
- 8 - Class A
- 9 - Other/Unknown

**Operator License Number**

- 1 - OH1M 1/19
- 2 - OH2M 1/19
- 3 - OH3M 1/19
- 4 - OH4M 1/19

**Location**

- 1 - Forward facing
- 2 - Shoulder seat
- 3 - Helmet used
- 4 - Protective face mask
- 5 - Refractive clothing
- 6 - Lighting
- 7 - Pedestrian
- 8 - Bicycle only
- 9 - Other

**Policy**

- 1 - None
- 2 - Shoulder belt only
- 3 - Lap belt only
- 4 - Shoulder and lap belt
- 5 - Child restraint system - forward facing
- 6 - Child restraint system - rear facing
- 7 - Booster seat
- 8 - Helmet used
- 9 - Protective face mask
- 10 - Reflective clothing
- 11 - Lighting
- 12 - Pedestrian
- 13 - Bicycle only

**Restriction**

- 1 - None
- 2 - CDL Intrastate Only
- 3 - Limited - Other
- 4 - Learner's Permit
- 5 - Class C
- 6 - Class B
- 7 - Class A
- 8 - Other

**Safety Equipment**

- 1 - None
- 2 - Shoulder belt only
- 3 - Lap belt only
- 4 - Shoulder and lap belt
- 5 - Child restraint system - forward facing
- 6 - Child restraint system - rear facing
- 7 - Booster seat
- 8 - Helmet used
- 9 - Protective face mask
- 10 - Reflective clothing
- 11 - Lighting
- 12 - Pedestrian
- 13 - Bicycle only
- 14 - Other

**Status**

- 1 - None
- 2 - Positive
- 3 - Negative
- 4 - Other

**Test Status**

- 1 - None
- 2 - Positive
- 3 - Negative
- 4 - Other
### OCCUPANT / WITNESS ADDENDUM

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<th>LOCAL REPORT NUMBER</th>
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| 5237 E. 104TH  GARFIELD HTS OH 44125 | |
| INJURIES | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) |
| 5 | | |
| SAFETY EQUIPMENT USED | DOT-COMPLIANT MC HELMET | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED |
| 0 | 4 | 1 | 1 | 1 |

### INJURIES | SAFETY EQUIPMENT USED | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED |
| 1 - FATAL | | | | | |
| 2 - SUSPECTED SERIOUS INJURY | | | | | |
| 3 - SUSPECTED MINOR INJURY | | | | | |
| 4 - POSSIBLE INJURY | | | | | |
| 5 - NO APPARENT INJURY | | | | | |

| INJURED TAKEN BY | |
| 1 - NOT TRANSPORTED / TREATED AT SCENE | |
| 2 - EMS | |
| 3 - POLICE | |
| 9 - OTHER / UNKNOWN | |

### GENDER |

| F - FEMALE | |
| M - MALE | |
| U - OTHER/UNKNOWN | |

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