

2 0 2 4 - 0 0 0 0 0 7 3 0

PHOTOS TAKEN
 SECONDARY CRASH

OH-2
 OH-1P
 PRIVATE PROPERTY

OH-3
 OTHER

LOCAL INFORMATION

REPORTING AGENCY NAME*
City of Kent Police

NCIC*
0 6 7 0 3

HIT/SKIP
1 - SOLVED
2 - UNSOLVED

NUMBER OF UNITS
0 1

UNIT IN ERROR
98 - ANIMAL
99 - UNKNOWN
0 1

COUNTY* **6 7** LOCALITY*
1 - CITY
2 - VILLAGE
3 - TOWNSHIP
1

LOCATION: CITY, VILLAGE, TOWNSHIP*
Kent

CRASH DATE / TIME*
01182024/1113

CRASH SEVERITY
1 - FATAL
2 - SERIOUS INJURY SUSPECTED
3 - MINOR INJURY SUSPECTED
4 - INJURY POSSIBLE
5 - PROPERTY DAMAGE ONLY
5

ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH
S - SOUTH
E - EAST
W - WEST

LOCATION ROAD NAME
HAROLD

ROAD TYPE
S T

LATITUDE DECIMAL DEGREES
41.161120

ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH
S - SOUTH
E - EAST
W - WEST

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)
CUYAHOGA

ROAD TYPE
S T

LONGITUDE DECIMAL DEGREES
-81.363468

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

DIRECTION FROM REFERENCE
N - NORTH
S - SOUTH
E - EAST
W - WEST
1

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
 WITHIN INTERSECTION OR ON APPROACH
 WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES

ROADWAY
 ROADWAY DIVIDED

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

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 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT
2 - REAR-END
3 - HEAD-ON
1

4 - REAR-TO-REAR
5 - BACKING
6 - ANGLE
7 - SIDESWIPE, SAME DIRECTION
8 - SIDESWIPE, OPPOSITE DIRECTION
9 - OTHER / UNKNOWN

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
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
4

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

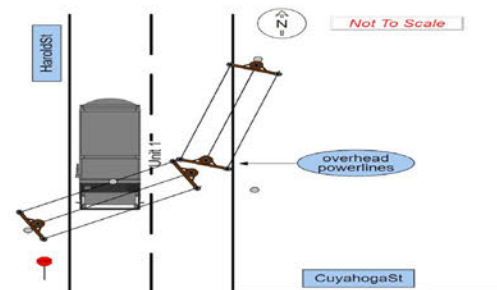
LIGHT CONDITION
1 - DAYLIGHT
2 - DAWN/DUSK
3 - DARK - LIGHTED ROADWAY
4 - DARK - ROADWAY NOT LIGHTED
5 - DARK - UNKNOWN ROADWAY LIGHTING
9 - OTHER / UNKNOWN
1

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 2

NARRATIVE

Unit 1 was parked on the west side of Harold St. facing south. It was roughly 40 ft. north of Cuyahoga St. Unit 1 driver checked the clearance before lifting the dumpster to empty its contents into the rear compactor. The dumpster went up fine and the contents emptied. Unit 1 began lowering the dumpster and it caught all the power lines spanning diagonal across the road. It pulled the wires down, snapping one pole in half on the east side of the road. The pole and wires landed on top of the truck damaging it. Unit driver admitted fault.

Indicate the north direction with an "N" on the compass diagram.



CRASH REPORTED DATE / TIME
0 1 1 8 2 0 2 4 / 1 1 1 3

DISPATCH DATE / TIME
0 1 1 8 2 0 2 4 / 1 1 1 3

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

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

REPORT TAKEN BY
 POLICE AGENCY
 MOTORIST

TOTAL TIME ROADWAY CLOSED
0 5 2

OTHER INVESTIGATION TIME
0 2 0

TOTAL MINUTES
0 7 2

OFFICER'S NAME*
Hilbruner, Neal

CHECKED BY OFFICER'S NAME*
Ennemoser, James

SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO DOPS)

0 5 2

0 2 0

0 7 2

OFFICER'S BADGE NUMBER*
2 3 7

CHECKED BY OFFICER'S BADGE NUMBER*
2 5 5

UNIT # 01 **OWNER NAME:** LAST, FIRST, MIDDLE (SAME AS DRIVER) **REPUBLIC SERVICES**
OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) **1339 MAIN ST, Cuyahoga Falls, OH 44221**
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP **REPUBLIC SERVICES** **COMMERCIAL CARRIER PHONE:** INCLUDE AREA CODE **8002473644**

LP STATE OH **LICENSE PLATE #** PJX9469 **VEHICLE IDENTIFICATION #** 1M2AU02C6EM008812 **VEHICLE YEAR** 2014 **VEHICLE MAKE** Mack Trucks, Inc.
INSURANCE VERIFIED **INSURANCE COMPANY** WILLIS TOWERS WATSON **INSURANCE POLICY #** 735786 **COLOR** BLU **VEHICLE MODEL** LEU

COMMERCIAL **GOVERNMENT** **IN EMERGENCY RESPONSE** **US DOT #** 844665 **TOWED BY:** COMPANY NAME
 INTERLOCK DEVICE EQUIPPED **HIT/SKIP UNIT** **#OCCUPANTS** 01 **HAZARDOUS MATERIAL**
VEHICLE WEIGHT GVWR/GCWR 3 **1 - <10K LBS.** **MATERIAL RELEASED** **CLASS #** **PLACARD ID #**
2 - 10,001 - 26K LBS. **PLACARD**
3 - >26K LBS.

UNIT TYPE 20 **# 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? 2 **1 - YES** **2 - NO** **9 - OTHER / UNKNOWN** **AUTONOMOUS MODE LEVEL** 0
0 - NO AUTOMATION **3 - CONDITIONAL AUTOMATION** **9 - UNKNOWN**
1 - DRIVER ASSISTANCE **4 - HIGH AUTOMATION**
2 - PARTIAL AUTOMATION **5 - FULL AUTOMATION**

SPECIAL FUNCTION 14
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 14
1 - NO CARGO BODY TYPE / NOT APPLICABLE **3 - VEHICLE TOWING ANOTHER MOTORVEHICLE** **5 - INTERMODAL CONTAINER CHASSIS** **8 - POLE** **12 - CONCRETE MIXER**
2 - BUS **4 - LOGGING** **6 - CARGO VAN/ENCLOSED BOX** **9 - CARGO TANK** **13 - AUTOTRANSPORTER**
7 - GRAIN/CHIPS/GRAVEL **11 - DUMP** **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 - MIDBLOCK - MARKED CROSSWALK** **7 - SHOULDER / ROADSIDE** **10 - DRIVEWAY ACCESS**
5 - TRAVEL LANE - OTHER LOCATION **8 - SIDEWALK** **11 - SHARED USE PATHS OR TRAILS** **99 - OTHER / UNKNOWN**

ACTION 3 **PRE-CRASH ACTIONS** 10
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**

CONTRIBUTING CIRCUMSTANCES 99
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**

SEQUENCE OF EVENTS
1 1 3 **NON-COLLISION**
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**

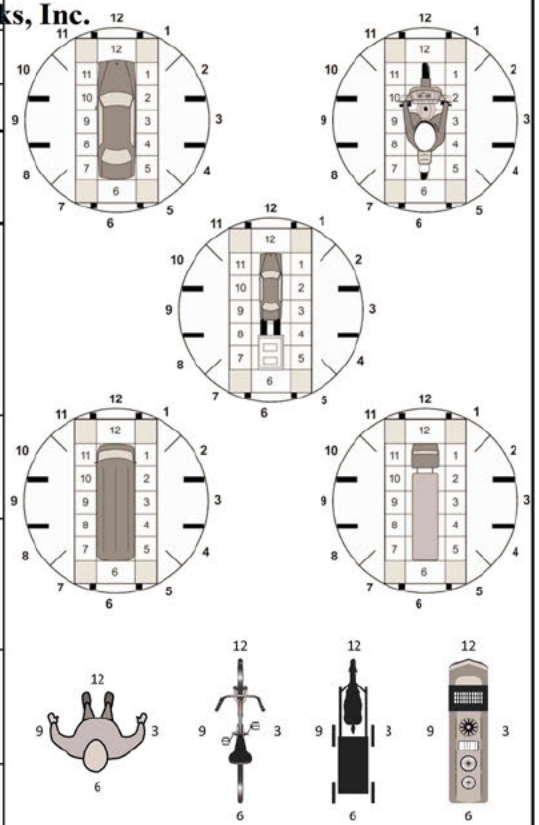
COLLISION WITH FIXED OBJECT - STRUCK
25 - IMPACT ATTENUATOR / CRASH CUSHION **31 - GUARDRAIL END** **37 - TRAFFIC SIGN POST** **43 - CURB** **50 - WORK ZONE MAINTENANCE EQUIPMENT**
26 - BRIDGE OVERHEAD STRUCTURE **32 - PORTABLE BARRIER** **38 - OVERHEAD SIGN POST** **44 - DITCH** **51 - WALL**
27 - BRIDGE 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

LOCAL REPORT NUMBER
 2024 - 00000730

DAMAGE
DAMAGE SCALE
 3 **1 - NONE** **3 - FUNCTIONAL DAMAGE**
2 - MINOR 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 3 **0 - NO DAMAGE** **14 - UNDERCARRIAGE**
1 - 12 - REFER TO UNIT DIAGRAM **15 - VEHICLE NOT AT SCENE**
13 - TOP **99 - UNKNOWN**

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

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

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 000 **DETECTED SPEED** 1
POSTED SPEED 25
1 - STATED / ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED

MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
2 0 2 4 - 0 0 0 0 0 7 3 0

UNIT # 0 1	NAME: LAST, FIRST, MIDDLE YOUNG, JAMIESON, NICHOLAS		DATE OF BIRTH 1 2 2 5 1 9 8 5		AGE 3 8	GENDER M				
ADDRESS: STREET, CITY, STATE, ZIP 1162 CAIRO PL, Akron, OH 44306				CONTACT PHONE - INCLUDE AREA CODE Redacted per ORC 149.43(A)(1)						
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 1	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1	
OL STATE OH	OPERATOR LICENSE NUMBER REDACTED PER ORC 4501:1-12		OFFENSE CHARGED 4511.202	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION Failure to Control		CITATION NUMBER 26577			
OL CLASS 1	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)	

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 <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		DRUG TEST(S)	

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 <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		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 (OHID - D) 5 - MC MOPED ONLY 6 - NO VALID OL	1 - ALCOHOL INTERLOCK DEVICE 2 - CDL 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	EJECTION		OL ENDORSEMENT		ALCOHOL TEST TYPE	
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		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		1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	
SAFETY EQUIPMENT	TRAPPED		GENDER		DRUG TEST TYPE	
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	1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS		F - FEMALE M - MALE U - OTHER / UNKNOWN		1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	
				CONDITION		DRUG TEST RESULT(S)
				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		1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS



LOCAL REPORT NUMBER 24-730	REPORTING AGENCY Kent PD	DATE OF CRASH M 1 D 18 Y 24
IN COUNTY OF Portage	CRASH LOCATION Harold St at Cuyahoga St. Kent, OH 44240	

During this incident, the power lines were ripped off the side of 561 Cuyahoga St. The following day, Jan. 19th I made contact with this home owner. His name is Bruce E. Bailey. Phone # Redacted per ORC 149.43(A)(1). His son was there too - Josh. Josh's phone # is Redacted per ORC 149.43(A)(1). Bruce advised due to no power in the home, everything froze inside causing unknown damage. The electricians were also currently on scene fixing the exterior electrical meter. At the time of the crash, Bruce nor Josh were home. They were given the report number.

I did not get a pole # on the old pole that was broke due to heavy damage and scene safety. The new pole was already installed. Its number is - SJL B7-23 SPPA3BA 5-40.

While I was investigating the crash, the driver of the trash truck voluntarily admitted fault. He stated it is possible he misjudged the distance and clearance. No injuries reported. City service workers had the road closed for several hours while OE fixed the problem.

OFFICER'S SIGNATURE X [Signature]	BADGE NUMBER 237
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LOCAL REPORT NUMBER 24-730	REPORTING AGENCY Kent PD	DATE OF CRASH M 1 D 18 Y 24
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FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, **Jamieson Young** PRINTED HEREBY MAKE THIS VOLUNTARY STATEMENT TO
Hilbruner 237 OFFICER'S NAME AT **Cuyahoga @ Harold** LOCATION

X At the intersection of Harold Dr & Cuyahoga Sq. I stopped to dump my bucket. As I brought the bucket down I caught the phone line. As a result It broke the phone pole.

ADDRESS OF WITNESS 11627 Casro Pl. Akron OH 44300	PHONE _____
SIGNATURE OF WITNESS X <i>[Signature]</i>	OFFICER'S SIGNATURE X Hilbruner 237