

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

20200199

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

LOCAL INFORMATION

REPORTING AGENCY NAME *

GARFIELD HEIGHTS

NCIC * 01820

HIT/SKIP 1-Solved 2-Unsolved

NUMBER OF UNITS 01

UNIT IN ERROR 98-ANIMAL 99-UNKNOWN 01

COUNTY * 18 LOCALITY * 1

LOCATION: CITY, VILLAGE, TOWNSHIP * GARFIELD HTS

CRASH DATE/TIME * 01162020 1435

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 Turney ROAD TYPE R D

LATITUDE DECIMAL DEGREES 41.40662

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

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 5764 ROAD TYPE

LONGITUDE DECIMAL DEGREES 81.59850

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

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

INTERSECTION RELATED WITHIN INTERSECTION OR ON APPROACH, WITHIN INTERCHANGE AREA, ROADWAY ROADWAY DIVIDED

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

LOCATION OF FIRST HARMFUL EVENT 06 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 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

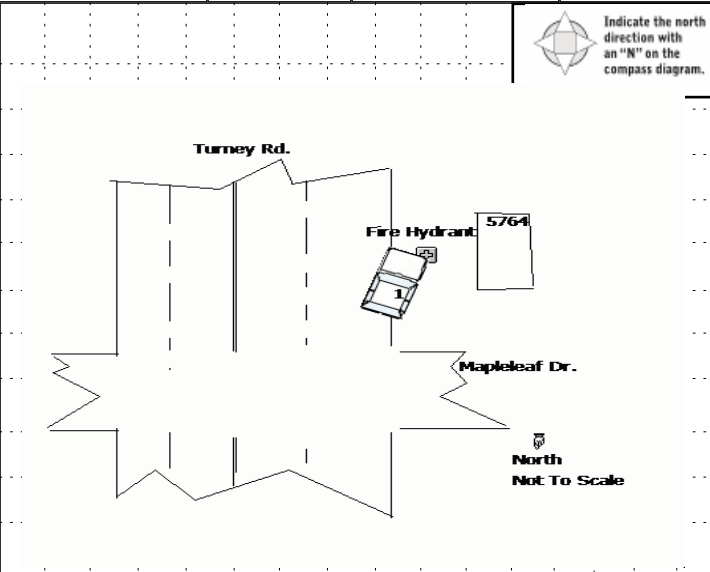
CONDITIONS 2 1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN

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 6 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 UNIT # 1 WAS TRAVELING SOUTH ONTO TURNEY RD AFTER MAKING A RIGHT TURN FROM MAPLELEAF DR . UNIT # 1 CONTINUED THE RIGHT TURN AND DROVE OFF THE RIGHT SIDE OF THE ROADWAY AT 5764 TURNEY. AS A RESULT, THE RIGHT FRONT SIDE OF UNIT # 1 COLLIDED WITH A FIRE HYDRANT. UNIT # 1 WAS MOVED FROM FINAL REST AND WAS PARKED IN THE OUTSIDE LANE AT 5764 TURNEY FACING SOUTH UPON ARRIVAL. NOTE. DRIVER STATED, A IPAD FELL FROM THE DASH AND LODGE AGAINST THE STEERING WHEEL. NOTE:: NO DAMAGE OBSERVED TO THE FIRE



CRASH REPORTED DATE/TIME 01162020 1435

DISPATCH DATE/TIME 01162020 1436

ARRIVAL DATE/TIME 01162020 1447

SCENE CLEARED DATE/TIME 01162020 1509

REPORT TAKEN BY POLICE AGENCY, MOTORIST

TOTAL TIME ROADWAY CLOSED 0

OTHER INVESTIGATION TIME 60

TOTAL MINUTES 82

OFFICER'S NAME * R. Cramer OFFICER'S BADGE NUMBER * 037

CHECKED BY OFFICER'S NAME * M. Berdysz CHECKED BY OFFICER'S BADGE NUMBER * S14

SUPPLEMENT CORRECTION-ADDITION

20200199

OWNER

UNIT # 01 OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver)
BROWN MICHAEL D

OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver)
4874 E 106TH ST GARFIELD HTS OH 44125

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

DAMAGE

DAMAGE SCALE

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

VEHICLE

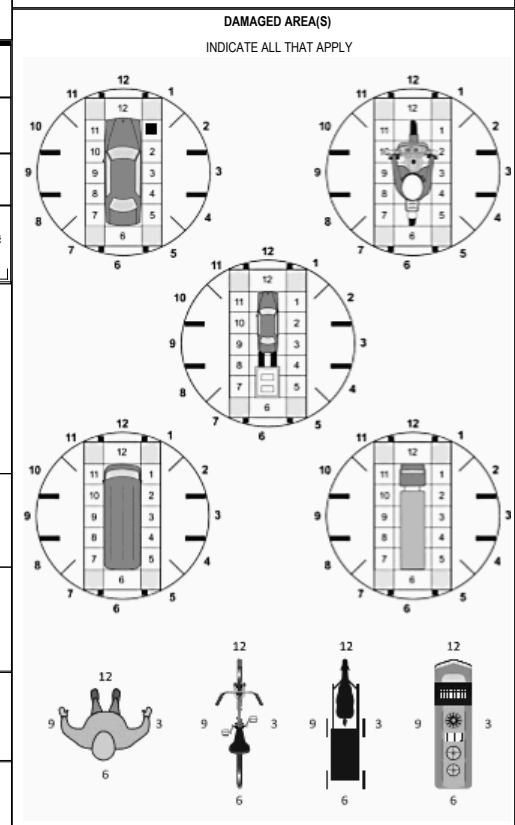
LP STATE OH LICENSE PLATE # GWT2466 VEHICLE IDENTIFICATION # 2FMDK511C0191BA02172Z VEHICLE YEAR 2009 VEHICLE MAKE Ford

INSURANCE VERIFIED INSURANCE COMPANY Geico INSURANCE POLICY # 4566424364 VEHICLE COLOR BLK VEHICLE MODEL Flex

TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

US DOT # _____ TOWED BY: COMPANY NAME Private Tow

HAZARDOUS MATERIAL: MATERIAL RELEASED CLASS # _____ PLACARD ID # _____
 PLACARD



UNIT TYPE 03

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

of TRAILING UNITS _____

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0

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 01

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
 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 01

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 15 - DUMP 16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL 21 - MAIL CARRIER
 22 - 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 01

1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE
 2 - INTERSECTION - UNMARKED 4 - MIDLCK - MARKED CROSSWALK 7 - SHOULDER/ROADSIDE 8 - SIDEWALK 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 14 - GARBAGE/REFUSE 15 - DUMP 16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL 21 - MAIL CARRIER 22 - OTHER / UNKNOWN

ACTION 05 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 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN

INITIAL POINT OF CONTACT

01 0 - NO DAMAGE 14 - UNDERCARRIAGE
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES 11

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 5 - UNSAFE SPEED 6 - IMPROPER TURN 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING 16 - WRONG WAY 20 - IMPROPER CROSSING

TRAFFIC

TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY

TRAFFIC CONTROL 6 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL

SEQUENCE OF EVENTS

EVENTS

1 07 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT
 2 49 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE
 3 9 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 15 - PEDALCYCLE

of THROUGH LANES ON ROAD 4

RAIL GRADE CROSSING 1 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING

COLLISION WITH FIXED OBJECT - STRUCK

25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORKZONE MAINTENANCE EQUIPMENT
 26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL
 27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT/LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING
 28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL
 29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN
 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 49 - FIRE HYDRANT

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 2

UNIT / NON-MOTORIST DIRECTION

FROM 4 TO 8

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

UNIT SPEED 10

POSTED SPEED 20

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

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER
2 0 2 0 0 1 9 9

| | | | | | |
|--|--|---|---|---|--|
| UNIT # 0 1 | NAME: LAST, FIRST, MIDDLE BROWN MICHAEL D | | DATE OF BIRTH 1 2 2 1 1 9 7 4 | AGE 4 5 | GENDER M |
| ADDRESS: STREET, CITY, STATE, ZIP 4874 E 106TH ST GARFIELD HTS OH 44125 | | | CONTACT PHONE - INCLUDE AREA CODE | | |
| 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 |
| OL STATE OH | OPERATOR LICENSE NUMBER | 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 7 | ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG | CONDITION 1 1 |
| | | 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 | | | |

| | | | | | |
|-----------------------------------|----------------------------|---|---|--|--|
| 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) | 4 - NOT APPLICABLE | N - TANKER | 12 - LIMITED - OTHER | | 1 - NONE |
| 2 - SHOULDER BELT ONLY USED | 12 - PASSENGER IN UNENCLOSED CARGO AREA | 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 | 1 - NOT TRAPPED | 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) | 2 - EXTRICATED BY 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 | 3 - FREED BY NON-MECHANICAL MEANS | 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 |