



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

<input type="checkbox"/> PHOTOSTAKEN	<input type="checkbox"/> OH-2	<input type="checkbox"/> OH-3
<input type="checkbox"/> SECONDARY CRASH	<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER
<input type="checkbox"/> PRIVATE PROPERTY		

LOCAL INFORMATION

REPORTING AGENCY NAME* **City of Kent Police** NCIC* **06703**

2 0 2 1 - 0 0 0 0 4 2 9 9

HIT/SKIP 1 - SOLVED 2 - UNSOLVED	NUMBER OF UNITS 0 2	UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN
1		0 1

COUNTY* **6 7** LOCALITY* **1** LOCATION: CITY, VILLAGE, TOWNSHIP* **Kent**

LOCATION ROAD NAME **SUMMIT** ROAD TYPE **S T**

CRASH DATE / TIME* **0 3 1 9 2 0 2 1 / 1 7 3 0** CRASH SEVERITY **5**

ROUTE TYPE **3** PREFIX **3** LOCATION ROAD NAME **SUMMIT** ROAD TYPE **S T**

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) **DEPEYSTER** ROAD TYPE **S T**

LATITUDE DECIMAL DEGREES **4 1 1 5 0 0 9 0** LONGITUDE DECIMAL DEGREES **8 1 3 5 6 4 3 3**

REFERENCE POINT **1** DIRECTION FROM REFERENCE **1 - NORTH**

ROUTE TYPE **IR - INTERSTATE ROUTE(TP)** ROAD TYPE **AL - ALLEY**

INTERSECTION RELATED WITHIN INTERSECTION OR ON APPROACH **4**

DISTANCE FROM REFERENCE **1** DISTANCE UNIT OF MEASURE **1 - MILES**

ROAD TYPE **HW - HIGHWAY** **RD - ROAD** **LA - LANE** **SQ - SQUARE**

ROADWAY ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT **0 1** MANNER OF CRASH COLLISION/IMPACT **1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT**

DIRECTION OF TRAVEL **1 - NORTH** MEDIAN TYPE **1 - DIVIDED FLUSH MEDIAN (<4 FEET)**

CONTOUR **1** CONDITIONS **1** SURFACE **2**

WORK ZONE RELATED WORKERS PRESENT LAW ENFORCEMENT PRESENT ACTIVE SCHOOL ZONE

WEATHER **0 1** **1 - CLEAR** **6 - SNOW** **2 - CLOUDY** **7 - SEVERE CROSSWINDS**

CRASH REPORTED DATE / TIME **0 3 1 9 2 0 2 1 / 1 7 3 0** DISPATCH DATE / TIME **0 3 1 9 2 0 2 1 / 1 7 3 0**

LIGHT CONDITION **1** WEATHER **0 1**

ARRIVAL DATE / TIME **0 3 1 9 2 0 2 1 / 1 7 3 0** SCENE CLEARED DATE / TIME **0 3 1 9 2 0 2 1 / 1 8 3 1**

REPORT TAKEN BY POLICE AGENCY MOTORIST SUPPLEMENT

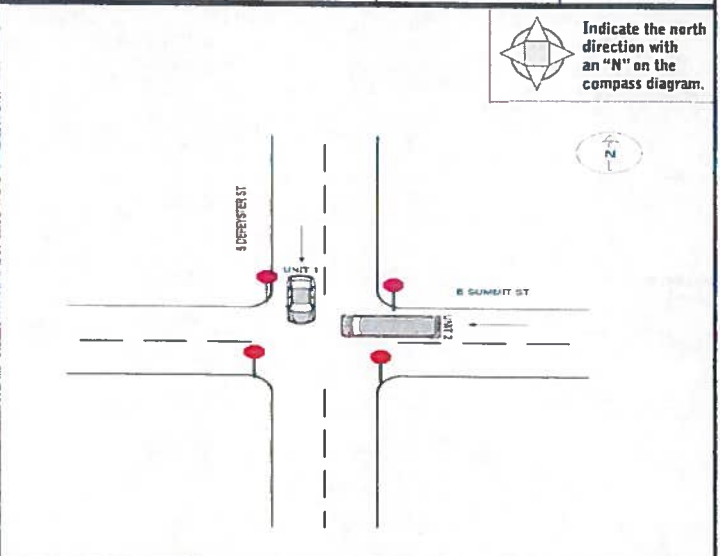
CRASH REPORTED DATE / TIME **0 3 1 9 2 0 2 1 / 1 7 3 0** DISPATCH DATE / TIME **0 3 1 9 2 0 2 1 / 1 7 3 0**

ARRIVAL DATE / TIME **0 3 1 9 2 0 2 1 / 1 7 3 0** SCENE CLEARED DATE / TIME **0 3 1 9 2 0 2 1 / 1 8 3 1**

REPORT TAKEN BY POLICE AGENCY MOTORIST SUPPLEMENT

NARRATIVE

UNIT 1 WAS TRAVELING SB ON S DEPEYSTER ST APPROACHING THE INTERSECTION OF S DEPEYSTER ST AND E SUMMIT ST. UNIT 2 WAS WB AT THE STOP SIGN AT E SUMMIT ST AND S DEPEYSTER ST. UNIT 2 THEN, APPROPRIATELY, BEGAN TO CONTINUE WB THROUGH THE INTERSECTION. UNIT 1 FAILED TO STOP AT THE STOP SIGN ON S DEPEYSTER ST RUNNING IN FRONT OF UNIT 2. UNIT 2 STRUCK UNIT 1. UNIT 1 WAS CITED FOR STOP SIGN VIOLATION.



TOTAL TIME ROADWAY CLOSED **0 0 6** OTHER INVESTIGATION TIME **0 2 0** TOTAL MINUTES **1 0 0**

OFFICER'S NAME* **Moore, Matthew J** OFFICER'S BADGE NUMBER* **2 5 2**

CHECKED BY OFFICER'S NAME* **Gaydos, Ryan** CHECKED BY OFFICER'S BADGE NUMBER* **2 1 3**

LOCAL REPORT NUMBER
 2021-00004299

OWNER

UNIT # 01 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
RUESCHMAN, CHERYL, ANN

OWNER PHONE: (INCLUDE AREA CODE) (SAME AS DRIVER)

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
1121 DORALEE DR, Brimfield Twp, OH 44260

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

VEHICLE

LP STATE OH LICENSE PLATE # FTZ3051 VEHICLE IDENTIFICATION # 1G4HP57278U1251824 VEHICLE YEAR 2008 VEHICLE MAKE Buick

INSURANCE VERIFIED INSURANCE COMPANY _____ INSURANCE POLICY # _____ COLOR RED VEHICLE MODEL LACROSSE

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY

TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

US DOT # _____ TOWED BY: COMPANY NAME City Service

HAZARDOUS MATERIAL: MATERIAL RELEASED PLACARD

UNIT TYPE 01

1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12 - GOLF CART	16 - 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 - PICKUP	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 HITS/SKIP

of TRAILING UNITS _____

DAMAGED AREA(S)

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 01

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

1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS

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 PR OR ACCIDENT 11 - CONCRETE MIXER 12 - AUTO TRANSPORTER 13 - CARGO TANK 14 - FLAT BED 15 - DUMP 16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL 21 - MAIL CARRIER 99 - OTHER / UNKNOWN

CARGO BODY TYPE

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 - GRAINCHIPS/GRAVEL

8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP

12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - CARGO/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 PR OR ACCIDENT 11 - CONCRETE MIXER 12 - AUTO TRANSPORTER 13 - CARGO TANK 14 - FLAT BED 15 - DUMP 16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL 21 - MAIL CARRIER 99 - OTHER / UNKNOWN

- NO DAMAGE [0] - UNDERCARRIAGE [14]

- TOP [13] - ALL AREAS [15]

- UNIT NOT AT SCENE [16]

NON-MOTORIST LOCATION AT IMPACT

1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIA/CROSSING ISLAND	12 - FIRST RESPONDER AT INCIDENT SCENE
2 - INTERSECTION - UNMARKED CROSSWALK	4 - MIDLOCK - 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

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 - NO DAMAGE 14 - UNDERCARRIAGE

09 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE

13 - TOP 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES 04

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 DISCERNIBLE
3 - RAN RED LIGHT	9 - IMPROPER LANE CHANGE	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			

TRAFFICWAY FLOW

2 1 - ONE-WAY 2 - TWO-WAY

TRAFFIC CONTROL

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

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 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	12 - DOWNHILL RUNAWAY	17 - ANIMAL - FARM	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
3 - IMMERSION	8 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION	18 - ANIMAL - DEER	24 - OTHER MOVABLE OBJECT
4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	19 - ANIMAL - OTHER	
5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	15 - PEDALCYCLE	20 - MOTOR VEHICLE IN TRANSPORT	
			21 - PARKED MOTOR VEHICLE	

OF THROUGH LANES ON ROAD 2

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 - WORK ZONE 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
30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	48 - TREE	99 - OTHER / UNKNOWN
			49 - FIRE HYDRANT	

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

UNIT / NON-MOTORIST DIRECTION

FROM 1 TO 2

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

UNIT SPEED 025

POSTED SPEED 25

DETECTED SPEED 1

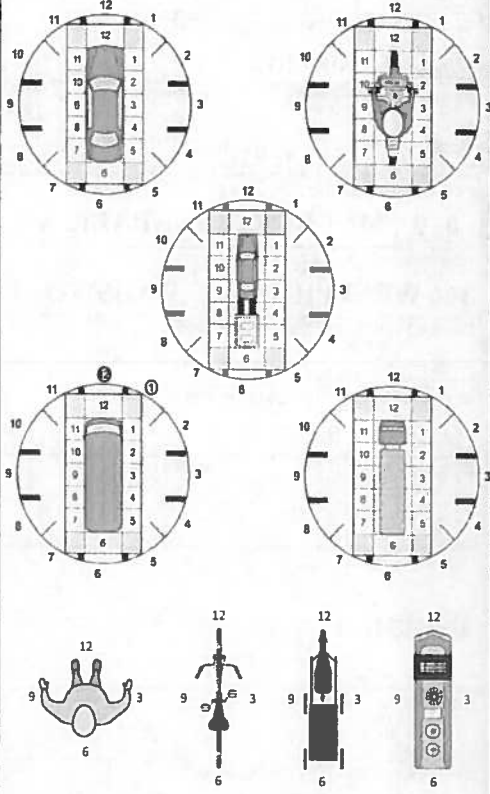
1 - STATED / ESTIMATED SPEED
 2 - CALCULATED / EDR
 3 - UNDETERMINED

UNIT # 02 OWNER NAME: LAST, FIRST, MIDDLE (SAVE AS DRIVER) ODOT DISTRICT 4 OWNER ADDRESS: 2088 ARLINGTON RD, Springfield, OH 44306

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

LP STATE OH LICENSE PLATE # T4970 VEHICLE IDENTIFICATION # 1F1T1S1W2Z1M7F1K1B112161816 VEHICLE YEAR 2015 VEHICLE MAKE Ford

DAMAGED AREA(S) INDICATE ALL THAT APPLY



INSURANCE COMPANY INSURANCE POLICY # COLOR VIII VEHICLE MODEL TRANSIT

TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE US DOT # 2030932

UNIT TYPE 05 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE

NO DAMAGE (0) UNDERCARRIAGE (14) TOP (13) ALL AREAS (15) UNIT NOT AT SCENE (16)

SPECIAL FUNCTION 01 1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING

VEHICLE DEFECTS 06 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS

NON-MOTORIST LOCATION AT IMPACT 4 1 - INTERSECTION - MARKED CROSSWALK

INITIAL POINT OF CONTACT 12 0 - NO DAMAGE 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE

ACTION 01 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING

TRAFFIC TRAFFICWAY FLOW 2 TRAFFIC CONTROL 4

CONTRIBUTING CIRCUMSTANCES 01 1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT

OF THROUGH LANES ON ROAD 2 RAIL GRADE CROSSING 1

SEQUENCE OF EVENTS 120 1 - OVERTURN/ROLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION

UNIT / NON-MOTORIST DIRECTION FROM 3 TO 4

EVENTS 1 25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE

UNIT SPEED 010 DETECTED SPEED 1 1 - STATED / ESTIMATED SPEED



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
 2,0,2,1 - 0,0,0,0,4,2,9,9

UNIT # 0,1	NAME: LAST, FIRST, MIDDLE RUESCHMAN, CHERYL, ANN	DATE OF BIRTH 02 / 16 / 1945	AGE 76	GENDER F
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ADDRESS: STREET, CITY, STATE, ZIP
 1121 DORALEE DR ,Brimfield Twp ,OH 44260

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 0,1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE O,H	OPERATOR LICENSE NUMBER		OFFENSE CHARGED 331.19	LOCAL CODE <input checked="" type="checkbox"/>	OFFENSE DESCRIPTION Operation of Vehicle		CITATION NUMBER 61197				
OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3 0,3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 9	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS 1	DRUG TEST(S) TYPE 1	DRUG TEST(S) RESULT SELECT UP TO 4

UNIT # 0,2	NAME: LAST, FIRST, MIDDLE MCCRORK, RANDALL, A	DATE OF BIRTH 03 / 05 / 1958	AGE 63	GENDER M
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ADDRESS: STREET, CITY, STATE, ZIP
 166 WESTVIEW AVE ,WADSWORTH ,OH 44281

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 0,1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE O,H	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 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS 1	DRUG TEST(S) TYPE 1	DRUG TEST(S) RESULT SELECT UP TO 4

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
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ADDRESS: STREET, CITY, STATE, ZIP

CONTACT PHONE - INCLUDE AREA CODE

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY	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 <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER				
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) 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 / UNSAMPLE
4 - POSSIBLE INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SIDE	4 - REGULAR CLASS (OHID = 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 - MC MOPED ONLY	5 - EXCEPT CLASS A BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5 - TEST GIVEN, RESULTS UNKNOWN
	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER	
	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE	
	8 - THIRD - MIDDLE			8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	
	9 - THIRD - RIGHT SIDE			9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	
	10 - SLEEPER SECTION OF TRUCK CAB			10 - LIMITED TO DAYLIGHT ONLY		
	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)			11 - LIMITED TO EMPLOYMENT		
	12 - PASSENGER IN UNENCLOSED CARGO AREA			12 - LIMITED - OTHER		
	13 - TRAILING UNIT			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		
	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			14 - MILITARY VEHICLES ONLY		
	15 - NON-MOTORIST			15 - MOTOR VEHICLES WITHOUT AIR BRAKES		
	99 - OTHER / UNKNOWN			16 - OUTSIDE MIRROR		
				17 - PROSTHETIC AID		
				18 - OTHER		



Narrative Continuation

LOCAL REPORT NUMBER

2 0 2 1 - 0 0 0 0 4 2 9 9