UNIT #1 WAS TRAVELING W/B ON IR-480 IN LANE #3

AND SLOWED TO A STOP FOR SLOWING TRAFFIC

AHEAD, UNIT #2 WAS TRAVELING BEHIND UNIT #1.

ALSO IN LANE #3, AND STRUCK THE REAR OF UNIT #2 AS TRAFFIC WAS SLOWING DOWN.
### Event Summary

**Event:**
- **Date:** 01-01-19
- **Location:** GARFIELD HTS, OH 44125
- **Driver:** JURCAK DAVID G
- **Vehicle:** CHEVROLET
- **Event:** Multi-vehicle collision with subsequent fire/explosion

### Relevant Details
- **Vehicle Information:**
  - **Make:** Chevrolet
  - **Model:** Silverado
  - **Year:** 2010

### Circumstances
- **Date of Incident:** 01-01-19
- **Location:** GARFIELD HTS, OH 44125
- **Contributing Factors:**
  - **Weather Conditions:** Clear
  - **Road Conditions:** Dry
  - **Visibility:** Good

### Damaged Areas
- **Vehicles:**
  - **Chevrolet:** Damage to rear bumper and side
  - **Other:** Damage to front bumper and hood
- **Infrastructure:**
  - **Guardrail:** Damaged
  - **Lighting:** Damaged

### Traffic
- **Type:** Multi-vehicle collision
- **Severity:** Severe

### Initial Contact
- **Time:** 08:00
- **Location:** GARFIELD HTS, OH 44125

### Traffic Control
- **Lighting:** Red/white lights
- **Signage:** Stop sign

### Investigation
- **Evidence Collected:**
  - **Photos:** Scene photos
  - **Videos:** Dashcam footage
  - **Documents:** Police report

### Follow-up
- **Follow-up Date:** 01-02-19
- **Follow-up Location:** GARFIELD HTS, OH 44125

---

### Diagrams and Drawings

- [Diagram of Vehicle Locations and Damage](Image)
- [Traffic Flow Diagram](Image)
- [Event Diagram](Image)
<table>
<thead>
<tr>
<th>UNIT #</th>
<th>NAME LAST, FIRST, MIDDLE</th>
<th>ADDRESS STREET, CITY, STATE, ZIP</th>
<th>PHONE NUMBER</th>
<th>OPERATOR LICENSE NUMBER</th>
<th>DRIVER AGE</th>
<th>GENDER</th>
<th>DATE OF BIRTH</th>
<th>LOCAL CODE</th>
<th>SEATING POSITION</th>
<th>AIR BAG USAGE</th>
<th>TEST RESULT</th>
<th>LOCAL CODE</th>
<th>SEATING POSITION</th>
<th>AIR BAG USAGE</th>
<th>TEST RESULT</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>JURCAK DAVID G</td>
<td>ROCKWOOD RD GARFIELD HTS OH 44125</td>
<td></td>
<td>333.03 ACDA</td>
<td>01</td>
<td>M</td>
<td>05 19 95 1</td>
<td>G20194050</td>
<td>00</td>
<td>01</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02</td>
<td>SHIELDS RINE HANNAH LEI</td>
<td>Oak Hill F BOWLING GREEN OH 43402</td>
<td></td>
<td>05 05 0 1 1 9 9 5 1</td>
<td>11</td>
<td>M</td>
<td>05 19 95 1</td>
<td></td>
<td>01</td>
<td>01</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Notes
- **DATE OF BIRTH**: 05 19 95 1
- **LOCAL CODE**: G20194050
- **TEST RESULT**: 1
- **GENDER**: M

### Additional Information
- **Operator License Number**: 333.03 ACDA
- **Driver Age**: 01
- **Seating Position**: 00
- **Air Bag Usage**: 01
- **Test Result**: 1

### Other Details
- **Operator**: JURCAK DAVID G
- **Residence**: ROCKWOOD RD GARFIELD HTS OH 44125
- **Contact Phone**: Included
- **Operator's License Number**: 05 05 0 1 1 9 9 5 1
- **Date of Birth**: 05 19 95 1
- **Local Code**: G20194050
- **Seating Position**: 01
- **Air Bag Usage**: 01
- **Test Result**: 1
- **Gender**: M

---

### Supporting Details
- **Emergency Services**: 4781
- **Operator License Number**: 333.03 ACDA
- **Driver Age**: 01
- **Seating Position**: 00
- **Air Bag Usage**: 01
- **Test Result**: 1
- **Gender**: M

---

### Additional Notes
- **Operator**: SHIELDS RINE HANNAH LEI
- **Residence**: Oak Hill F BOWLING GREEN OH 43402
- **Contact Phone**: Included
- **Operator's License Number**: 05 05 0 1 1 9 9 5 1
- **Date of Birth**: 05 19 95 1
- **Local Code**: G20194050
- **Seating Position**: 01
- **Air Bag Usage**: 01
- **Test Result**: 1
- **Gender**: M

---

### Technical Details
- **Operator License Number**: 333.03 ACDA
- **Driver Age**: 01
- **Seating Position**: 00
- **Air Bag Usage**: 01
- **Test Result**: 1
- **Gender**: M

---

### Further Information
- **Operator**: JURCAK DAVID G
- **Residence**: ROCKWOOD RD GARFIELD HTS OH 44125
- **Contact Phone**: Included
- **Operator's License Number**: 05 05 0 1 1 9 9 5 1
- **Date of Birth**: 05 19 95 1
- **Local Code**: G20194050
- **Seating Position**: 01
- **Air Bag Usage**: 01
- **Test Result**: 1
- **Gender**: M

---

### Additional Observations
- **Operator**: SHIELDS RINE HANNAH LEI
- **Residence**: Oak Hill F BOWLING GREEN OH 43402
- **Contact Phone**: Included
- **Operator's License Number**: 05 05 0 1 1 9 9 5 1
- **Date of Birth**: 05 19 95 1
- **Local Code**: G20194050
- **Seating Position**: 01
- **Air Bag Usage**: 01
- **Test Result**: 1
- **Gender**: M