

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*


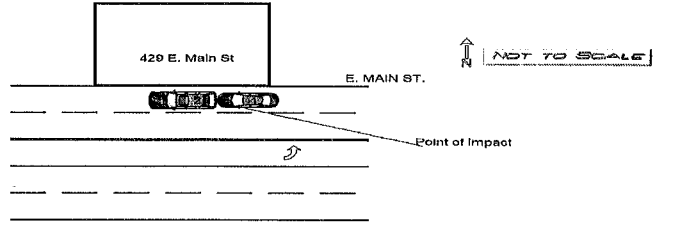
<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION REPORTING AGENCY NAME* City of Kent Police NCIC* 0 6 7 0 3		2 0 2 2 - 0 0 0 0 6 6 8 3		
COUNTY* 6 7 LOCALITY* 1 LOCATION: CITY, VILLAGE, TOWNSHIP* Kent		CRASH DATE / TIME* 0 4 2 9 2 0 2 2 / 0 9 3 1		CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY 5		
ROUTE TYPE S R ROUTE NUMBER 5 9 PREFIX 3 LOCATION ROAD NAME MAIN ROAD TYPE S T		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 429 ROAD TYPE		LATITUDE DECIMAL DEGREES 4 1 1 5 3 8 8 8 LONGITUDE DECIMAL DEGREES 8 1 3 5 1 5 9 3		

REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 3		DIRECTION FROM REFERENCE N - NORTH S - SOUTH E - EAST W - WEST		ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE		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 <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES ROADWAY <input type="checkbox"/> ROADWAY DIVIDED	
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LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP 0 1		MANNER OF CRASH COLLISION/IMPACT 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 2		DIRECTION OF TRAVEL N - NORTH S - SOUTH E - EAST W - WEST		MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN (ANY TYPE) 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER/UNKNOWN	
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<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> 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	
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LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN 1		WEATHER 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 0 1	
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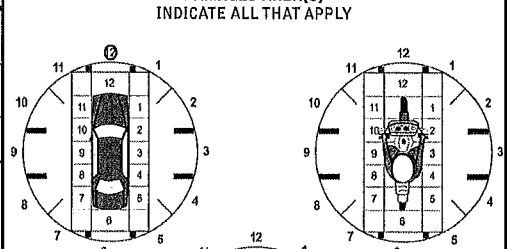
NARRATIVE Units #1 and #2 were both W/B on E. Main St. Unit #2 made a complete stop in traffic then Unit #1 struck Unit #2 in the rear.		Indicate the north direction with an "N" on the compass diagram. 	
			

CRASH REPORTED DATE / TIME 0 4 2 9 2 0 2 2 / 0 9 3 1		DISPATCH DATE / TIME 0 4 2 9 2 0 2 2 / 0 9 3 2		ARRIVAL DATE / TIME 0 4 2 9 2 0 2 2 / 0 9 3 4		SCENE CLEARED DATE / TIME 0 4 2 9 2 0 2 2 / 1 0 0 6		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	
TOTAL TIME ROADWAY CLOSED 0 3 5		OTHER INVESTIGATION TIME 0 2 0		TOTAL MINUTES 0 5 4		OFFICER'S NAME* Smith, Mitchell Robert		CHECKED BY OFFICER'S NAME* Ennemoser, James	
OFFICER'S BADGE NUMBER* 2 3 1		CHECKED BY OFFICER'S BADGE NUMBER* 2 5 5		SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS)					

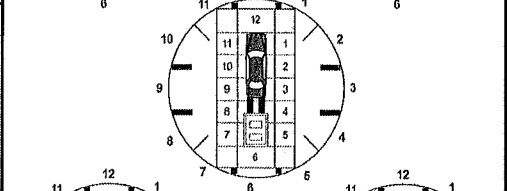
OWNER
UNIT # 01 **OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER)**
HOLMES, CRAIG, R
OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)
1837 ASHTON LN 147, Franklin Twp, OH 44240
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP _____
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE _____

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

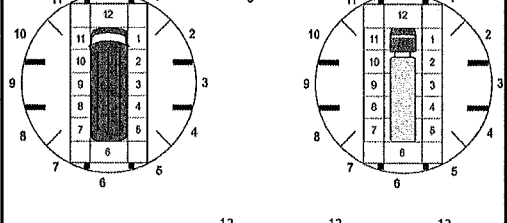
VEHICLE
LP STATE CT **LICENSE PLATE #** BD96448 **VEHICLE IDENTIFICATION #** 3 F A 6 P 0 T 9 0 J R 2 2 1 0 1 0
VEHICLE YEAR 2018 **VEHICLE MAKE** Ford
 INSURANCE VERIFIED **INSURANCE COMPANY** CENTURY NATIONAL INS **INSURANCE POLICY #** 2008959467 **COLOR** GRY **VEHICLE MODEL** FUSION
 COMMERCIAL **GOVERNMENT** **IN EMERGENCY RESPONSE** **US DOT #** _____ **TOWED BY: COMPANY NAME** City Service
 INTERLOCK DEVICE EQUIPPED **HIT/SKIP UNIT** **#OCCUPANTS** 01 **VEHICLE WEIGHT GVWR/GCWR**
 1 - <10K LBS.
 2 - 10,001 - 26K LBS.
 3 - >26K LBS.
 MATERIAL RELEASED **HAZARDOUS MATERIAL CLASS #** _____ **PLACARD ID #** _____



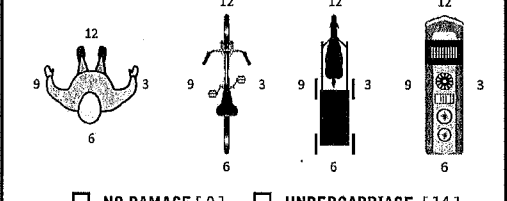
UNIT TYPE 01
 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER
 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)
 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT 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
OF TRAILING UNITS 00



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 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 9 - CARGOTANK 13 - AUTO TRANSPORTER
 7 - GRAIN/CHIPS/GRAVEL 10 - FLAT BED 14 - GARBAGE/REFUSE 99 - 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



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

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

ACTION 3
 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
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
 13 - TOP 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES 08
 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 - OPERATING DEFECTIVE EQUIPMENT 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE
 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - STOPPED OR PARKED ILLEGALLY 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 17 - SWERVING TO AVOID 21 - IMPROPER CROSSING
 6 - IMPROPER TURN 12 - IMPROPER BACKING

TRAFFIC
TRAFFICWAY FLOW
 1 - ONE-WAY 2 - TWO-WAY
TRAFFIC CONTROL
 1 - ROUNDABOUT 4 - STOP SIGN
 2 - SIGNAL 5 - YIELD SIGN
 3 - FLASHER 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 20 - MOTOR VEHICLE IN TRANSPORT
 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE

OF THROUGH LANES ON ROAD 2
RAIL GRADE CROSSING
 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

UNIT / NON-MOTORIST DIRECTION
 FROM 3 TO 4
 1 - NORTH 5 - NORTHEAST
 2 - SOUTH 6 - NORTHWEST
 3 - EAST 7 - SOUTHEAST
 4 - WEST 8 - SOUTHWEST
 9 - OTHER / UNKNOWN

UNIT SPEED 0 2 5
POSTED SPEED 3 5
DETECTED SPEED 1
 1 - STATED / ESTIMATED SPEED
 2 - CALCULATED / EDR
 3 - UNDETERMINED

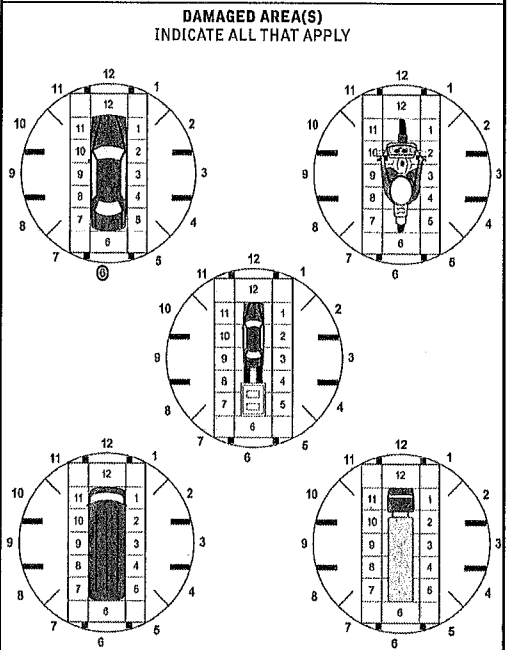
OWNER
UNIT # 02 | **OWNER NAME:** LAST, FIRST, MIDDLE (☑ SAME AS DRIVER) **SUTHERIN, OLIVER, JAMES**
OWNER ADDRESS: STREET, CITY, STATE, ZIP (☑ SAME AS DRIVER)
 2216 ORCHARD CIR, Brimfield Twp, OH 44240
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
OWNER PHONE: INCLUDE AREA CODE (☑ SAME AS DRIVER)
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LOCAL REPORT NUMBER
 2022-00006683

LP STATE OH | **LICENSE PLATE #** N974384 | **VEHICLE IDENTIFICATION #** 5U1X53D1P03N9L512711 | **VEHICLE YEAR** 2022 | **VEHICLE MAKE** BMW
 INSURANCE VERIFIED | **INSURANCE COMPANY** USAA | **INSURANCE POLICY #** 050704468C71013 | **COLOR** BLK | **VEHICLE MODEL** X3
 COMMERCIAL | **GOVERNMENT** | **IN EMERGENCY RESPONSE** | **US DOT #** | **TOWED BY:** COMPANY NAME
 INTERLOCK DEVICE EQUIPPED | **HIT/SKIP UNIT** | **#OCCUPANTS** 01 | **VEHICLE WEIGHT GVWR/GCWR**
 1 - ≤10K Lbs.
 2 - 10,001 - 26K Lbs.
 3 - >26K Lbs.
 MATERIAL RELEASED | **PLACARD** | **HAZARDOUS MATERIAL CLASS #** | **PLACARD ID #**

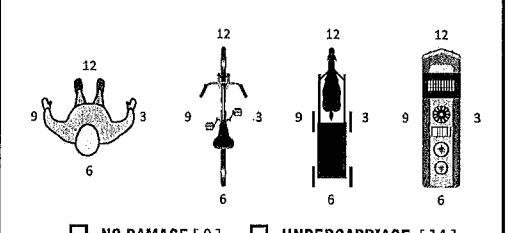
DAMAGE
DAMAGE SCALE
 3 | 1 - NONE | 3 - FUNCTIONAL DAMAGE
 2 - MINOR DAMAGE | 4 - DISABLING DAMAGE
 9 - UNKNOWN

UNIT TYPE 03 | **# OF TRAILING UNITS** 00
 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? 2 | **AUTONOMOUS MODE LEVEL** 0
 1 - YES 2 - NO 9 - OTHER / UNKNOWN
 0 - NO AUTOMATION | 1 - DRIVER ASSISTANCE | 3 - CONDITIONAL AUTOMATION | 4 - HIGH AUTOMATION | 5 - FULL AUTOMATION
 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 | 99 - OTHER / UNKNOWN

SPECIAL FUNCTION 01 | **CARGO BODY TYPE** 01 | **VEHICLE DEFECTS**
 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 - CARGOTANK | 10 - FLAT BED | 11 - DUMP | 12 - CONCRETE MIXER | 13 - AUTO TRANSPORTER | 14 - GARBAGE/REFUSE | 99 - OTHER / UNKNOWN
 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 01 | **ACTION** 4 | **PRE-CRASH ACTIONS** 11
 1 - INTERSECTION - MARKED CROSSWALK | 2 - INTERSECTION - UNMARKED CROSSWALK | 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

INITIAL POINT OF CONTACT
 0 - NO DAMAGE | 1-12 - REFER TO UNIT DIAGRAM | 13 - TOP | 14 - UNDERCARRIAGE | 15 - VEHICLE NOT AT SCENE | 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES 01 | **SEQUENCE OF EVENTS** 120 | **NON-COLLISION**
 1 - NONE | 2 - FAILURE TO YIELD | 3 - RAN RED LIGHT | 4 - RAN STOP SIGN | 5 - UNSAFE SPEED | 6 - IMPROPERTURN | 7 - LEFT OF CENTER | 8 - FOLLOWING TOO CLOSE / ACDA | 9 - IMPROPER LANE CHANGE | 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 DISCERNIBLE | 23 - OPENING DOOR INTO ROADWAY | 99 - OTHER IMPROPER ACTION
 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 OBJECT

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

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 - WORK ZONE MAINTENANCE EQUIPMENT | 51 - WALL | 52 - BUILDING | 53 - TUNNEL | 54 - OTHER FIXED OBJECT | 99 - OTHER / UNKNOWN

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

FIRST HARMFUL EVENT 1 | **MOST HARMFUL EVENT** 1
 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 | 99 - UNKNOWN OR HIT/SKIP

UNIT / NON-MOTORIST DIRECTION
 FROM 3 TO 4
 1 - NORTH | 2 - SOUTH | 3 - EAST | 4 - WEST | 5 - NORTHEAST | 6 - NORTHWEST | 7 - SOUTHEAST | 8 - SOUTHWEST | 9 - OTHER / UNKNOWN

UNIT SPEED 000 | **POSTED SPEED** 35 | **DETECTED SPEED** 1
 1 - STATED / ESTIMATED SPEED | 2 - CALCULATED / EDR | 3 - UNDETERMINED



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
 2,0,2,2 - 0,0,0,0,6,6,8,3

UNIT # 0,1	NAME: LAST, FIRST, MIDDLE HOLMES, CRAIG, R			DATE OF BIRTH 05 / 20 / 1998		AGE 23	GENDER M		
ADDRESS: STREET, CITY, STATE, ZIP 1837 ASHTON LN 147, Franklin Twp, OH 44240				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 2	EJECTION 1	TRAPPED 1
OL STATE C,T	OPERATOR LICENSE NUMBER		OFFENSE CHARGED 333.03	LOCAL CODE <input checked="" type="checkbox"/>	OFFENSE DESCRIPTION Maximum Speed Limits		CITATION NUMBER 21107		
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	ALCOHOL TEST STATUS: 1, 1 TYPE: 1, 1 VALUE: ,		DRUG TEST(S) STATUS: 1, 1 TYPE: 1, 1 RESULT SELECT UP TO 4

UNIT # 0,2	NAME: LAST, FIRST, MIDDLE SUTHERIN, OLIVER, JAMES			DATE OF BIRTH 07 / 10 / 1993		AGE 28	GENDER M		
ADDRESS: STREET, CITY, STATE, ZIP 2216 ORCHARD CIR, Brimfield Twp, OH 44240				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, 1 TYPE: 1, 1 VALUE: ,		DRUG TEST(S) STATUS: 1, 1 TYPE: 1, 1 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	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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		CONDITION	ALCOHOL TEST		DRUG TEST(S)

INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	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	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN	1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OH10 = D) 5 - MC MOPED ONLY 6 - NO VALID OL	1 - ALCOHOL INTERLOCK DEVICE 2 - COL INTRASTATE ONLY 3 - CORRECTIVE LENSES 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A & CLASS B BUS 7 - EXCEPT TRACTOR-TRAILER 8 - INTERMEDIATE LICENSE RESTRICTIONS 9 - LEARNER'S PERMIT RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER	1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING) 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD COMMUNICATION DEVICE 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE 6 - PASSENGER 7 - OTHER DISTRACTION INSIDE THE VEHICLE 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE 9 - OTHER / UNKNOWN	1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN
INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN	EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE	TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS	OL ENDORSEMENT H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT	CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL 9 - OTHER / UNKNOWN	ALCOHOL TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER
SAFETY EQUIPMENT 1 - NONE USED 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 (ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN	TRAILING UNIT 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	GENDER F - FEMALE M - MALE U - OTHER / UNKNOWN	DRUG TEST RESULT(S) 1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS			



OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER
 2, 0, 2, 2 - 0, 0, 0, 0, 6, 6, 8, 3

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 []	TRAPPED []
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 []	TRAPPED []
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 []	TRAPPED []
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 []	TRAPPED []

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

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 []