OHIO DEPARTMENT TRAFFIC CRASH REPORT DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER *						
LOCAL INFORMATION									2 0 2 0 3 4 1 3					
PHOTOS TAKEN OH-1P OTHER REPORTING AGENCY NAME *							CIC*	HIT/SKIP 1 - Solved	NUMBER OF UNITS	UNIT IN ERROR				
GARFIELD HEIGHTS							8 2 0	2 - Unsolved	0 1	9 8 98 - ANIMAL 99 - UNKNOWN				
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*									CRASH DATE/TIME* CRASH SEVERITY 1. FATAL					
1 8	1 8 GARFIELD HTS								10 1 8 5 8	2 - SERIOUS INJURY				
ROUTE TYPE	2-SOUTH						ROAD TYPE	LATITUDE DECIMAL DEGREES SUSPECTED 3-MINOR INJURY						
ξ I R	1 R 4 8 0 3-EAST 4-WEST 1-480						$H_{\downarrow}W_{\downarrow}$	<u> </u>	SUSPECTED					
ROUTE TYPE	ROUTE NUMBER		1 - NORTH 2 - SOUTH		NCE ROAD NAME (ROAD, MILEPOST,	HOUSE #)	ROAD TYPE	LONGITUDE DECIN		4 - INJURY POSSIBLE 5 - PROPERTY				
REFER			3 - EAST 4 - WEST	21.8			M_1P_1	5 9 2 1	DAMAGE ONLY					
REFERENCE P	***REFERENCE		ROUTE TYPE			D TYPE		☐ WITHIN INTER	INTERSECTION RELAT	ED				
2 - MILE POS 3 - HOUSE #	ST 2 - SOUTH		TATE ROUTE (T AL US ROUTE	P)	AV - AVENUE LA -	LANE S	RD - ROAD SQ - SQUARE	☐ WITHIN INTER	00					
DISTANCE	4 - WEST DISTANCE	SR - STATE F	ROUTE RED COUNTY F	ROUTE	CR - CIRCLE OV -	CLE OV - OVAL TE - TERRACE			☐ WITHIN INTERCHANGE AREA NUMBER OF APP					
FROM REFERENCE	UNIT OF MEASURE 1 - Miles 2 - Feet		RED TOWNSHI		DR - DRIVE PI - F		VA - WAY	ROADWAY						
[5]0]0	3 - Yards							■ ROADWAY DIVIDED						
	LOCATION OF FIRST HARMFUL E N ROADWAY 9 - CROSSOVI	ER		1 - NOT COLLIS	MANNER OF CRASH COLLISIO ION 4 - REAR-TO-I			DIRECTION OF TRAVEL		MEDIAN TYPE				
2-0l	N SHOULDER 10 - DRIVEWA MEDIAN ACCESS		_ 1	BETWEEN TWO MOTOR	5 - BACKING	ALF III		4 1 - NORTH 2 - SOUTH		IDED FLUSH MEDIAN FEET)				
5 - O	N ROADSIDE 11 - RAILWAY N GORE CROSSIN	G		VEHICLES IN	6 - ANGLE	E, SAME DIRECTION		3 - EAST		IDED FLUSH MEDIAN FEET)				
TF	UTSIDE 12 - SHARED I RAFFICWAY OR TRAIL N RAMP 13 - BIKE LAN	_S		2 - REAR-END 3 - HEAD-ON	8 - SIDESWIP 9 - OTHER / U	E, OPPOSITE DIRECTION		4 - WEST	4 - DIV	IDED, DEPRESSED MEDIAN IDED, RAISED MEDIAN				
	N RAMP 13 - BIKE LAN FF RAMP 14 - TOLL BOO 99 - OTHER / I	тн	,	3 - HEAD-ON					,	Y TYPE) HER / UNKNOWN				
☐ WORK ZONE RI	ELATED	WORK ZONE T	YPE		LOCATION OF C			CONTOUR	CONDITIONS	SURFACE				
WORKERS PRE	SENT 2-L	.ANE CLOSURE .ANE SHIFT/CROSS(WORK ON SHOULDE			WARNI	E THE 1ST WORK NG SIGN CE WARNING ARI		1 1	11	2				
PRESENT		DR MEDIAN NTERMITTENT OR MO				TION AREA	-A	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE				
☐ ACTIVE SCHOO		OTHER	OVIIVO WORK			IATION AREA		2 - STRAIGHT GRADE	2 - WET 3 - SNOW	2 - BLACKTOP, BITUMINOUS,				
LIGHT CONDITION WEATHER								3 - CURVE LEVEL 4 - CURVE GRADE	4 - ICE 5 - SAND, MUD, DIRT,	ASPHALT 3 - BRICK/BLOCK				
3 2-DAWN	/DUSK	1	1 - CLEAF 2 - CLOUI		6 - SNOW 7 - SEVERE CROSS		MA/	9 - OTHER /UNKNOWN	OIL, GRAVEL 6 - WATER (STANDING, MOVING)	4 - SLAG, GRAVEL, STONE 5 - DIRT				
4 - DARK	- LIGHTED ROADWAY - ROADWAY NOT LIGHTED		1 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SC 4 - RAIN 9 - FREEZING RAIN OR F 5 - SLEET, HAIL 99 - OTHER / UNKNOW						7 - SLUSH 9 - OTHER/UNKNOWN	9 - OTHER /UNKNOWN				
5 - DARK - UNKNOWN ROADWAY 5 - SLEET, HAIL 99 - OTHER LIGHTING 9 - OTHER (JUNKNOWN						OWN			o omendaminom	75,4416,441				
									· · · · · · · · · · · · · · · · · · ·					
NARRATIVE UNIT #1 WA	AS TRAVELING W	V/B ON I-4	80 IN L	ANE 1.	AS					Indicate the north direction with				
LINIT #1 W/	AS TRAVELING, A	DEER E	NTERE	D THE						an "N" on the compass diagram.				
							ı		1 1					
	FROM THE AREA			IN. UINI			ı		' '					
THEN STRU	JCK THE DEER I	HEAD-ON	•				ı							
							I 1	I I	1 1					
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								1 1	1 1					
						,				NOT TO SCALE				
CRASH REPORTED DATE/TIME DISPATCH DATE/TIME ARRIVAL DATE/TIME									RED DATE/TIME	REPORT TAKEN BY POLICE AGENCY				
						119000								
	ROADWAY CLOSED INVESTIGATION TIME MINUTES S. Sabelli V. W						V. Walke	BY OFFICER'S NAME"						
0, ,	OFFICER'S BADGE NUMBER*						CHECKED BY OFFICER'S BADGE NUMBER*							

	OHI OF MAPET	IO DEPARTMENT PUBLIC SAFETY TY - SERVICE - PROTECTION		LOCAL REPORT NUMBER								
	UNIT#	OWNER NAME: LAST, FIRST, MID	(🗀 ,	Same As Driver)	OWNER PHONE: INCLUDE AREA CODE	(Same As Driver	DAMAGE DAMAGE SCALE					
~	0 1	GREENE KE	(■ Same A	- Drivers			1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN					
OWNE	26407		,		D ОН	44146						
	COMMERCIAL	CARRIER: NAME, ADDRESS, CITY, STA	TE, ZIP		COMMERCIAL CARRIER PHONE:	INCLUDE AREA CODE						
E	LP STATE	LICENSE PLATE #		VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE		DAMAGED AREA(S) INDICATE ALL THAT APPLY				
	OH	GXQ7102	<u> </u>	10 N E 3 C N 6 0 6 5			11 12 1	11 12 1				
		IRANCE INSURANCE COMPANY RIFIED FARMER'S		INSURANCE POLICY#	VEHICLE COLOR BLK	VEHICLE MODEL Armada	10 2	10 12 1				
	_	TYPE OF USE US DOT #			TOWED BY: COMPANY NAME		9 10 2 3	3 9 5 3 3				
	☐ COMMER	OOMMERCIAL GOVERNMENT BERPONICE INTERLOCK DEVICE HITTISKIP UNIT O 1 2 -10001 -26K LBS.		VEHICLE WEIGHT GVWR/GCWR	HAZARDO	US MATERIAL	7	8 4 7				
	DEVICE EQUIPPE			2 - 10,001 - 26K LBS.	☐ MATERIAL RELEASED ☐ PLACARD	CLASS# PLACARD ID#	7 6 5	11 12 7 6 5				
	Egonite	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS. 12 - GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN/SKATER	10 11 1 2					
	0 3	2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 0 3 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK			19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST 26 - BICYCLE	9	9 3 3				
	UNIT TYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	7.	8 11 4 7				
CLE	. 00	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	· -		12 7 6 5 12					
VEHI		# OF TRAILING UNITS					10 11 12 1	10 12 1 2				
		WAS VEHICLE OPERATING IN AUTO MODE WHEN CRASH OCCURED?	ONOMOUS 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	9 10 2	3 9 9 3 3				
	2	1-YES 2-NO 9-OTHER/UNK	AUTONOI NOWN MODE LE	MOUS 2 - PARTIAL AUTOMATION	4 - HIGH AUTOMATION 5 - FULL AUTOMATION		7 6 7	8 4 7				
	0 1	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FARM 17 - MOWING	21 - MAIL CARRIER 99 - OTHER /UNKNOW	7 6 5					
	SPECIAL	3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE ECIAL 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY		13 - POLICE 14 - PUBLIC UTILITY	18 - SNOW REMOVAL 19 - TOWING	N	•	12 12 12				
		1 - NO CARGO BODY TYPE	3 - VEHICLE TOWING ANOTHER	15 - CONSTRUCTION EQUIPMENT 8 5 - INTERMODAL CONTAINER	20 - SAFETY SERVICE PATROL 8 - POLE	12 - CONCRETE MIXER	12	1 1				
	$_{\parallel}$ 0 $_{\parallel}$ 1 $_{\parallel}$	1 / NOT APPLICABLE MOTOR VEHICLE CHASSIS 2 - BUS 4 - LOGGING 6 - CARGO VANVENCLOSED BOX		CHASSIS 6 - CARGO VAN/ENCLOSED BOX	9 - CARGO TANK 10 - FLAT BED	13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE	9 3 9 3 9 3 9					
	BODY TYPE			7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99 - OTHER / UNKNOWN	6	↑				
	VEHICLE	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		6 6 6				
Ī		1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE	☐ - NO DAMAGE [0]	☐ - UNDERCARRIAGE [14]				
		OTORIST CROSSWALK CROSSWALK 8 - SIDEWALK FION AT 2 - INTERSECTION - 5 - TRAVEL LANE-OTHER LOCATION		8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN	☐ - TOP [13] ☐ - UNIT	- ALL AREAS [15] NOT AT SCENE [16]				
	IMPACT	MPACT UNMARKED 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN			13 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE		TIAL POINT OF CONTACT				
	3	PRE-CRASH 10 - PARKED		9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19 - STANDING 20 - OTHER NON-MOTORIST	1 2 0 - NO DAMAGE	14 - UNDERCARRIAGE				
	71011011				15 - WALKING, RUNNING, JOGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE	1-12 - REFER TO	UNIT 15 - VEHICLE NOT AT SCENE				
					16 - WORKING 17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN	DIAGRAM	99 - UNKNOWN				
		1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TDAEEIGWAY FI CO	TRAFFIC				
	:	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE/ACDA	A PARKED POSITION 14 - STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNABLE 23 - OPENING DOOR INTO	TRAFFICWAY FLOW	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN				
	0 1	4 - RAN STOP SIGN 5 - UNSAFE SPEED	- RAN STOP SIGN		19 - LOAD SHIFTING/ FALLING/SPILLING	ROADWAY 99 - OTHER IMPROPER	1 - ONE-WAY 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN				
	CONTRIBUTING	6 - IMPROPER TURN			20 - IMPROPER CROSSING	ACTION	# of THROUGH LANES	3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING				
(c	CIRCUMSTANCES						ON ROAD	1 - NOT INVOLVED				
EVENT(S	SEQUENCE OF	EVENTS		EVENTS			04	2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING				
	4 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM	22 - WORK ZONE MAINTENANCE						
		3 - IMMERSION 4 - JACKKNIFE	UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL 12 - DOWNHILL RUNAWAY	18 - ANIMAL - DEER 19 - ANIMAL - OTHER	EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT	T / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST				
		5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN 14 - PEDESTRIAN		20 - MOTOR VEHICLE IN TRANSPORT	ANYTHING SET IN MOTION BY A MOTOR		2 - SOUTH 6 - NORTHWEST				
	3, , ,			15 - PEDALCYCLE	21 - PARKED MOTOR VEHICLE	VEHICLE 24 - OTHER MOVABLE	FROM 3 TO	4 - WEST 8 - SOUTHWEST				
		25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	COLLISION WITH FIXED OBJECT - 37 - TRAFFIC SIGN POST	- STRUCK 43 - CURB	50 -WORKZONE MAINTENANCE		4 - WEST 8 - SOUTHWEST				
	41 1 1	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	44 - DITCH 45 - EMBANKMENT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED				
		STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE OR	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT	6,0,	1 1-STATED/ESTIMATED SPEED				
		28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER	SUPPORT 42 - CULVERT	48 - TREE 49 - FIRE HYDRANT	99 - OTHER / UNKNOWN		2 - CALCULATED / EDR				
	6	Someon we I Mot	36 - MEDIAN OTHER BARRIER				POSTED SPEED	3 - UNDETERMINED				
	1		4				6 0					
HS	Y8304 OH1U 1/19 [7	FIRST HARMFUL EVENT 760-0820]	1	MOST HARMFUL EVENT				PAGE OF				

OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
M UNIT # NAME: LAST, FIR		2 0 2 0 3 4 1 3												
GRE ADDRESS: STREET, CITY, STATE, ZIP	0 5 0 1 1 9 6 9 5 1 M CONTACT PHONE - INCLUDE AREA CODE													
20107	OX TRL		BEDFORD OH 44146											
INJURIES INJURED EMS AGENCY (NAME) TAKEN S 5 1 1			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPM USED			SEATING POSITION MC HELMET 0 1			AIR BAG USAGE EJECTION TRAPPED					
OL STATE OPERATOR LICENSE NUMBER			SE CHARGED	LOCAL OF CODE	FENSE DESCRIPTION				CITATION NUMBER					
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPEC		CONDITION	ALCOHO	OL TEST VALUE	STATUS		G TEST(S) RESULT	T SELECT UP TO 4			
s 1		BY1	ALCOHOL OTHER DRUG	MARIJUANA	11		- 🗀	_ 1	1					
M UNIT# NAME: LAST, FIF O T	RST, MIDDLE						DATE OF BI	RTH		AGE	GENDER			
ADDRESS: STREET, CITY, STATE, ZIP	,							CONTACT PHONE - INCLUDE AREA CODE						
N TAKEN	EMS AGENCY (NAME)	INJURED TAKEN	TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQ USED	UIPMENT	DOT-complian	SEATING POS	ITION	AIR BAG USAGE	EJECTION	TRAPPED			
O BY	CENSE NUMBER	OFFENS	E CHARGED		FENSE DESCRIPTION	MC HELMET		<u> </u>	CITATION NUMBER					
м о т				CODE										
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPEC	TED MARIJUANA	CONDITION	ALCOHO TYPE	OL TEST VALUE	STATUS		G TEST(S) RESULT	SELECT UP TO 4			
M UNIT# NAME: LAST, FIF	RST, MIDDLE		OTHER DRUG	L			■ DATE OF BI	RTH		AGE	GENDER			
0 T 0														
R ADDRESS: STREET, CITY, STATE, ZIP S						CONTACT	PHONE - INCLUDE AREA CODE	1	1 1	1 1	1 1			
T INJURIES INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN T	O: MEDICAL FACILITY (NAME, CITY)	SAFETY EQU USED	JIPMENT	DOT-COMPLIAN	SEATING POS	ITION	AIR BAG USAGE	EJECTION	TRAPPED			
N L	CENSE NUMBER	OFFENS	E CHARGED		FENSE DESCRIPTION	MC HELMET			CITATION NUMBER					
o 1				CODE										
OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPEC	MARIJUANA	CONDITION	ALCOHO S TYPE	VALUE	STATUS		G TEST(S) RESULT	SELECT UP TO 4			
T			OTHER DRUG	CLASS	OL DESTRICT		991/59 910	TRACTION		TEOT 074				
INJURIES 1 - FATAL	SEATING POSITION 1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED	1 - CLASS A	CLASS	1 - ALCOHOL INTERLO DEVICE		1 - NOT DISTRACTED		1 - NONE	TEST STAT	05			
2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE	2 - CLASS B 3 - CLASS C		2 - CDL INTRASTATE C	2 - CDL INTRASTATE ONLY		2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION		2 - TEST REFUSED N 3 - TEST GIVEN, CONTAMINATED				
4 - POSSIBLE INJURY	4 - SECOND - LEFT SIDE	4 - DEPLOYED BOTH FF		4 - REGULAR CLASS (OHIO = D)		3 - CORRECTIVE LENSES 4 - FARM WAIVER		TYPING,	SAMPLE / UNUSABLE					
5 - NO APPARENT INJURY	(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M / C MOPED ON	NLY	5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A		DIALING) 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		4 - TEST GIVEN, RESULTS KNOWN					
INJURED TAKEN BY 1 - NOT TRANSPORTED	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	9 - DEPLOYMENT UNKN	OWN 6 - NO VALID OL		& CLASS B BUS	& CLASS B BUS		DEVICE -HELD	5 - TEST GIVEN, RESULTS UNKNOWN					
/TREATED AT SCENE 2 - EMS	(MOTORCYCLE SIDE CAR)	EJECTIO	N OL END	ORSEMENT		7 - EXCEPT TRACTOR-TRAILER 8 - INTERMEDIATE LICENSE		COMMUNICATION DEVICE		ALCOHOL TEST TYPE				
3 - POLICE	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	1 - NOT EJECTED	H - HAZMAT		RESTRICTIONS	RESTRICTIONS		5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		1 - NONE				
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB	2 - PARTIALLY EJECTED				9 - LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER		2 - BLOOD				
SAFETY EQUIPMENT	11 - PASSENGER IN OTHER	3 - TOTALLY EJECTED	P - PASSENGER			10 - LIMITED TO DAYLIGHT ONLY		7 - OTHER DISTRACTION INSIDE THE VEHICLE		3 - URINE 4 - BREATH				
1 - NONE USED 2 - SHOULDER BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	4 - NOT APPLICABLE TRAPPET	N - TANKER	TD.		11 - LIMITED TO EMPLOYMENT		8 - OTHER DISTRACTIONS OUTSID						
3 - LAP BELT ONLY USED	PICK-UP WITH CAP)	1 - NOT TRAPPED	Q-MOTOR 30001		12 - LIMITED - OTHER		THE VEHICLE		DRUG TEST TYPE					
4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM -	12 - PASSENGER IN UNENCLOSED	2 - EXTRICATED BY		R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS		13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND		9 - OTHER / UNKNOWN		1 - NONE				
FORWARD FACING	CARGO AREA 13 - TRAILING UNIT	MECHANICAL MEANS 3 - FREED BY		T - DOUBLE & TRIPLE TRAILERS		CONTROLS, OR OTHER ADAPTIVE DEVICES)		CONDITION 1 - APPARENTLY NORMAL		2 - BLOOD				
6 - CHILD RESTRAINT SYSTEM - REAR FACING	14 - RIDING ON VEHICLE	NON-MECHANICAL M	FANS	X - TANKER / HAZMAT		14 - MILITARY VEHICLES ONLY		2 - PHYSICAL IMPAIRMENT		3 - URINE				
7 - BOOSTER SEAT 8 - HELMET USED	EXTERIOR (NON-TRAILING UNIT)			THE		15 - MOTOR VEHICLES		2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G. DEPRESSED,		4 - OTHER				
9 - PROTECTIVE PADS USED	15 - NON-MOTORIST			GENDER		WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR		ANGRY, DISTURBED)		DRUG TEST RESULT(S) 1 - AMPHETAMINES				
(ELBOWS, KNEES, ETC.) 10 - REFLECTIVE CLOTHING	99 - OTHER / UNKNOWN			F-FEMALE		17 - PROSTHETIC AID		4 - ILLNESS		2 - BARBITURATES				
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY				M - MALE U - OTHER/UNKNOWN		18 - OTHER		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		3 - BENZODIAZEPINES 4 - CANNABINOIDS				
99 - OTHER / UNKNOWN								6 - UNDER THE INFLUENCE OF		5 - COCAINE				
							MEDICATIONS / DRUGS / ALCOHOL			6 - OPIATES / OPIOIDS 7 - OTHER				
							9 - OTHER / UNKNOW	N		TIVE RESULTS				
HSY8306 OH1M 1/19 [760-1500]										PAGE	OF			
										INGL	J1			