

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

2 | 0 | 2 | 0 | 3 | 6 | 5 | 2 |

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

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

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

COUNTY *
1 | 8 |
LOCALITY *
1 |

LOCATION: CITY, VILLAGE, TOWNSHIP *
GARFIELD HTS

CRASH DATE/TIME *
1 | 2 | 0 | 4 | 2 | 0 | 2 | 0 | 1 | 7 | 3 | 2 |

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
TURNEY
ROAD TYPE
R | D |

LATITUDE DECIMAL DEGREES
4 | 1 | . | 4 | 1 | 3 | 0 | 3 | 5 |

ROUTE TYPE
ROUTE NUMBER

PREFIX
REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)
WILLARD
ROAD TYPE
A | V |

LONGITUDE DECIMAL DEGREES
8 | 1 | . | 6 | 0 | 3 | 0 | 3 | 6 |

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

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

INTERSECTION RELATED
 WITHIN INTERSECTION OR ON APPROACH
 WITHIN INTERCHANGE AREA
NUMBER OF APPROACHES
4 |

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

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

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
6 |
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
3 |
1 - DAYLIGHT
2 - DAWN/DUSK
3 - DARK - LIGHTED ROADWAY
4 - DARK - ROADWAY NOT LIGHTED
5 - DARK - UNKNOWN ROADWAY LIGHTING
9 - OTHER / UNKNOWN

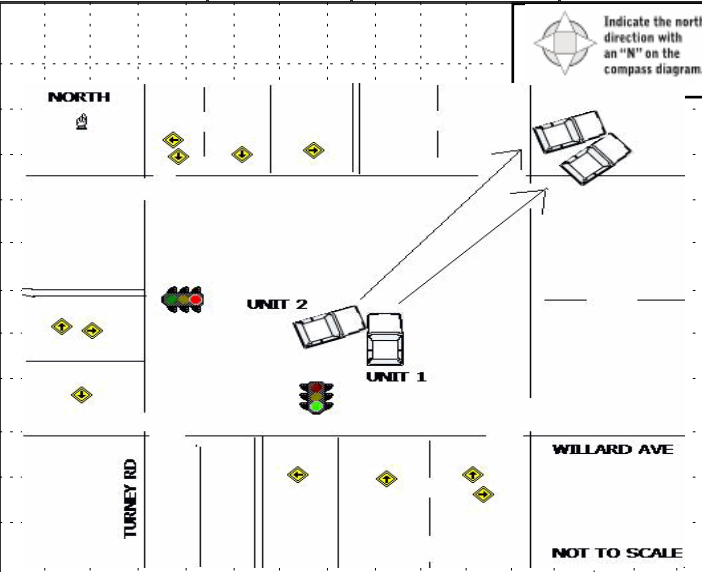
WEATHER
2 |
1 - CLEAR
2 - CLOUDY
3 - FOG, SMOG, SMOKE
4 - RAIN
5 - SLEET, HAIL
6 - SNOW
7 - SEVERE CROSSWINDS
8 - BLOWING SAND, SOIL, DIRT, SNOW
9 - FREEZING RAIN OR FREEZING DRIZZLE
99 - OTHER / UNKNOWN

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

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

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

NARRATIVE
UNIT 1 WAS TRAVELING N/B ON TURNEY ROAD, IN THE CURB LANE. UNIT 1 WAS TRAVELING N/B THROUGH THE INTERSECTION OF TURNEY ROAD AND WILLARD AVENUE WHEN UNIT 2, WHICH WAS TRAVELING E/B ON ANTENUCCI BOULEVARD, FAILED TO YIELD FOR THE RED TRAFFIC SIGNAL AT THE INTERSECTION OF ANTENUCCI BLVD. AND TURNEY ROAD. AS A RESULT, UNIT 2 STRUCK UNIT 1 IN THE FRONT DRIVER'S SIDE, CAUSING BOTH UNITS TO LEAVE THE ROADWAY.



CRASH REPORTED DATE/TIME
1 | 2 | 0 | 4 | 2 | 0 | 2 | 0 | 1 | 7 | 3 | 2 |

DISPATCH DATE/TIME
1 | 2 | 0 | 4 | 2 | 0 | 2 | 0 | 1 | 7 | 3 | 2 |

ARRIVAL DATE/TIME
1 | 2 | 0 | 4 | 2 | 0 | 2 | 0 | 1 | 7 | 4 | 8 |

SCENE CLEARED DATE/TIME
1 | 2 | 0 | 4 | 2 | 0 | 2 | 0 | 1 | 8 | 1 | 5 |

REPORT TAKEN BY
 POLICE AGENCY
 MOTORIST

TOTAL TIME ROADWAY CLOSED
0 |

OTHER INVESTIGATION TIME
3 | 0 |

TOTAL MINUTES
5 | 7 |

OFFICER'S NAME *
D. Simia
OFFICER'S BADGE NUMBER *
0 | 2 | 9 |

CHECKED BY OFFICER'S NAME *
N. Rossi
CHECKED BY OFFICER'S BADGE NUMBER *
S | 1 | 3 |

SUPPLEMENT (CORRECTION - ADDITION)
www.dps.ohio.gov

2 0 2 0 3 6 5 2

OWNER

UNIT # 0 1 OWNER NAME: LAST, FIRST, MIDDLE (Same As Driver)
WALKER JAWAN ANTHONY

OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver)
4188 W 23RD ST CLEVELAND OH 44109

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

DAMAGE

DAMAGE SCALE

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

VEHICLE

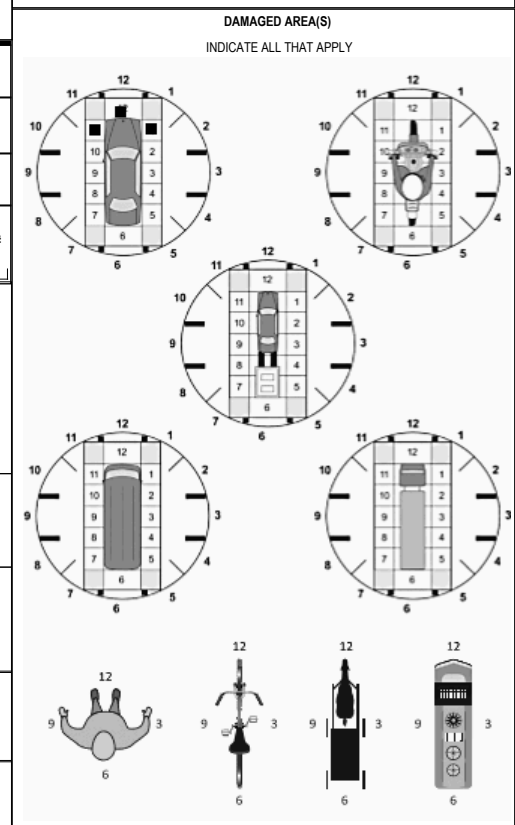
LP STATE OH LICENSE PLATE # HXW9622 VEHICLE IDENTIFICATION # 3VWDZ7A1J6BM327426 VEHICLE YEAR 2011 VEHICLE MAKE Volkswagen

INSURANCE VERIFIED INSURANCE COMPANY FIRST OHIO INS. INSURANCE POLICY # ITOH225656 VEHICLE COLOR BLK VEHICLE MODEL Jetta

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.

HAZARDOUS MATERIAL: MATERIAL RELEASED CLASS # PLACARD ID # PLACARD



UNIT TYPE 0 1 # of TRAILING UNITS 0

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

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

1 - YES 2 - NO 9 - OTHER / 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 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 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 15 - TOWING 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 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 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER/ROADSIDE 8 - SIDEWALK 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 14 - GARBAGE/REFUSE 15 - TOWING 16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL 21 - MAIL CARRIER 22 - OTHER / UNKNOWN

ACTION 0 1 PRE-CRASH ACTION

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

CONTRIBUTING CIRCUMSTANCES 0 1

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

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

INITIAL POINT OF CONTACT

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

SEQUENCE OF EVENTS

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 8 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 - IMMERSION 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE

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 5

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 48 - TREE 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN
 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 49 - FIRE HYDRANT

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

UNIT / NON-MOTORIST DIRECTION

FROM 2 TO 1

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

UNIT SPEED 2 0

POSTED SPEED 2 5

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

2 0 2 0 3 6 5 2

UNIT # 0 2 **OWNER NAME: LAST, FIRST, MIDDLE** (Same As Driver) STERGIS MERCEDES LAQUENTA **OWNER PHONE: INCLUDE AREA CODE** (Same As Driver)

OWNER ADDRESS: STREET, CITY, STATE, ZIP (Same As Driver) 1905 WALTON AVE LOWER CLEVELAND OH 44113

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

LP STATE OH **LICENSE PLATE #** K250981 **VEHICLE IDENTIFICATION #** 2G1WB5EJ6B1148083 **VEHICLE YEAR** 2011 **VEHICLE MAKE** Chevrolet

INSURANCE VERIFIED **INSURANCE COMPANY** VIKING INS. **INSURANCE POLICY #** 11406357020 **VEHICLE COLOR** GRY **VEHICLE MODEL** Impala

TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE **US DOT #** **TOWED BY: COMPANY NAME**

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT **# OCCUPANTS** 0 2 **VEHICLE WEIGHT GVWR/GCWR** 1- ≤10K LBS. 2- 10,001 - 26K LBS. 3- >26K LBS. **HAZARDOUS MATERIAL** MATERIAL RELEASED PLACARD **CLASS #** **PLACARD ID #**

UNIT TYPE 0 1 **# of TRAILING UNITS** 0

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

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

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

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 99- 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 1- INTERSECTION - MARKED CROSSWALK 2- INTERSECTION - UNMARKED 3- INTERSECTION - OTHER 4- MIDLICK - 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

ACTION 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

CONTRIBUTING CIRCUMSTANCES 0 3 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

SEQUENCE OF EVENTS

EVENTS

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 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

DAMAGE

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

DAMAGED AREA(S) INDICATE ALL THAT APPLY

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

INITIAL POINT OF CONTACT

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

TRAFFIC

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

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

OF THROUGH LANES ON ROAD 3

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

UNIT / NON-MOTORIST DIRECTION

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

UNIT SPEED 40 **POSTED SPEED** 35 **DETECTED SPEED** 1 1- STATED/ESTIMATED SPEED 2- CALCULATED / EDR 3- UNDETERMINED

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER
2 0 2 0 3 6 5 2

UNIT # 0 1	NAME: LAST, FIRST, MIDDLE WALKER JAWAN AN		DATE OF BIRTH 0 2 1 3 1 9 9 7	AGE	GENDER M
ADDRESS: STREET, CITY, STATE, ZIP 4188 W 23RD ST CLEVELAND OH 44109			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	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		DRUG TEST(S)			
STATUS TYPE VALUE STATUS TYPE RESULT SELECT UP TO 4					

UNIT # 0 2	NAME: LAST, FIRST, MIDDLE STERGIS MERCEDES LAC		DATE OF BIRTH 1 0 2 2 1 9 9 1	AGE 29	GENDER F
ADDRESS: STREET, CITY, STATE, ZIP 1905 WALTON AVE LOWER CLEVELAND OH 44113			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	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		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		EJECTION		CONDITION		ALCOHOL TEST TYPE
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	9 - DEPLOYMENT UNKNOWN	H - HAZMAT	8 - INTERMEDIATE LICENSE RESTRICTIONS	6 - PASSENGER	1 - NONE
2 - EMS	8 - THIRD - MIDDLE		M - MOTORCYCLE	9 - LEARNER'S PERMIT RESTRICTIONS	7 - OTHER DISTRACTION INSIDE THE VEHICLE	2 - BLOOD
3 - POLICE	9 - THIRD - RIGHT SIDE		P - PASSENGER	10 - LIMITED TO DAYLIGHT ONLY	8 - OTHER DISTRACTIONS OUTSIDE THE VEHICLE	3 - URINE
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB		N - TANKER	11 - LIMITED TO EMPLOYMENT	9 - OTHER / UNKNOWN	4 - BREATH
SAFETY EQUIPMENT		TRAPPED		CONDITION		DRUG TEST TYPE
1 - NONE USED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOT TRAPPED	Q - MOTOR SCOOTER	12 - LIMITED - OTHER	1 - APPARENTLY NORMAL	1 - NONE
2 - SHOULDER BELT ONLY USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	2 - EXTRICATED BY MECHANICAL MEANS	R - THREE-WHEEL MOTORCYCLE	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	2 - PHYSICAL IMPAIRMENT	2 - BLOOD
3 - LAP BELT ONLY USED	13 - TRAILING UNIT	3 - FREED BY NON-MECHANICAL MEANS	S - SCHOOL BUS	14 - MILITARY VEHICLES ONLY	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	3 - URINE
4 - SHOULDER & LAP BELT USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		T - DOUBLE & TRIPLE TRAILERS	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	4 - ILLNESS	4 - OTHER
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	15 - NON-MOTORIST		X - TANKER / HAZMAT	16 - OUTSIDE MIRROR	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	DRUG TEST RESULT(S)
6 - CHILD RESTRAINT SYSTEM - REAR FACING	99 - OTHER / UNKNOWN			17 - PROSTHETIC AID	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	1 - AMPHETAMINES
7 - BOOSTER SEAT				18 - OTHER	9 - OTHER / UNKNOWN	2 - BARBITURATES
8 - HELMET USED			GENDER			3 - BENZODIAZEPINES
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.)			F - FEMALE			4 - CANNABINOIDS
10 - REFLECTIVE CLOTHING			M - MALE			5 - COCAINE
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY			U - OTHER/UNKNOWN			6 - OPIATES / OPIOIDS
99 - OTHER / UNKNOWN						7 - OTHER
						8 - NEGATIVE RESULTS

LOCAL REPORT NUMBER									
2	0	2	0	3	6	5	2		

OCCUPANT	UNIT # 2	NAME: LAST, FIRST, MIDDLE SEARS JAVANTE T			DATE OF BIRTH 1 1 0 9 1 9 9 2			AGE 2 8	GENDER M
	ADDRESS: STREET, CITY, STATE, ZIP 1905 WALTON AVE LOWER CLEVELAND OH 44113				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	SEATING POSITION 0 3	AIR BAG USAGE 1	EJECTION 1
OCCUPANT	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
OCCUPANT	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
OCCUPANT	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

INJURIES		SAFETY EQUIPMENT USED		SEATING POSITION		AIR BAG USAGE	
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY		1 - NONE USED - VEHICLE OCCUPANT 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN		1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN	
INJURED TAKEN BY		EJECTION		TRAPPED			
1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN		1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE		1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS			
GENDER							
F - FEMALE M - MALE U - OTHER/UNKNOWN							

WITNESS	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH			AGE	GENDER
	ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE				
WITNESS	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH			AGE	GENDER
	ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE				
WITNESS	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH			AGE	GENDER
	ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE				