

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

2 | 0 | 1 | 9 | 0 | 4 | 9 | 1

PHOTOS TAKEN OH-2 OH-3
 SECONDARY CRASH OH-1P OTHER
 Private Property

LOCAL INFORMATION
 REPORTING AGENCY NAME *
GARFIELD HEIGHTS PD NCIC *
 0 | 1 | 8 | 2 | 0

HIT/SKIP
 1 - Solved NUMBER OF UNITS
 2 - Unsolved 0 | 2
 UNIT IN ERROR
 98 - ANIMAL 0 | 2
 99 - UNKNOWN

COUNTY *
 1 | 8
 LOCALITY *
 1

LOCATION: CITY, VILLAGE, TOWNSHIP *
GARFIELD HTS

CRASH DATE/TIME *
 0 | 2 | 10 | 20 | 19 | 1 | 14 | 6

CRASH SEVERITY
 5 - 1 - FATAL
 2 - SERIOUS INJURY SUSPECTED
 3 - MINOR INJURY SUSPECTED
 4 - INJURY POSSIBLE
 5 - PROPERTY DAMAGE ONLY

ROUTE TYPE ROUTE NUMBER PREFIX
 1 - NORTH
 2 - SOUTH
 3 - EAST
 4 - WEST

LOCATION ROAD NAME
ANTENUCCI

ROAD TYPE LATITUDE DECIMAL DEGREES
 B | L 4 | 1 | . 4 | 1 | 3 | 0 | 1 | 5

ROUTE TYPE ROUTE NUMBER PREFIX
 1 - NORTH
 2 - SOUTH
 3 - EAST
 4 - WEST

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)
TURNEY

ROAD TYPE LONGITUDE DECIMAL DEGREES
 R | D 8 | 1 | . 6 | 0 | 3 | 1 | 4 | 4

REFERENCE POINT
 1 - INTERSECTION
 2 - MILE POST
 3 - HOUSE #
 1

ROUTE TYPE ROUTE TYPE
 IR - INTERSTATE ROUTE (TP)
 US - FEDERAL US ROUTE
 SR - STATE ROUTE
 CR - NUMBERED COUNTY ROUTE
 TR - NUMBERED TOWNSHIP ROUTE

INTERSECTION RELATED
 WITHIN INTERSECTION OR ON APPROACH
 WITHIN INTERCHANGE AREA
 NUMBER OF APPROACHES
 2

DISTANCE FROM REFERENCE
 DISTANCE UNIT OF MEASURE
 1 - Miles
 2 - Feet
 3 - Yards

ROAD TYPE
 AL - ALLEY HW - HIGHWAY RD - ROAD
 AV - AVENUE LA - LANE SQ - SQUARE
 BL - BOULEVARD MP - MILEPOST ST - STREET
 CR - CIRCLE OV - OVAL TE - TERRACE
 CT - COURT PK - PARKWAY TL - TRAIL
 DR - DRIVE PI - PIKE WA - WAY
 HE - HEIGHTS PL - PLACE

ROADWAY
 ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT
 0 | 1
 1 - ON ROADWAY
 2 - ON SHOULDER
 3 - IN MEDIAN
 4 - ON ROADSIDE
 5 - ON GORE
 6 - OUTSIDE TRAFFICWAY
 7 - ON RAMP
 8 - OFF RAMP
 9 - CROSSOVER
 10 - DRIVEWAY / ALLEY ACCESS
 11 - RAILWAY GRADE CROSSING
 12 - SHARED USE PATHS OR TRAILS
 13 - BIKE LANE
 14 - TOLL BOOTH
 99 - OTHER / UNKNOWN

MANNER OF CRASH COLLISION/IMPACT
 2
 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT
 2 - REAR-END
 3 - HEAD-ON
 4 - REAR-TO-REAR
 5 - BACKING
 6 - ANGLE
 7 - SIDESWIPE, SAME DIRECTION
 8 - SIDESWIPE, OPPOSITE DIRECTION
 9 - OTHER / UNKNOWN

DIRECTION OF TRAVEL
 1 - NORTH
 2 - SOUTH
 3 - EAST
 4 - WEST

MEDIAN TYPE
 1 - DIVIDED FLUSH MEDIAN (<4 FEET)
 2 - DIVIDED FLUSH MEDIAN (≥4 FEET)
 3 - DIVIDED, DEPRESSION MEDIAN (ANY TYPE)
 4 - DIVIDED, RAISED MEDIAN (ANY TYPE)
 9 - OTHER / UNKNOWN

WORK ZONE RELATED
 WORKERS PRESENT
 LAW ENFORCEMENT PRESENT
 ACTIVE SCHOOL ZONE

WORK ZONE TYPE
 1 - LANE CLOSURE
 2 - LANE SHIFT/CROSSOVER
 3 - WORK ON SHOULDER OR MEDIAN
 4 - INTERMITTENT OR MOVING WORK
 5 - OTHER

LOCATION OF CRASH IN WORK ZONE
 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN
 2 - ADVANCE WARNING AREA
 3 - TRANSITION AREA
 4 - ACTIVITY AREA
 5 - TERMINATION AREA

CONTOUR
 1
 1 - STRAIGHT LEVEL
 2 - STRAIGHT GRADE
 3 - CURVE LEVEL
 4 - CURVE GRADE
 9 - OTHER / UNKNOWN

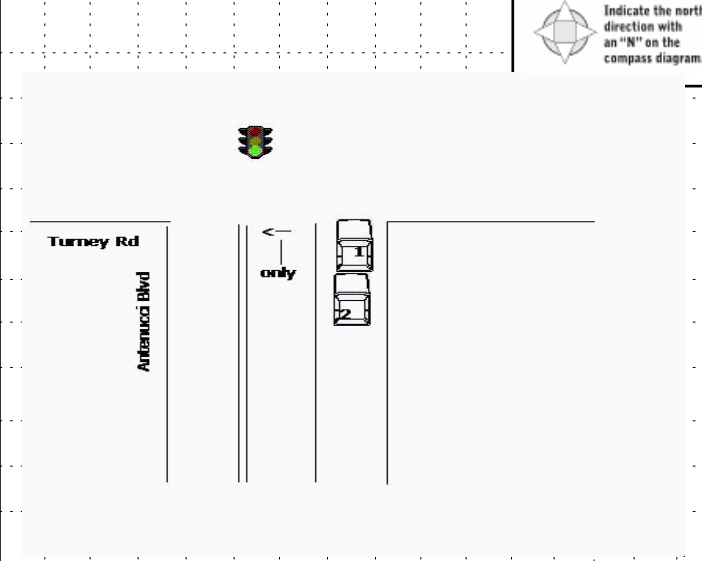
CONDITIONS
 1
 1 - DRY
 2 - WET
 3 - SNOW
 4 - ICE
 5 - SAND, MUD, DIRT, OIL, GRAVEL
 6 - WATER (STANDING, MOVING)
 7 - SLUSH
 9 - OTHER/UNKNOWN

SURFACE
 2
 1 - CONCRETE
 2 - BLACKTOP, BITUMINOUS, ASPHALT
 3 - BRICK/BLOCK
 4 - SLAG, GRAVEL, STONE
 5 - DIRT
 9 - OTHER / UNKNOWN

LIGHT CONDITION
 1
 1 - DAYLIGHT
 2 - DAWN/DUSK
 3 - DARK - LIGHTED ROADWAY
 4 - DARK - ROADWAY NOT LIGHTED
 5 - DARK - UNKNOWN ROADWAY LIGHTING
 9 - OTHER / UNKNOWN

WEATHER
 2
 1 - CLEAR
 2 - CLOUDY
 3 - FOG, SMOG, SMOKE
 4 - RAIN
 5 - SLEET, HAIL
 6 - SNOW
 7 - SEVERE CROSSWINDS
 8 - BLOWING SAND, SOIL, DIRT, SNOW
 9 - FREEZING RAIN OR FREEZING DRIZZLE
 99 - OTHER / UNKNOWN

NARRATIVE
 DRIVER OF UNIT #1 STATED HE STOPPED FOR THE RED LIGHT ON ANTENUCCI BLVD E/B AT TURNEY ROAD. HE STATED THE LIGHT JUST TURNED GREEN, HE LOOKED TO THE LEFT AT THE ONCOMING TRAFFIC, AND WAS REAR-ENDED BY UNIT #2.
 DRIVER OF UNIT #2 STATED HE WAS STOPPED BEHIND UNIT #1 AND THE LIGHT TURNED GREEN. ACCORDING TO HIM, UNIT #1 PULLED FORWARD, HE FOLLOWED, AND UNIT #1 CAME TO A STOP. THEN, HIS VEHICLE REAR-ENDED UNIT #1.



CRASH REPORTED DATE/TIME
 0 | 2 | 11 | 0 | 20 | 19 | 1 | 14 | 6

DISPATCH DATE/TIME
 0 | 2 | 11 | 0 | 20 | 19 | 1 | 14 | 7

ARRIVAL DATE/TIME
 0 | 2 | 11 | 0 | 20 | 19 | 1 | 14 | 4

SCENE CLEARED DATE/TIME
 0 | 2 | 11 | 0 | 20 | 19 | 1 | 23 | 0

REPORT TAKEN BY
 POLICE AGENCY
 MOTORIST

TOTAL TIME ROADWAY CLOSED
 0

OTHER INVESTIGATION TIME
 5 | 0

TOTAL MINUTES
 8 | 6

OFFICER'S NAME *
Z. Kovedsi
 OFFICER'S BADGE NUMBER *
 0 | 5 | 5

CHECKED BY OFFICER'S NAME *
M. Berdysz
 CHECKED BY OFFICER'S BADGE NUMBER *
 S | 1 | 4

SUPPLEMENT (CORRECTION - IN ADDITION)
 (www.dps.state.oh.us)

2 0 1 9 0 4 9 1

| | | |
|--|--|--|
| UNIT # 0 1 | OWNER NAME: LAST, FIRST, MIDDLE BAYNES DONALD R (<input checked="" type="checkbox"/> Same As Driver) | OWNER PHONE: INCLUDE AREA CODE 2 1 6 7 0 3 2 2 9 7 (<input type="checkbox"/> Same As Driver) |
| OWNER ADDRESS: STREET, CITY, STATE, ZIP 16012 MORNING STAR AVE MAPLE HEIGHTS OH 44137 (<input checked="" type="checkbox"/> Same As Driver) | | |
| COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | | COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE |

DAMAGE

DAMAGE SCALE

3 1 - NONE
2 - MINOR DAMAGE
3 - FUNCTIONAL DAMAGE
4 - DISABLING DAMAGE
9 - UNKNOWN

| | | | | |
|---|---|---|---|----------------------------------|
| LP STATE OH | LICENSE PLATE # UNDHAWK | VEHICLE IDENTIFICATION # 1G1P1P151S197B71915832 | VEHICLE YEAR 2011 | VEHICLE MAKE Chevrolet |
| <input checked="" type="checkbox"/> INSURANCE VERIFIED | INSURANCE COMPANY STATE FARM | INSURANCE POLICY # 840-1426-C19-35A | VEHICLE COLOR BLK | VEHICLE MODEL Cruze |
| <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE | | US DOT # | TOWED BY: COMPANY NAME | |
| <input type="checkbox"/> INTERLOCK DEVICE EQUIPPED | <input type="checkbox"/> HIT/SKIP UNIT | # OCCUPANTS 0 1 | HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD <input type="checkbox"/> PLACARD | |



UNIT TYPE
0 1

| | | | | |
|-----------------------------|--------------------------------------|------------------------|--|----------------------------|
| 1 - PASSENGER CAR | 7 - MOTORCYCLE 2-WHEELED | 12 - GOLF CART | 18 - LIMO (LIVERY VEHICLE) | 23 - PEDESTRIAN/SKATER |
| 2 - PASSENGER VAN (MINIVAN) | 8 - MOTORCYCLE 3-WHEELED | 13 - SNOWMOBILE | 19 - BUS (16+ PASSENGERS) | 24 - WHEELCHAIR (ANY TYPE) |
| 3 - SPORT UTILITY VEHICLE | 9 - AUTOCYCLE | 14 - SINGLE UNIT TRUCK | 20 - OTHER VEHICLE | 25 - OTHER NON-MOTORIST |
| 4 - PICK UP | 10 - MOPED OR MOTORIZED BICYCLE | 15 - SEMI-TRACTOR | 21 - HEAVY EQUIPMENT | 26 - BICYCLE |
| 5 - CARGO VAN | 11 - ALL TERRAIN VEHICLE (ATV / UTV) | 16 - FARM EQUIPMENT | 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE | 27 - TRAIN |
| 6 - VAN (9-15 SEATS) | | 17 - MOTORHOME | | 99 - UNKNOWN OR HIT/SKIP |

of TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?
2 1 - YES 2 - NO 9 - OTHER / UNKNOWN

AUTONOMOUS MODE LEVEL
0 - NO AUTOMATION
1 - DRIVER ASSISTANCE
2 - PARTIAL AUTOMATION
3 - CONDITIONAL AUTOMATION
4 - HIGH AUTOMATION
5 - FULL AUTOMATION
9 - UNKNOWN

SPECIAL FUNCTION
0 1

| | | | | |
|-----------------------------|------------------------|-----------------------------|----------------------------|----------------------|
| 1 - NONE | 6 - BUS - CHARTER/TOUR | 11 - FIRE | 16 - FARM | 21 - MAIL CARRIER |
| 2 - TAXI | 7 - BUS - INTERCITY | 12 - MILITARY | 17 - MOWING | 99 - OTHER / UNKNOWN |
| 3 - ELECTRONIC RIDE SHARING | 8 - BUS - SHUTTLE | 13 - POLICE | 18 - SNOW REMOVAL | |
| 4 - SCHOOL TRANSPORT | 9 - BUS - OTHER | 14 - PUBLIC UTILITY | 19 - TOWING | |
| 5 - BUS-TRANSIT/COMMUTER | 10 - AMBULANCE | 15 - CONSTRUCTION EQUIPMENT | 20 - SAFETY SERVICE PATROL | |

CARGO BODY TYPE
0 1

| | | | | |
|---|--|----------------------------------|----------------|-----------------------|
| 1 - NO CARGO BODY TYPE / NOT APPLICABLE | 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE | 5 - INTERMODAL CONTAINER CHASSIS | 8 - POLE | 12 - CONCRETE MIXER |
| 2 - BUS | 4 - LOGGING | 6 - CARGO VAN/ENCLOSED BOX | 9 - CARGO TANK | 13 - AUTO TRANSPORTER |
| | | 7 - GRAIN/CHIPS/GRAVEL | 10 - FLAT BED | 14 - GARBAGE/REFUSE |
| | | | 11 - DUMP | 99 - OTHER / UNKNOWN |

VEHICLE DEFECTS

| | | | | |
|------------------|------------------|---------------------------------|-----------------------------------|----------------------|
| 1 - TURN SIGNALS | 4 - BRAKES | 7 - WORN OR SLICK TIRES | 9 - MOTOR TROUBLE | 99 - OTHER / UNKNOWN |
| 2 - HEAD LAMPS | 5 - STEERING | 8 - TRAILER EQUIPMENT DEFECTIVE | 10 - DISABLED FROM PRIOR ACCIDENT | |
| 3 - TAIL LAMPS | 6 - TIRE BLOWOUT | | | |

NON-MOTORIST LOCATION AT IMPACT

| | | | | |
|-------------------------------------|--------------------------------|-----------------------|---------------------------------|--|
| 1 - INTERSECTION - MARKED CROSSWALK | 3 - INTERSECTION - OTHER | 6 - BICYCLE LANE | 9 - MEDIAN/CROSSING ISLAND | 12 - FIRST RESPONDER AT INCIDENT SCENE |
| 2 - INTERSECTION - UNMARKED | 4 - MIDLICK - MARKED CROSSWALK | 7 - SHOULDER/ROADSIDE | 10 - DRIVEWAY ACCESS | 99 - OTHER / UNKNOWN |
| | 5 - TRAVEL LANE-OTHER LOCATION | 8 - SIDEWALK | 11 - SHARED USE PATHS OR TRAILS | |

ACTION
4

PRE-CRASH ACTION
0 1

| | | | | |
|----------------------------|------------------------|------------------------------------|--|--|
| 1 - NON-CONTACT | 1 - STRAIGHT AHEAD | 7 - MAKING U-TURN | 13 - NEGOTIATING A CURVE | 18 - APPROACHING OR LEAVING VEHICLE |
| 2 - NON-COLLISION | 2 - BACKING | 8 - ENTERING TRAFFIC LANE | 14 - ENTERING OR CROSSING SPECIFIED LOCATION | 19 - STANDING |
| 3 - STRIKING | 3 - CHANGING LANES | 9 - LEAVING TRAFFIC LANE | 15 - WALKING, RUNNING, JOGGING, PLAYING | 20 - OTHER NON-MOTORIST |
| 4 - STRUCK | 4 - OVERTAKING/PASSING | 10 - PARKED | 16 - WORKING | 21 - STANDING OUTSIDE DISABLED VEHICLE |
| 5 - BOTH STRIKING & STRUCK | 5 - MAKING RIGHT TURN | 11 - SLOWING OR STOPPED IN TRAFFIC | 17 - PUSHING VEHICLE | 99 - OTHER / UNKNOWN |
| 9 - OTHER / UNKNOWN | 6 - MAKING LEFT TURN | 12 - DRIVERLESS | | |

INITIAL POINT OF CONTACT

0 6 0 - NO DAMAGE
1-12 - REFER TO UNIT DIAGRAM
14 - UNDERCARRIAGE
15 - VEHICLE NOT AT SCENE
99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES
0 1

| | | | | |
|----------------------|------------------------------|--|--------------------------------------|--------------------------------|
| 1 - NONE | 7 - LEFT OF CENTER | 13 - IMPROPER START FROM A PARKED POSITION | 17 - VISION OBSTRUCTION | 21 - LYING IN ROADWAY |
| 2 - FAILURE TO YIELD | 8 - FOLLOWING TOO CLOSE/ACDA | 14 - STOPPED OR PARKED ILLEGALLY | 18 - OPERATING DEFECTIVE EQUIPMENT | 22 - NOT DISCRERNABLE |
| 3 - RAN RED LIGHT | 9 - IMPROPER LANE CHANGING | 15 - SWERVING TO AVOID | 19 - LOAD SHIFTING/ FALLING/SPILLING | 23 - OPENING DOOR INTO ROADWAY |
| 4 - RAN STOP SIGN | 10 - IMPROPER PASSING | 16 - WRONG WAY | 20 - IMPROPER CROSSING | 99 - OTHER IMPROPER ACTION |
| 5 - UNSAFE SPEED | 11 - DROVE OFF ROAD | | | |
| 6 - IMPROPER TURN | 12 - IMPROPER BACKING | | | |

TRAFFIC

| | |
|--|---|
| TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY | TRAFFIC CONTROL 2 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL |
| # of THROUGH LANES ON ROAD 2 | RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING |

SEQUENCE OF EVENTS

NON-COLLISION

1 2 0 1 - OVERTURN/ROLLOVER
2 - FIRE/EXPLOSION
3 - IMMERSION
4 - JACKKNIFE
5 - CARGO / EQUIPMENT LOSS OR SHIFT

6 - EQUIPMENT FAILURE
7 - SEPARATION OF UNITS
8 - RAN OFF ROAD RIGHT
9 - RAN OFF ROAD LEFT
10 - CROSS MEDIAN

11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL
12 - DOWNHILL RUNAWAY
13 - OTHER NON-COLLISION
14 - PEDESTRIAN
15 - PEDALCYCLE

16 - RAILWAY VEHICLE
17 - ANIMAL - FARM EQUIPMENT
18 - ANIMAL - DEER
19 - ANIMAL - OTHER
20 - MOTOR VEHICLE IN TRANSPORT
21 - PARKED MOTOR VEHICLE

22 - WORK ZONE MAINTENANCE EQUIPMENT
23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
24 - OTHER MOVABLE

COLLISION WITH FIXED OBJECT - STRUCK

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/LUMINARIES SUPPORT
40 - UTILITY POLE
41 - OTHER POST, POLE OR SUPPORT
42 - CULVERT

43 - CURB
44 - DITCH
45 - EMBANKMENT
46 - FENCE
47 - MAILBOX
48 - TREE
49 - FIRE HYDRANT

50 - WORKZONE MAINTENANCE EQUIPMENT
51 - WALL
52 - BUILDING
53 - TUNNEL
54 - OTHER FIXED OBJECT
99 - OTHER / UNKNOWN

FIRST HARMFUL EVENT 1 **MOST HARMFUL EVENT** 1

UNIT / NON-MOTORIST DIRECTION

FROM 4 TO 3

1 - NORTH 5 - NORTHEAST
2 - SOUTH 6 - NORTHWEST
3 - EAST 7 - SOUTHEAST
4 - WEST 8 - SOUTHWEST

UNIT SPEED
0

POSTED SPEED
3 5

DETECTED SPEED
1 1 - STATED/ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED

2 0 1 9 0 4 9 1

UNIT # 0 2 OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver)
MALEK KENNETH T
 OWNER PHONE: INCLUDE AREA CODE (Same As Driver)
2 1 6 5 5 6 3 9 6 3
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver)
5148 W 147 ST BROOKPARK OH 44142
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

DAMAGE
DAMAGE SCALE
3 1 - NONE 3 - FUNCTIONAL DAMAGE
 2 - MINOR DAMAGE 4 - DISABLING DAMAGE
 9 - UNKNOWN

LP STATE O H LICENSE PLATE # **HMH7180** VEHICLE IDENTIFICATION # 2 H K R M 4 H 3 8 F H 6 0 2 9 8 2 VEHICLE YEAR 2 0 1 5 VEHICLE MAKE **Honda**
 INSURANCE VERIFIED INSURANCE COMPANY **STATE FARM** INSURANCE POLICY # **678-5636-E15-35K** VEHICLE COLOR **BLK** VEHICLE MODEL **Cr-V**
 TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE
 INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS 0 1 VEHICLE WEIGHT GVWR/GCWR: 1- ≤10K LBS. 2- 10,001 - 26K LBS. 3- >26K LBS.
 TOWED BY: COMPANY NAME HAZARDOUS MATERIAL: MATERIAL RELEASED CLASS # PLACARD ID # PLACARD



UNIT TYPE 0 1
 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN/SKATER
 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)
 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST
 4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE
 5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN
 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP
 # of TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN
 AUTONOMOUS MODE LEVEL

SPECIAL FUNCTION 0 1
 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER
 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 22 - OTHER/UNKNOWN
 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL N
 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING
 5 - BUS-TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL

CARGO BODY TYPE 0 1
 1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER
 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL 9 - CARGO TANK 10 - FLAT BED 11 - DUMP 13 - AUTO TRANSPORTER
 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN

VEHICLE DEFECTS
 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN
 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT
 3 - TAIL LAMPS 6 - TIRE BLOWOUT

NON-MOTORIST LOCATION AT IMPACT 0 1
 1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE
 2 - INTERSECTION - UNMARKED 4 - MIDLICK - MARKED CROSSWALK 7 - SHOULDER/ROADSIDE 8 - SIDEWALK 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN

ACTION 0 1 PRE-CRASH ACTION
 1 - NON-COLLISION 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN
 1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS 13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING OR LEAVING VEHICLE OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN

CONTRIBUTING CIRCUMSTANCES 0 8
 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY 22 - NOT DISCERNABLE
 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE/ACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 23 - OPENING DOOR INTO ROADWAY
 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGING 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/ FALLING/SPILLING 99 - OTHER IMPROPER ACTION
 4 - RAN STOP SIGN 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING
 5 - UNSAFE SPEED 6 - IMPROPER TURN 12 - IMPROPER BACKING

- NO DAMAGE [0] - UNDERCARRIAGE [14]
 - TOP [13] - ALL AREAS [15]
 - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT
1 2 0 - NO DAMAGE 14 - UNDERCARRIAGE
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN

EVENT(S)

SEQUENCE OF EVENTS
 1 2 0 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT
 2 0 0 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 24 - OTHER MOVABLE
 3 0 0 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE

COLLISION WITH FIXED OBJECT - STRUCK
 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT
 26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT
 27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT
 28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT
 29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT
 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT

1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

TRAFFIC
TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY
TRAFFIC CONTROL 2 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL

OF THROUGH LANES ON ROAD 2
RAIL GRADE CROSSING
 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION
 FROM 4 TO 3
 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST

UNIT SPEED 1 0
POSTED SPEED 3 5
DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER
2 0 1 9 0 4 9 1

| | | | | | | | | | |
|--|--|----------------------------|---|---|--|-------------------------|---|---------------|--------------|
| UNIT # 0 1 | NAME: LAST, FIRST, MIDDLE BAYNES DONALD R | | DATE OF BIRTH 1 0 2 8 1 9 6 2 | | AGE 5 6 | GENDER M | | | |
| ADDRESS: STREET, CITY, STATE, ZIP 16012 MORNING STAR AVE MAPLE HEIGHTS OH 44137 | | | | CONTACT PHONE - INCLUDE AREA CODE 2 1 6 7 0 3 2 2 9 7 | | | | | |
| INJURIES 5 | INJURED TAKEN BY | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED 0 4 | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | SEATING POSITION 0 1 | AIR BAG USAGE 1 | EJECTION 1 | TRAPPED 1 |
| OL STATE OH | OPERATOR LICENSE NUMBER RF630515 | | OFFENSE CHARGED | LOCAL CODE <input type="checkbox"/> | OFFENSE DESCRIPTION | | CITATION NUMBER | | |
| OL CLASS 4 | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY 1 | ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | | CONDITION 1 | ALCOHOL TEST STATUS TYPE VALUE STATUS TYPE RESULT SELECT UP TO 4 | | DRUG TEST(S) |

| | | | | | | | | | |
|---|--|----------------------------|---|---|--|-------------------------|---|---------------|--------------|
| UNIT # 0 2 | NAME: LAST, FIRST, MIDDLE MALEK KENNETH T | | DATE OF BIRTH 0 2 1 7 1 9 4 7 | | AGE 7 1 | GENDER M | | | |
| ADDRESS: STREET, CITY, STATE, ZIP 5148 W 147 ST BROOKPARK OH 44142 | | | | CONTACT PHONE - INCLUDE AREA CODE 2 1 6 5 5 6 3 9 6 3 | | | | | |
| INJURIES 5 | INJURED TAKEN BY | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED 0 4 | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | SEATING POSITION 0 1 | AIR BAG USAGE 1 | EJECTION 1 | TRAPPED 1 |
| OL STATE OH | OPERATOR LICENSE NUMBER RT907943 | | OFFENSE CHARGED 333.03 | LOCAL CODE <input checked="" type="checkbox"/> | OFFENSE DESCRIPTION A.C.D.A. | | CITATION NUMBER G20190578 | | |
| OL CLASS 4 | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY 1 | ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | | CONDITION 1 | ALCOHOL TEST STATUS TYPE VALUE STATUS TYPE RESULT SELECT UP TO 4 | | DRUG TEST(S) |

| | | | | | | | | | |
|-----------------------------------|----------------------------|----------------------------|---|--|--|------------------|---|----------|--------------|
| UNIT # | NAME: LAST, FIRST, MIDDLE | | DATE OF BIRTH | | AGE | GENDER | | | |
| ADDRESS: STREET, CITY, STATE, ZIP | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | |
| INJURIES | INJURED TAKEN BY | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED |
| OL STATE | OPERATOR LICENSE NUMBER | | OFFENSE CHARGED | LOCAL CODE | OFFENSE DESCRIPTION | | CITATION NUMBER | | |
| OL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY | ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA OTHER DRUG | | CONDITION | ALCOHOL TEST STATUS TYPE VALUE STATUS TYPE RESULT SELECT UP TO 4 | | DRUG TEST(S) |

| INJURIES | SEATING POSITION | AIR BAG | OL CLASS | OL RESTRICTION(S) | DRIVER DISTRACTION | TEST STATUS |
|--|--|------------------------------------|------------------------------|--|--|--|
| 1 - FATAL | 1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) | 1 - NOT DEPLOYED | 1 - CLASS A | 1 - ALCOHOL INTERLOCK DEVICE | 1 - NOT DISTRACTED | 1 - NONE GIVEN |
| 2 - SUSPECTED SERIOUS INJURY | 2 - FRONT - MIDDLE | 2 - DEPLOYED FRONT | 2 - CLASS B | 2 - CDL INTRASTATE ONLY | 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING) | 2 - TEST REFUSED |
| 3 - SUSPECTED MINOR INJURY | 3 - FRONT - RIGHT SIDE | 3 - DEPLOYED SIDE | 3 - CLASS C | 3 - CORRECTIVE LENSES | 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE | 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE |
| 4 - POSSIBLE INJURY | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) | 4 - DEPLOYED BOTH FRONT / SIDE | 4 - REGULAR CLASS (OHIO = D) | 4 - FARM WAIVER | 4 - TALKING ON HAND-HELD COMMUNICATION DEVICE | 4 - TEST GIVEN, RESULTS KNOWN |
| 5 - NO APPARENT INJURY | 5 - SECOND - MIDDLE | 5 - NOT APPLICABLE | 5 - M / C MOPED ONLY | 5 - EXCEPT CLASS A BUS & CLASS B BUS | 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE | 5 - TEST GIVEN, RESULTS UNKNOWN |
| INJURED TAKEN BY | | 6 - SECOND - RIGHT SIDE | 6 - NO VALID OL | 6 - EXCEPT CLASS A & CLASS B BUS | 6 - PASSENGER | ALCOHOL TEST TYPE |
| 1 - NOT TRANSPORTED / TREATED AT SCENE | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) | 9 - DEPLOYMENT UNKNOWN | EJECTION | 7 - EXCEPT TRACTOR-TRAILER | 7 - OTHER DISTRACTION INSIDE THE VEHICLE | 1 - NONE |
| 2 - EMS | 8 - THIRD - MIDDLE | EJECTION | H - HAZMAT | 8 - INTERMEDIATE LICENSE RESTRICTIONS | 8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE | 2 - BLOOD |
| 3 - POLICE | 9 - THIRD - RIGHT SIDE | 1 - NOT EJECTED | M - MOTORCYCLE | 9 - LEARNER'S PERMIT RESTRICTIONS | 9 - OTHER / UNKNOWN | 3 - URINE |
| 9 - OTHER / UNKNOWN | 10 - SLEEPER SECTION OF TRUCK CAB | 2 - PARTIALLY EJECTED | P - PASSENGER | 10 - LIMITED TO DAYLIGHT ONLY | CONDITION | 4 - BREATH |
| SAFETY EQUIPMENT | | 3 - TOTALLY EJECTED | N - TANKER | 11 - LIMITED TO EMPLOYMENT | 1 - APPARENTLY NORMAL | DRUG TEST TYPE |
| 1 - NONE USED | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | 4 - NOT APPLICABLE | Q - MOTOR SCOOTER | 12 - LIMITED - OTHER | 2 - PHYSICAL IMPAIRMENT | 1 - NONE |
| 2 - SHOULDER BELT ONLY USED | 12 - PASSENGER IN UNENCLOSED CARGO AREA | 4 - NOT APPLICABLE | R - THREE-WHEEL MOTORCYCLE | 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) | 3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED) | 2 - BLOOD |
| 3 - LAP BELT ONLY USED | 13 - TRAILING UNIT | 1 - NOT TRAPPED | S - SCHOOL BUS | 14 - MILITARY VEHICLES ONLY | 4 - ILLNESS | 3 - URINE |
| 4 - SHOULDER & LAP BELT USED | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | 2 - EXTRICATED BY MECHANICAL MEANS | T - DOUBLE & TRIPLE TRAILERS | 15 - MOTOR VEHICLES WITHOUT AIR BRAKES | 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. | 4 - OTHER |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING | 15 - NON-MOTORIST | 3 - FREED BY NON-MECHANICAL MEANS | X - TANKER / HAZMAT | 16 - OUTSIDE MIRROR | 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL | DRUG TEST RESULT(S) |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING | 99 - OTHER / UNKNOWN | | | 17 - PROSTHETIC AID | 9 - OTHER / UNKNOWN | 1 - AMPHETAMINES |
| 7 - BOOSTER SEAT | | | | 18 - OTHER | | 2 - BARBITURATES |
| 8 - HELMET USED | | | | | | 3 - BENZODIAZEPINES |
| 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) | | | | | | 4 - CANNABINOIDS |
| 10 - REFLECTIVE CLOTHING | | | | | | 5 - COCAINE |
| 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY | | | | | | 6 - OPIATES / OPIOIDS |
| 99 - OTHER / UNKNOWN | | | | | | 7 - OTHER |
| | | | | | | 8 - NEGATIVE RESULTS |