

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

2 | 0 | 2 | 0 | 0 | 0 | 1 | 2 |

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

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

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

COUNTY * LOCALITY *
 1 | 8 1

LOCATION: CITY, VILLAGE, TOWNSHIP *
GARFIELD HTS

CRASH DATE/TIME *
 0 | 1 | 0 | 2 | 2 | 0 | 2 | 0 | 0 | 0 | 3 | 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
 _____ _____ _____

LOCATION ROAD NAME ROAD TYPE
TURNEY R | D

LATITUDE DECIMAL DEGREES
 4 | 1 | . | 4 | 1 | 5 | 3 |

ROUTE TYPE ROUTE NUMBER PREFIX
 _____ _____ _____

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) ROAD TYPE
CIVIC CENTER W | A

LONGITUDE DECIMAL DEGREES
 8 | 1 | . | 6 | 0 | 4 | 7 |

REFERENCE POINT DIRECTION
 1 - INTERSECTION 1 - NORTH
 2 - MILE POST 2 - SOUTH
 3 - HOUSE # 3 - EAST
 4 - WEST

ROUTE TYPE ROAD TYPE
 IR - INTERSTATE ROUTE (TP) AL - ALLEY HW - HIGHWAY RD - ROAD
 US - FEDERAL US ROUTE AV - AVENUE LA - LANE SQ - SQUARE
 SR - STATE ROUTE BL - BOULEVARD MP - MILEPOST ST - STREET
 CR - CIRCLE CR - CIRCLE OV - OVAL TE - TERRACE
 CT - COURT DR - DRIVE PI - PIKE TL - TRAIL
 TR - NUMBERED TOWNSHIP ROUTE HE - HEIGHTS PL - PLACE WA - WAY

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

DISTANCE FROM REFERENCE DISTANCE UNIT OF MEASURE
 2 | 0 2 1 - Miles
 2 - Feet
 3 - Yards

ROADWAY
 ROADWAY DIVIDED

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

MANNER OF CRASH COLLISION/IMPACT
 1 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
 3 1 - DAYLIGHT
 2 - DAWN/DUSK
 3 - DARK - LIGHTED ROADWAY
 4 - DARK - ROADWAY NOT LIGHTED
 5 - DARK - UNKNOWN ROADWAY LIGHTING
 9 - OTHER / UNKNOWN

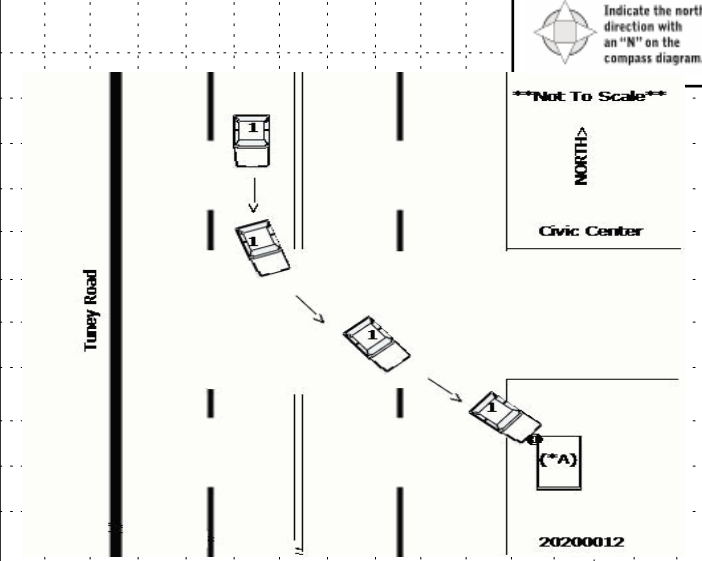
WEATHER
 2 1 - CLEAR
 2 - CLOUDY
 3 - FOG, SMOG, SMOKE
 4 - RAIN
 5 - SLEET, HAIL
 6 - SNOW
 7 - SEVERE CROSSWINDS
 8 - BLOWING SAND, SOIL, DIRT, SNOW
 9 - FREEZING RAIN OR FREEZING DRIZZLE
 99 - OTHER / UNKNOWN

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

CONDITIONS
 1 1 - DRY
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SURFACE
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 3 - BRICK/BLOCK
 4 - SLAG, GRAVEL, STONE
 5 - DIRT
 9 - OTHER / UNKNOWN

NARRATIVE
 UNIT 1 WAS TRAVELING S/B ON TURNEY ROAD AT CIVIC CENTER WHEN IT TRAVELED LEFT OF CENTER AND OFF OF THE ROADWAY STRIKING A RTA BUS SHELTER (#1097)
 (*A) BUS SHELTER #1097 BELONGING TO GREATER CLEVELAND TRANSIT AUTHORITY
 1240 W 6TH STREET
 CLEVELAND, OH 44113
 (216)621-9500



CRASH REPORTED DATE/TIME
 0 | 1 | 0 | 2 | 2 | 0 | 2 | 0 | 0 | 0 | 3 | 6 |

DISPATCH DATE/TIME
 0 | 1 | 0 | 2 | 2 | 0 | 2 | 0 | 0 | 0 | 3 | 7 |

ARRIVAL DATE/TIME
 0 | 1 | 0 | 2 | 2 | 0 | 2 | 0 | 0 | 0 | 3 | 7 |

SCENE CLEARED DATE/TIME
 0 | 1 | 0 | 2 | 2 | 0 | 2 | 0 | 0 | 1 | 0 | 0 |

REPORT TAKEN BY
 POLICE AGENCY
 MOTORIST

TOTAL TIME ROADWAY CLOSED
 0

OTHER INVESTIGATION TIME
 3 | 0

TOTAL MINUTES
 5 | 3

OFFICER'S NAME *
V. Walker
 OFFICER'S BADGE NUMBER *
 0 | 5 | 2

CHECKED BY OFFICER'S NAME *
T. Capretta
 CHECKED BY OFFICER'S BADGE NUMBER *
 1 | 0 | 2

SUPPLEMENT (CORRECTION - IN ADDITION TO ORIGINAL REPORT)

| | | |
|---|--|--|
| UNIT # 0 1 | OWNER NAME: LAST, FIRST, MIDDLE HOGUE TOMIKARA <input type="checkbox"/> Same As Driver | OWNER PHONE: INCLUDE AREA CODE <input type="checkbox"/> Same As Driver |
| OWNER ADDRESS: STREET, CITY, STATE, ZIP 14404 GRANGER RD MAPLE HTS OH 44137 <input type="checkbox"/> Same As Driver | | |
| COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | | COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE |

DAMAGE

DAMAGE SCALE

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

| | | | | |
|---|---|--|--|----------------------------------|
| LP STATE OH | LICENSE PLATE # J330239 | VEHICLE IDENTIFICATION # 2FMDA513473BB510972 | VEHICLE YEAR 2003 | VEHICLE MAKE Ford |
| <input type="checkbox"/> INSURANCE VERIFIED | INSURANCE COMPANY NONE PER OWNER | INSURANCE POLICY # | VEHICLE COLOR WHI | VEHICLE MODEL Windstar |
| <input type="checkbox"/> COMMERCIAL | <input type="checkbox"/> GOVERNMENT | <input type="checkbox"/> IN EMERGENCY RESPONSE | US DOT # | |
| <input type="checkbox"/> INTERLOCK DEVICE EQUIPPED | <input type="checkbox"/> HIT/SKIP UNIT | # OCCUPANTS 0 1 | VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS. | |



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|-------------------------|---|--|---|---|---|
| UNIT TYPE 0 2 | 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS) | 7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV) | 12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME | 18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE | 23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 28 - UNKNOWN OR HIT/SKIP |
|-------------------------|---|--|---|---|---|

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

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

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|-------------------------------|--|---|--|--|---|
| CARGO BODY TYPE 0 1 | 1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS | 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING | 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL | 8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP | 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 15 - OTHER / UNKNOWN |
|-------------------------------|--|---|--|--|---|

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

| | | | | | |
|---|--|---|---|---|--|
| NON-MOTORIST LOCATION AT IMPACT 0 1 | 1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED | 3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION | 6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK | 9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS | 12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN |
|---|--|---|---|---|--|

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| ACTION 0 3 | 1 - NON-CONTACT 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 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN |
|----------------------|---|--|--|---|---|

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

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

INITIAL POINT OF CONTACT

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

SEQUENCE OF EVENTS

EVENTS

| | | | | | |
|-------|---|--|---|---|---|
| 1 0 9 | 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE | 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 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** 2

TRAFFIC

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

| | |
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| # OF THROUGH LANES ON ROAD 4 | RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING |
|--|---|

UNIT / NON-MOTORIST DIRECTION

FROM 1 TO 7

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

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

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER
2 0 2 0 0 0 1 2

| | | | | | |
|--|--|-----------------------------------|---|--|--|
| UNIT # 0 1 | NAME: LAST, FIRST, MIDDLE YORK RAFI LAI | | DATE OF BIRTH 0 7 0 3 1 9 8 0 | AGE 3 9 | GENDER M |
| ADDRESS: STREET, CITY, STATE, ZIP 8019 SPAFFORD RD 204 CLEVELAND OH 44105 | | | CONTACT PHONE - INCLUDE AREA CODE | | |
| INJURIES 5 | INJURED TAKEN BY | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED 0 1 | <input type="checkbox"/> DOT-COMPLIANT MC HELMET |
| OL STATE OH | OPERATOR LICENSE NUMBER | OFFENSE CHARGED 4511.19A1 | LOCAL CODE <input type="checkbox"/> | OFFENSE DESCRIPTION OVI | CITATION NUMBER 20200003 |
| OL CLASS 6 | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT UP TO 3 | DRIVER DISTRACTED BY 1 | ALCOHOL / DRUG SUSPECTED <input checked="" type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | CONDITION 1 |
| ALCOHOL TEST | | DRUG TEST(S) | | | |
| STATUS TYPE VALUE | | STATUS TYPE RESULT SELECT UP TO 4 | | | |
| 1 1 | | 2 1 | | | |

| | | | | | |
|-----------------------------------|----------------------------|-----------------------------------|---|--|--|
| 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 |
| 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 | | DRUG TEST(S) | | | |
| STATUS TYPE VALUE | | STATUS TYPE RESULT SELECT UP TO 4 | | | |

| | | | | | |
|-----------------------------------|----------------------------|-----------------------------------|---|--|--|
| 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 |
| 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 | | DRUG TEST(S) | | | |
| STATUS TYPE VALUE | | STATUS TYPE RESULT SELECT UP TO 4 | | | |

| 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 | 1 - NOT EJECTED | 8 - INTERMEDIATE LICENSE RESTRICTIONS | 8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE | 2 - BLOOD |
| 3 - POLICE | 9 - THIRD - RIGHT SIDE | 2 - PARTIALLY EJECTED | H - HAZMAT | 9 - LEARNER'S PERMIT RESTRICTIONS | 9 - OTHER / UNKNOWN | 3 - URINE |
| 9 - OTHER / UNKNOWN | 10 - SLEEPER SECTION OF TRUCK CAB | 3 - TOTALLY EJECTED | M - MOTORCYCLE | 10 - LIMITED TO DAYLIGHT ONLY | | 4 - BREATH |
| SAFETY EQUIPMENT | | 4 - NOT APPLICABLE | P - PASSENGER | 11 - LIMITED TO EMPLOYMENT | | DRUG TEST TYPE |
| 1 - NONE USED | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | TRAPPED | N - TANKER | 12 - LIMITED - OTHER | | 1 - NONE |
| 2 - SHOULDER BELT ONLY USED | 12 - PASSENGER IN UNENCLOSED CARGO AREA | 1 - NOT TRAPPED | Q - MOTOR SCOOTER | 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) | CONDITION | 2 - BLOOD |
| 3 - LAP BELT ONLY USED | 13 - TRAILING UNIT | 2 - EXTRICATED BY MECHANICAL MEANS | R - THREE-WHEEL MOTORCYCLE | 14 - MILITARY VEHICLES ONLY | 1 - APPARENTLY NORMAL | 3 - URINE |
| 4 - SHOULDER & LAP BELT USED | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | 3 - FREED BY NON-MECHANICAL MEANS | S - SCHOOL BUS | 15 - MOTOR VEHICLES WITHOUT AIR BRAKES | 2 - PHYSICAL IMPAIRMENT | 4 - OTHER |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING | 15 - NON-MOTORIST | | T - DOUBLE & TRIPLE TRAILERS | 16 - OUTSIDE MIRROR | 3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED) | DRUG TEST RESULT(S) |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING | 99 - OTHER / UNKNOWN | | X - TANKER / HAZMAT | 17 - PROSTHETIC AID | 4 - ILLNESS | 1 - AMPHETAMINES |
| 7 - BOOSTER SEAT | | | GENDER | 18 - OTHER | 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. | 2 - BARBITURATES |
| 8 - HELMET USED | | | F - FEMALE | | 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL | 3 - BENZODIAZEPINES |
| 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) | | | M - MALE | | 9 - OTHER / UNKNOWN | 4 - CANNABINOIDS |
| 10 - REFLECTIVE CLOTHING | | | U - OTHER/UNKNOWN | | | 5 - COCAINE |
| 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY | | | | | | 6 - OPIATES / OPIOIDS |
| 99 - OTHER / UNKNOWN | | | | | | 7 - OTHER |
| | | | | | | 8 - NEGATIVE RESULTS |