

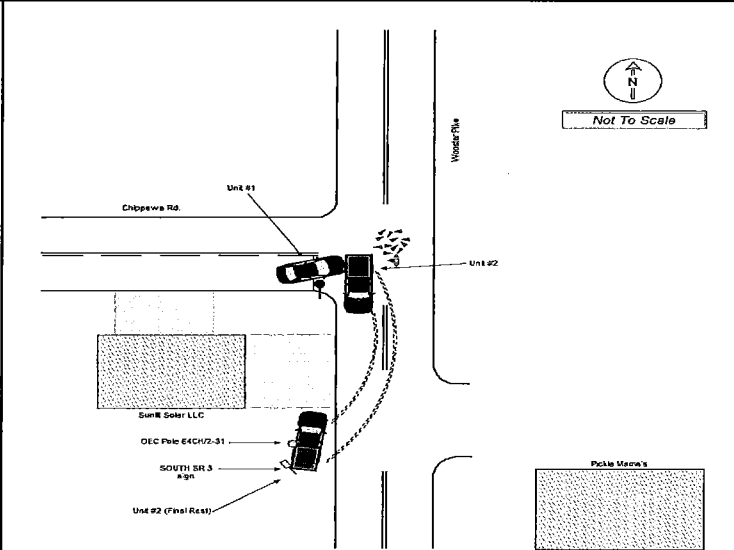
TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

21-19448

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input checked="" 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 WOOSTER PIKE/CHIPPEW		REPORTING AGENCY NAME * Montville Police Department		NCIC * 05213		HIT/SKIP 1 - SOLVED 2 - UNSOLVED		NUMBER OF UNITS 2		UNIT IN ERROR 1 98 - ANIMAL 1 99 - UNKNOWN																																					
COUNTY* 52		LOCALITY* 3		LOCATION: CITY, VILLAGE, TOWNSHIP* Montville (Township of)		CRASH DATE / TIME* 04/03/2021 13:57		CRASH SEVERITY 3		1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY																																							
ROUTE TYPE SR		ROUTE NUMBER 3		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		LOCATION ROAD NAME Chippewa Rd.		ROAD TYPE RD		LATITUDE DECIMAL DEGREES 41.076537		LONGITUDE DECIMAL DEGREES -81.864315																																					
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #		DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - 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 HW - HIGHWAY RD - ROAD AV - AVENUE LA - LANE SQ - SQUARE BL - BOULEVARD MP - MILEPOST ST - STREET CR - CIRCLE OV - OVAL TE - TERRACE CT - COURT PK - PARKWAY TL - TRAIL DR - DRIVE PI - PIKE WA - WAY HE - HEIGHTS PL - PLACE		INTERSECTION RELATED <input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA		NUMBER OF APPROACHES 3		ROADWAY <input type="checkbox"/> ROADWAY DIVIDED																																					
DISTANCE FROM REFERENCE 1		DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS		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		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, DEPRESSED MEDIAN (ANY TYPE) 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER / UNKNOWN																																									
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 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		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																																					
LIGHT CONDITION 1 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN		WEATHER 1 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		NARRATIVE Unit #1 was stopped at the stop sign on Chippewa Rd. at S.R. 3 (Wooster Pike). Unit #2 was southbound on S.R. 3 (Wooster Pike) when Unit #1 began to pull out and struck Unit #2 at or about the passenger rear tire. Unit #2 was sent into a spin, turned approximately 180 degrees, struck a SR 3 SOUTH sign and came to final rest against an Ohio Edison utility pole (64ch/2-31) near the lot of Sunlit Solar LLC. Unit #1 rolled into the middle of the intersection of S.R. 3 (Wooster Pike) and Chippewa Rd. and was disabled there. The front airbag of Unit #1 deployed, causing suspected minor injury to the juvenile driver. Medina LST was requested by the girl's mother, but a refusal of transport was signed once on scene. No other injuries were claimed at the scene. The driver of Unit #2 requested Lloyd's AAA and Lloyd's also recovered Unit #1 in rotation. The juvenile driver of Unit #1 was cited for ORC 4511.42A, right of way rule when turning left, and was referred for the Juvenile Diversion program in Medina County.																																													
CRASH REPORTED DATE / TIME 04/03/2021 13:57										DISPATCH DATE / TIME 04/03/2021 13:57										ARRIVAL DATE / TIME 04/03/2021 14:04										SCENE CLEARED DATE / TIME 04/03/2021 15:38										REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST									
TOTAL TIME ROADWAY CLOSED 50		OTHER INVESTIGATION TIME		TOTAL MINUTES 101		OFFICER'S NAME* Hazek, Daniel		OFFICER'S BADGE NUMBER* 1607		CHECKED BY OFFICER'S NAME* LaFond, Christopher		CHECKED BY OFFICER'S BADGE NUMBER* 1602		<input checked="" type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPs)																																			



OWNER

UNIT # **1** OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
TRAVIS, JASON, M.

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
5615 SHAWNEE TRAIL DR., CHIPPEWA LAKE, OH, 44215

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

VEHICLE

LP STATE **OH** LICENSE PLATE # **FCJ6507** VEHICLE IDENTIFICATION # **1HGCR3F83HA022891** VEHICLE YEAR **2017** VEHICLE MAKE **HONDA**

INSURANCE VERIFIED INSURANCE COMPANY **PROGRESSIVE** INSURANCE POLICY # **907729638** COLOR **BLK** VEHICLE MODEL **ACCORD**

TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

US DOT # _____ TOWED BY: COMPANY NAME **LOYD'S TOWING**

HAZARDOUS MATERIAL: MATERIAL CLASS # _____ RELEASED PLACARD PLACARD ID # _____

UNIT TYPE: **1** (Passenger Car)

of TRAILING UNITS: _____

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? **0**

AUTONOMOUS MODE LEVEL: **0** (No Automation)

SPECIAL FUNCTION: **1** (None)

CARGO BODY TYPE: **1** (No Cargo Body Type / Not Applicable)

VEHICLE DEFECTS: _____

NON-MOTORIST LOCATION: _____

ACTION: **3** (Striking)

PRE-CRASH ACTIONS: **6** (Overtaking/Passing)

CONTRIBUTING CIRCUMSTANCES: **2** (Following Too Close)

SEQUENCE OF EVENTS: **1** (Overtake/Rollover)

EVENTS: **1** (Overtake/Rollover)

VEHICLE IDENTIFICATION # **1HGCR3F83HA022891**

VEHICLE YEAR **2017** VEHICLE MAKE **HONDA**

HAZARDOUS MATERIAL: MATERIAL CLASS # _____ RELEASED PLACARD PLACARD ID # _____

VEHICLE WEIGHT GVWR/GCWR: **1 - ≤10K LBS.** **2 - 10,001 - 26K LBS.** **3 - > 26K LBS.**

HAZARDOUS MATERIAL CLASS # _____ PLACARD ID # _____

VEHICLE IDENTIFICATION # **1HGCR3F83HA022891**

VEHICLE YEAR **2017** VEHICLE MAKE **HONDA**

HAZARDOUS MATERIAL: MATERIAL CLASS # _____ RELEASED PLACARD PLACARD ID # _____

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VEHICLE IDENTIFICATION # **1HGCR3F83HA022891**

VEHICLE YEAR **2017** VEHICLE MAKE **HONDA**

HAZARDOUS MATERIAL: MATERIAL CLASS # _____ RELEASED PLACARD PLACARD ID # _____

VEHICLE WEIGHT GVWR/GCWR: **1 - ≤10K LBS.** **2 - 10,001 - 26K LBS.** **3 - > 26K LBS.**

HAZARDOUS MATERIAL CLASS # _____ PLACARD ID # _____

VEHICLE IDENTIFICATION # **1HGCR3F83HA022891**

VEHICLE YEAR **2017** VEHICLE MAKE **HONDA**

HAZARDOUS MATERIAL: MATERIAL CLASS # _____ RELEASED PLACARD PLACARD ID # _____

VEHICLE WEIGHT GVWR/GCWR: **1 - ≤10K LBS.** **2 - 10,001 - 26K LBS.** **3 - > 26K LBS.**

HAZARDOUS MATERIAL CLASS # _____ PLACARD ID # _____

LOCAL REPORT NUMBER
21-19448

DAMAGE
 DAMAGE SCALE
4 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 0 - NO DAMAGE 14 - UNDERCARRIAGE
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
 13 - TOP 99 - UNKNOWN

TRAFFICWAY FLOW: **2** (Two-Way)

TRAFFIC CONTROL: **4** (Signal)

OF THROUGH LANES ON ROAD: **2**

RAIL GRADE CROSSING: **3** (Involved-Passive Crossing)

UNIT / NON-MOTORIST DIRECTION
 FROM **4** TO **1**

UNIT SPEED: **2**

POSTED SPEED: **55**

DETECTED SPEED: **1** (Stated / Estimated Speed)

OWNER

UNIT # 2 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
 GOODYEAR, DAVID, K.

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
 691 PEARL RD., BRUNSWICK, OH, 44212

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

DAMAGE

DAMAGE SCALE

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

4

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY

VEHICLE

LP STATE OH LICENSE PLATE # HAX9838 VEHICLE IDENTIFICATION # 1FT8W3BT3HEC39650 VEHICLE YEAR 2017 VEHICLE MAKE FORD

INSURANCE VERIFIED INSURANCE COMPANY NATIONWIDE INSURANCE POLICY # FRKN BAN 66-7-6335244 COLOR RED VEHICLE MODEL F-350

TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

US DOT # _____ TOWED BY: COMPANY NAME LOYD'S TOWING

HAZARDOUS MATERIAL CLASS # _____ PLACARD ID # _____

VEHICLE WEIGHT GVWR/GCWR: 1 - ≤10K LBS., 2 - 10.001 - 26K LBS., 3 - > 26K LBS.

HAZARDOUS MATERIAL CLASS # _____ PLACARD ID # _____

UNIT TYPE: 4

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

OF TRAILING UNITS _____

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN

SPECIAL FUNCTION: 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 EQUIP.

16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL

21 - MAIL CARRIER 99 - OTHER / UNKNOWN

CARGO BODY TYPE: 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: _____

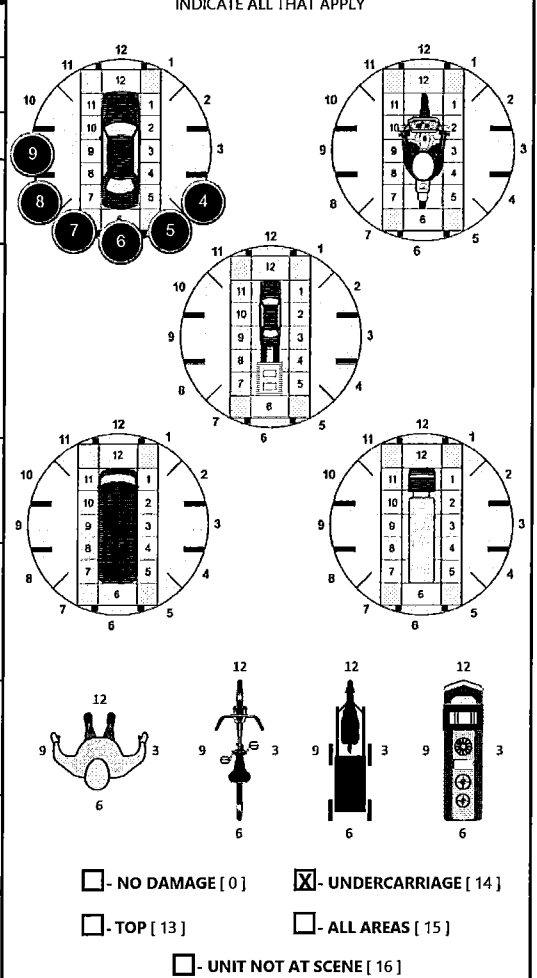
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS

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



EVENTS

NON-MOTORIST LOCATION: _____

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 12 - FIRST RESPONDER AT INCIDENT SCENE

10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 14 - INTERSECTION - OTHER

99 - OTHER / UNKNOWN

ACTION: 4

1 - NON-COLLISION 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: 1

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 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

INITIAL POINT OF CONTACT

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

5

SEQUENCE OF EVENTS

1 20 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

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

TRAFFICWAY FLOW: 2 (ONE-WAY), 2 (TWO-WAY)

TRAFFIC CONTROL: 3 (ROUNDABOUT), 3 (SIGNAL), 3 (FLASHER), 3 (STOP SIGN), 3 (YIELD SIGN), 3 (NO CONTROL)

OF THROUGH LANES ON ROAD: 2

RAIL GRADE CROSSING: 3 (NOT INVOLVED), 3 (INVOLVED-ACTIVE CROSSING), 3 (INVOLVED-PASSIVE CROSSING)

UNIT / NON-MOTORIST DIRECTION: FROM 1 TO 2

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

UNIT SPEED: 50

DETECTED SPEED: 1 (STATED / ESTIMATED SPEED)

POSTED SPEED: 55

FIRST HARMFUL EVENT: 1 **MOST HARMFUL EVENT**: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (ONE-WAY), 2 (TWO-WAY)

TRAFFIC CONTROL: 3 (ROUNDABOUT), 3 (SIGNAL), 3 (FLASHER), 3 (STOP SIGN), 3 (YIELD SIGN), 3 (NO CONTROL)

OF THROUGH LANES ON ROAD: 2

RAIL GRADE CROSSING: 3 (NOT INVOLVED), 3 (INVOLVED-ACTIVE CROSSING), 3 (INVOLVED-PASSIVE CROSSING)

UNIT / NON-MOTORIST DIRECTION: FROM 1 TO 2

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

UNIT SPEED: 50

DETECTED SPEED: 1 (STATED / ESTIMATED SPEED)

POSTED SPEED: 55

FIRST HARMFUL EVENT: 1 **MOST HARMFUL EVENT**: 1



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER

21-19448

UNIT # 1	NAME: LAST, FIRST, MIDDLE TRAVIS, ALEXA, J.					DATE OF BIRTH 02/15/2004		AGE 17	GENDER F				
ADDRESS: STREET, CITY, STATE, ZIP 3694 MUIR TAP DR., MEDINA, OH, 44256					CONTACT PHONE - INCLUDE AREA CODE [REDACTED]								
INJURIES 3	INJURED TAKEN BY [1]	EMS AGENCY (NAME) MEDINA LST		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 4	<input type="checkbox"/> DOT-COMPLIANT <input checked="" type="checkbox"/> MC HELMET	SEATING POSITION 1	AIR BAG USAGE 2	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER [REDACTED]		OFFENSE CHARGED 4511.42		LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION RIGHT OF WAY WHEN TURNING LEFT			CITATION NUMBER Y41601				
OL CLASS 4	ENDORSEMENT	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 1	TYPE 1	VALUE .	STATUS 1	TYPE 1	RESULTS SELECT UP TO 4

UNIT # 2	NAME: LAST, FIRST, MIDDLE GOODYEAR, LENA, S.					DATE OF BIRTH 02/24/1951		AGE 70	GENDER F				
ADDRESS: STREET, CITY, STATE, ZIP 691 PEARL RD., BRUNSWICK, OH, 44212					CONTACT PHONE - INCLUDE AREA CODE [REDACTED]								
INJURIES 5	INJURED TAKEN BY [1]	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 4	<input type="checkbox"/> DOT-COMPLIANT <input checked="" type="checkbox"/> MC HELMET	SEATING POSITION 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER [REDACTED]		OFFENSE CHARGED		LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION			CITATION NUMBER				
OL CLASS 4	ENDORSEMENT	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 1	TYPE 1	VALUE .	STATUS 1	TYPE 1	RESULTS 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 <input type="checkbox"/> 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	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)		
								STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS 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
	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A	6 - PASSENGER	
	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE	
	8 - THIRD - MIDDLE	EJECTION		8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	
	9 - THIRD - RIGHT SIDE	1 - NOT EJECTED		9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	
	10 - SLEEPER SECTION OF TRUCK CAB	2 - PARTIALLY EJECTED	OL ENDORSEMENT	10 - LIMITED TO DAYLIGHT ONLY		ALCOHOL TEST TYPE
INJURIES TAKEN BY	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	3 - TOTALLY EJECTED	H - HAZMAT	11 - LIMITED TO EMPLOYMENT		1 - NONE
1 - NOT TRANSPORTED / TREATED AT SCENE	12 - PASSENGER IN UNENCLOSED CARGO AREA	4 - NOT APPLICABLE	M - MOTORCYCLE	12 - LIMITED - OTHER		2 - BLOOD
2 - EMS	13 - TRAILING UNIT	TRAPPED	P - PASSENGER	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		3 - URINE
3 - POLICE	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	1 - NOT TRAPPED	N - TANKER	14 - MILITARY VEHICLES ONLY		4 - BREATH
9 - OTHER / UNKNOWN	15 - NON-MOTORIST	2 - EXTRICATED BY MECHANICAL MEANS	Q - MOTOR SCOOTER	15 - MOTOR VEHICLES WITHOUT AIR BRAKES		5 - OTHER
	99 - OTHER / UNKNOWN	3 - FREED BY NON-MECHANICAL MEANS	R - THREE-WHEEL MOTORCYCLE	16 - OUTSIDE MIRROR	CONDITION	DRUG TEST TYPE
SAFETY EQUIPMENT			S - SCHOOL BUS	17 - PROSTHETIC AID	1 - APPARENTLY NORMAL	1 - NONE
1 - NONE USED			T - DOUBLE & TRIPLE TRAILERS	18 - OTHER	2 - PHYSICAL IMPAIRMENT	2 - BLOOD
2 - SHOULDER BELT ONLY USED			X - TANKER / HAZMAT		3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	3 - URINE
3 - LAP BELT ONLY USED					4 - ILLNESS	4 - OTHER
4 - SHOULDER & LAP BELT USED					5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING					6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	
6 - CHILD RESTRAINT SYSTEM - REAR FACING					9 - OTHER / UNKNOWN	
7 - BOOSTER SEAT						DRUG TEST RESULT(S)
8 - HELMET USED						1 - AMPHETAMINES
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)						2 - BARBITURATES
10 - REFLECTIVE CLOTHING						3 - BENZODIAZEPINES
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						4 - CANNABINOIDS
99 - OTHER / UNKNOWN						5 - COCAINE
						6 - OPIATES / OPIOIDS
						7 - OTHER
						8 - NEGATIVE RESULTS



OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER

21-19448

UNIT #		NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER	
2		GOODYEAR, DAKOTA, L.				02/18/2001		20	M	
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE				
1056 MINDY LANE, #34, WOOSTER, OH, 44691						[REDACTED]				
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5	1			4		<input type="checkbox"/>	3	1	1	1

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		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
						<input type="checkbox"/>				

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		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
						<input type="checkbox"/>				

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		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
						<input type="checkbox"/>				

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
INJURED TAKEN BY	6 - CHILD RESTRAINT SYSTEM - REAR FACING	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - BOOSTER SEAT	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION
2 - EMS	8 - HELMET USED	8 - THIRD - MIDDLE	1 - NOT EJECTED
3 - POLICE	9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED
9 - OTHER / UNKNOWN	10 - REFLECTIVE CLOTHING	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED
GENDER	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE
F - FEMALE	99 - OTHER / UNKNOWN	12 - PASSENGER IN UNENCLOSED CARGO AREA	TRAPPED
M - MALE		13 - TRAILING UNIT	1 - NOT TRAPPED
U - OTHER / UNKNOWN		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2 - EXTRICATED BY MECHANICAL MEANS
		15 - NON-MOTORIST	3 - FREED BY NON-MECHANICAL MEANS
		99 - OTHER / UNKNOWN	

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