UNIO UNBATTIVATI TRAFFIC CRASH REPORT DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER * 21-38963					
X PHOTOS TAKEN	PHOTOS TAKEN OH -2 OH -3 LOCAL INFORMATION 3183 SHARON COPLEY								HIT/SKIP NUMBER OF UNITS UNIT IN ERROR				
SECONDARY CRASH	SECONDARY CRASH OH-1P OTHER REPORTING AGENCY NAME * NCIC*							1 - SOLVED 1 1 98 - A					
	PRIVATE PROPE	RTY IVIONIVI	lle Police Department			03213	CRASH DATE /	TIME*	CRASH SEVERITY				
COUNTY* LOCALITY									5 1 - FATAL 2 - SERIOUS INJURY				
32 3 - TOWNSHIP TWO TRUE (TOWNSHIP CO.)								07/14/2021 15:02 3					
ROUTE TYPE ROUTE I	2 - 1	SOUTH	41.10621	3 - MINOR INJURY SUSPECTED									
	DOAD T								4 - INJURY POSSIBLE				
ROUTE TYPE ROUTE I	2 - :	SOUTH	NCE ROAD NAME (ROAD, M	ROAD TYPE	LONGITUDE DECI -81.8028	- 1	5 - PROPERTY DAMAGE						
REFER	3 · EAST 4 · WEST 3183								ONLY				
REFERENCE POINT	R	RD - ROAD	l	INTERSECTION OR ON									
1 - INTERSECTION	1 - NORTI	i Habi Nef o	ATEROOFE IN AV	AVENUE L	LA - L'ANE SQ - SQUARE				<u> </u>				
3 - HOUSE #	3 - EAST 4 - WEST	SR - STATE			MP - MILEPOST DV - OVAL	ST - STREET TE - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES						
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE		RED COUNTY ROUTE CT -	COURT P	K - PARKWAY	TL - TRAIL		RO <u>AD</u>	WAY				
25.00	1 - MILES		DR -	327 F. Digitish	I - PIKE L - Place	WA - WAY	ROADWAY DI	VIDED					
25.00	3 - YARD				COLUCION (IV	IDACT	DIRECTION OF TRAVE	:L	MEDIAN TYPE				
LOCATI 1 - ON ROAD	I ON of FIRST HARMF WAY 9 - CRC	UL EVENT SSOVER	1 - NOT	NER OF CRASH COLLISION 4 - I			1 - NORTH		DIVIDED FLUSH MEDIAN				
2 2 - ON SHOU		IVEWAY/ALLEY A ILWAY GRADE CF	L	MOTOR	BACKING		2 - SOUTH 3 - EAST	1	<4 FEET) DIVIDED FLUSH MEDIAN				
3 - IN MEDIA! 4 - ON ROAD:		ARED USE PATHS	OR VEHIC	CLES IN 6-7	ANGLE SIDESWIPE, SAN	1E DIRECTION	4 - WEST	(≥4 FEET)				
5 - ON GORE	TR. RAFFIC WAY 13 - BIK	AILS 'E I ANE	2 - REAR	Ω	SID ESWI PE, OPP	OSITE DIRECTION			VIDED, DEPRESSED MEDIAN VIDED, RAISED MEDIAN				
7 - ON RAMP		LL BOOTH	3 - HEAD	O-ON 9 - (OTHER / UNKN	OWN			ANY TYPE) OTHER / UNKNOWN				
8 - OFF RAMP	99 - OT	HER / UNKNOWI	\				- CONTOUR T	CONDITI					
WORK ZONE RELAT	TED D3:		RK ZONE TYPE		I OF CRASH IN BEFORE THE 1ST		CONTOUR 4	1 1	1 2				
WORKERS PRESENT	г	1 - LANE (LLOSURE SHIFT/ CROSSOVER	1 1 1	VARNING SIGN		1 - STRAIGHT 1 - DRY 1 - CONC						
LAW ENFORCEMEN	T PRESENT	3 - WORK	ON SHOULDER		ADVANCE WAR			2 - WET	2 - BLACKTOP,				
		OR ME	DIAN MITTENT OR MOVING WORK		ACTIVITY AREA		2 - STRAIGHT GRADE	BITUMINOUS, ASPHALT					
ACTIVE SCHOOL ZO	ONE	5 - OTHER		5 - T	ERMINATION A	AREA		4 - ICE 5 - SAND, MUI					
LIGH	T CONDITION			WEATHER			4 - CURVE GRADE	OIL, GRAV	CTONE				
1 - DAYLIGHT			1 - CLEAR	6 - SNOW			VUNKNOWN	MOVING)	5 - DIRT				
1 2-DAWN/DU	JSK GHTED ROADWAY		1 2 - CLOUDY 3 - FOG, SMOG, SMOKE	DSSWINDS SAND SOIL DIE	T SNOW		7 - SLUSH 9 - OTHER / U	9 - OTHER UNKNOWN / UNKNOWN					
	OADWAY NOT LIGHTE	D	4 - RAIN	RAIN OR FREEZI		3 3111211, 3							
1	NKNOWN ROADWAY	LIGHTING	5 - SLEET, HAIL	99 - OTHER / L	INKNOWN		1						
9 - OTHER / L	JNKNOWN						<u></u>	<u> </u>					
NARRATIVE	it 1 was traveling e	ast on Sharor	Copley Rd. (S.R. 162). A	s it was					(A)				
approaching a hill	with a curve, near	3183 Sharon	Copley Rd., the driver lo	oked			3183 Sharon	Copley					
down at her GPS a	and while doing so	, drove off the	e right side of the road. U ve partially off the road f	Jnit 1									
struck a road sign	with its passenger I feet before stopp	ing. The drive	r of Unit 1 was uninjured	d and the									
vehicle was towed	by Heidi's Towing	. The driver w	as cited for reasonable o	control.			1	The second second					
							//	· _					
						S.R. 162 (Sharo	won Copley Rd.)						
			•										
							Unit 1						
							d						
	•						Road Sign		ş <u> </u>				
									Not To Scale				
CRASH REPORTE	D DATE / TIME	DISPA	ISPATCH DATE / TIME ARRIVAL DATE / TIME			IME	SCENE CLEARED I	REPORT TAKEN BY					
07/14/20	21 15:02	07/	14/2021 15:04	07/	14/2021 15		07/14/202	1 15:36	POLICE AGENCY MOTORIST				
TOTAL TIME	OTHER					CHECKED BY OFFICE	. /.7/						
ROADWAY CLOSED IN	NVESTIGATION TIME	MINUTES	Harrison, Brett	DGE MUMPER*		LaFond, Christe	opher MANUEL BY OFFICER BADGE I	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO					
		32		DGE NUMBER*		CHECKED	1602	ODPS)					
	32 1606								1002				



LOCAL REPORT NUMBER

45

or Pu	BLIC BAFETY UNIT							21-38963				
UNIT#	OWNER NAME: LAST, FIRST,	MIDDLE (□SAME AS DRIVER)		OWNER	PHONE:INCLUDE AR	EA CODE (SAME AS DRIVER)	· · · · · · · · · · · · · · · · · · ·	DAMAGE				
	CASIDA, AMY, SUZAI						1 - NONE	3 - FUNCTIONAL DAMAGE				
4	DORESS: STREET, CITY, STATE, 7 POINT DR. U64, MED											
	IAL CARRIER: NAME, ADDRES			COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			9 - UNKNOWN					
							DAMAGED AREA(S)					
LP STATE	LICENSE PLATE #	VEHICLE	IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	INDIC.	ATE ALL THAT APPLY				
	HYA5824 INSURANCE COMPA		MV5DT214318 SURANCE POLICY #		2013	NISSAN	11 12	11 12 1				
X INSURAL VERIFIED	METROPOLITAN	GROUP PROPE 538			GRY	JUKE	10 11 1 2	10 12 1 2				
	TYPE OF USE		US DOT #	1	ED BY: COMPANY N	AME	10 2	10 2				
СОММЕР	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	SPONSE VEHICLE WEIGHT GVWR/GCWR			S MATERIAL	9 3 3					
INTERLO	HIT/SKIP UNIT	# OCCUPANTS	1 - ≤10K LBS.		IATERIAL CLAS ELEASED		7 5 4	8 7 5 4				
EQUIPPE			2 - 10.001 - 26K LBS. 3 - > 26K LBS.		LACARD [7 5 5	12 7 5				
_		(,				PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE)	10	12				
3_	(MINIVAN) 8 - M	OTORCYCLE 3-WHEELED 1	4 CINICIE LINUT	OTHER VEH	HICLE 25 -	OTHER NON-MOTORIST	<u>-</u>	10 2				
UNIT TYPE	VEHICLE 10 - N	NOI ED ON MOTORIZED	5 - SEMI-TRACTOR	HEAVY EQU		BICYCLE TRAIN	9 (9 3 3				
	- TIER OI					UNKNOWN OR HIT/SKIP	$\sum_{\mathbf{s}}$	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
1 0 I		/UTV)					12	5 12				
	WAS VEHICLE OPERATING IN A	UTONOMOUS	0 - NO AUTOMATION 3	- CONDITI	ONAL AUTOMATION	9 - UNKNOWN	11 12	6 11 12				
	MODE WHEN CRASH OCCURRE	D? •			TOMATION	J Dimiteriii	10 1 2	10 11 2				
2	1 - YES 2 - NO 9 - OTHER/		2 - PARTIAL AUTOMATION 5	- FULL AU	TOMATION		9 9 3	9 9 3 3				
	1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16 - F#	ARM	21 - MAIL CARRIER		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
. 1 .	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY 13 - POLICE		OWING NOW REMOVAL	99 - OTHER / UNKNOWN	8 6 3 4	8				
SPECIAL	3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE 9 - BUS - OTHER	14 - PUBLIC UTILITY	19 - TC			7 6 5	6				
FUNCTION	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIP		AFETY SERVICE ATROL			12 12 12				
4	1 - NO CARGO BODY TYPE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - DI	UMP	99 - OTHER / UNKNOWN	12					
CARGO	/ NOT APPLICABLE 2 - BUS	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE 9 - CARGO TANK		ONCRETE MIXER UTO TRANSPORTER		R. R.	3 9 3 3				
BODY	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	6 - CARGOVAN /ENCLOSED BOX	10 - FLAT BED		ARBAGE/REFUSE							
ТҮРЕ	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MC	TOR TROUBLE	99 - OTHER / UNKNOWN	6					
VEHICLE	2 - HEAD LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE		SABLED FROM PRIOR			6 6 6				
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE.				☐- NO DAMAGE	[0] UNDERCARRIAGE [14]				
	1 - INTERSECTION -	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER/ROADSIDE		RIVEWAY ACCESS	99 - OTHER / UNKNOWN	□-TOP [13]	_ ALL AREAS [15]				
NON-	MARKED CROSSWALK 2 - INTERSECTION -	5 - TRAVEL LANE -	8 - Sidewalk 9 - Median/Crossing	OF	R TRAILS RST RESPONDER			INIT NOT AT SCENE [16]				
MOTORIST LOCATION	3 - INTERSECTION - OTHER	OTHER LOCATION 6 - BICYCLE LANE	ISLAND		INCIDENT SCENE							
	1 - NON-CONTACT	1 - Straight Ahead 2 - Backing	9 - LEAVING TRAFFIC LANE		ALKING, RUNNING, IGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE		POINT OF CONTACT				
ı 3 ı	2 - NON-COLLISION	3 - CHANGING LANES 4 - OVERTAKING/PASSING	10 - PARKED 11 - SLOWING OR STOPPED		ORKING JSHING VEHICLE	99 - OTHER / UNKNOWN	0 - NO ĐAM, 1 -12 - REFER	AGE 14 - UNDERCARRIAGE TO UNIT 15 - VEHICLE NOT AT SCENE				
ACTION	A CTOLICE	5 - MAKING RIGHT TURN	IN TRAFFIC	18 - Af	PPROACHING OR AVING VEHICLE		DIAGR					
	5 - BOTH STRIKING	6 - MAKING LEFT TURN 7 - MAKING U-TURN	12 - DRIVERLESS 13 - NEGOTIATING A CURVE	19 - ST	ANDING		13 - TOP					
	& STRUCK 9 - OTHER / UNKNOWN	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSINI SPECIFIED LOCATION	G 20 - O	THER NON-MOTORIST	r		TRAFFIC				
	1 - NONE	8 - FOLLOWING TOO CLOSE /ACDA	13 - IMPROPER START FROM A PARKED POSITION		ERATING DEFECTIVE UIPMENT	23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL				
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	9 - IMPROPER LANE	14 - STOPPED OR PARKED	19 - LO	AD SHIFTING	99 - OTHER IMPROPER ACTION	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN				
<u> </u>	4 - RAN STOP SIGN 5 - UNSAFE SPEED	CHANGE 10 - IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID		ALLING/SPILLING PROPER CROSSING	ACHON	<u> 2</u>	6 - NO CONTROL				
CONTRIBUTION CIRCUMSTAN	^{ng} 6 - Improper turn ^{ces} 7 - Left of Center	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY 17 - VISION OBSTRUCTION		ing in Roadway ot discernible		# OF THROUGH LANES	RAIL GRADE CROSSING				
			<u> </u>				ON ROAD	1 - NOT INVLOVED				
SEQUENCE	OF EVENTS		EVENTS				_2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING				
1 8	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION			23 - STRUCK BY FALLING, SHIFTING CARGO OR	LINET (NO	N MOTORICT PURICATION				
27	3 - IMMERSION 4 - JACKKNIFE	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TR	ANSPORT ARKED MOTOR	ANYTHING SET IN MOTION BY A MOTOR	UNII / NO	N-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST				
2 37	5 - CARGO / EQUIPMENT	11 - CROSS CENTERLINE - OPPOSITE DIRECTION	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM	VE	HICLE	VEHICLE 24 - OTHER MOVABLE		2 - SOUTH 6 - NORTHWEST				
ا م ا	LOSS OR SHIFT 6 - EQUIPMENT FAILURE	OF TRAVEL	17 - ANIMAL - FARM 18 - ANIMAL - DEER	M	AINTENANCE UIPMENT	OBJECT	FROM 4 1 TO 3	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST				
3 [u Todas sastr Valentivasi		ON WITH FIXED OBJECT -	STRUCK	(Britis Billia)	r Jakoelhelen ko		9 - OTHER / UNKNOWN				
4 📖	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES	46 - FE	NCE :	52 - BUILDING 53 - TUNNEL	UNIT SPEED	DETECTED SPEED				
e l	26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	40 - UTILITY POLE	48 - TR	EΕ	54 - OTHER FIXED OBJECT	45	1 - STATED / ESTIMATED SPEED				
> L	J 27 - BRIDGE PIER OR ABUTMENT	BARRIER 35 - MEDIAN CONCRETE	41 - OTHER POST, POLE OR SUPPORT	50 - W	ORK ZONE	99 - OTHER / UNKNOWN	<u>45</u>					
6	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 36 - MEDIAN OTHER BARRIER		EQ	AINTENANCE UIPMENT		POSTED SPEED	2 - CALCULATED / EDR				
I	30 - GUARDRAIL FACE	37 - TRAFFIC SIGN POST	44 - DITCH	51 - W	ALL			3 - UNDETERMINED				

2 MOST HARMFUL EVENT

1 FIRST HARMFUL EVENT

OHO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST										local report number 21-38963						
UNIT #	NAME: LAST, FIRST, MIDDLE									<u> </u>	DATE OF BIRTH AGE					GENDER
1	CASIDA, AMY, SUZANNE									07/26/1989				31	j F	
ADDRESS:	STREET, CIT	Y, STATE, ZIP					••			CONT	ACT PHO	ONE - INCLUDE	AREA COD	E		•
	,		EDINA, OH, 44256	j	I				I						T	.
	S INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPME USED							USED		T-COMPLIA	r		IR BAG USAGE EJECTION TRAPPE			
5	BY 1	LIGHNES NO	IAADED		05551			LOCAL	OFFENSE DESCI	<u> </u>	. IILLIVIL	' 1		1 1 1		
OL STATE OH	OPERATOR	LICENSE NU	JIVIBER		l	SE CHARG	ED	CODE			F \	IOUT DEAC	ŀ	TATION NUMBER		
OH OL CLASS	ENDORSEN	IENT DECT	NCTION AND TO BE	Innu	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			OPERATING VEHICLE V			OL TEST	Y41	1785 DRUG	G TEST(S)	
					RACTED TALCOHOL TARRILLANA			1	STATUS	TYPE	VALUE	STATUS	TYPE		SELECT UP TO 4	
4 UNIT #	NAME: LA	ST, FIRST, MID	ODLE		5	OTHE	r Drug		l	<u> 1</u>	1	ATE OF BIRTI	1 -	1 1	AGE	GENDER
GALL II	TOAINE: EX	51, 1 11.51, IMIL									•					, 45,125,1
ADDRESS:	STREET, CIT	, STATE, ZIP								CONT	ACT PHO	ONE - INCLUDE	AREA COD	E		
INTUDIES	INJURED	EMS AGENC	V (NIAME)		INJURED	TAKEN TO: N	MEDICAL FACILITY (NAME,	CITY)	SAFETY EQUIPMEN			SEATING	AIR B	AG USAGE	EJECTION	1 TRAPPED
HAJORIES	TAKEN BY	LIVIS AGENC	T (TAMINE)					,	USED		T-Complif HELMET			AK BAG GSAGE BEGNON II		
OL STATE	OPERATOR	LICENSE NU	JMBER		OFFENS	SE CHARG	ED	LOCAL	OFFENSE DESCR	RIPTION			CITA	TION NU	LUMBER	<u> </u>
								CODE		_						
OL CLASS	ENDORSEM	ENT RESTR	RICTION SELECT UP TO 3	DRIV	/ER RACTED	-	IOL / DRUG SUSPE		CONDITION	A	TYPE	VALUE	STATUS	TYPE	TEST(SELECT UP TO 4
				ВҮ		I⊨	R DRUG			SIATOS	11112				ILESOE15	Secret of 104
UNIT #	NAME: LA	ST, FIRST, MIC	DDLE								Į	DATE OF BIRTH	1		AGE	GENDER
ADDRECE:	CIDELL CITY	CTATE 7ID														
ADDRESS:	STREET, CITY	, STATE, ZIP								CONT	ACT PHO	ONE - INCLUDE	AREA COD	į		
INJURIES	INJURED TAKEN BY LONG TAKEN BY LONG TAKEN BY LONG TAKEN BY LONG TAKEN THE PROPERTY OF THE PROP				INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED				I DO	DOT-COMPLIANT POSITION A			AG USAGE	EJECTION	TRAPPED	
OL STATE	OPERATOR	LICENSE NU	MBER		OFFENSE CHARGED LOCAL CODE				IPTION	TION CITAT				TION NUMBER		
OL CLASS	ENDORSEM	ENT RESTR	ICTION SELECT UP TO 3	DRIV DIST			OL / DRUG SUSPE		CONDITION	STATUS		VALUE	STATUS	1	RESULTS	SELECT UP TO 4
INJU	JRIES	SEAT	ING POSITION	A	IR BAG		OL CLAS	SS	OL RESTRIC	l TION(S	DRI	VER DISTRA	I ACTION	Ţ	 EST STA	TUS
FATAL SUSPECTED INJURY SUSPECTED INJURY POSSIBLE IN. NO APPAREF INJURIES NOT TRAN /TREATED / EMS POLICE OTHER / UI SAFETY EG NONE USEE SHOULDER I USED CHILD RESTIF - FORWARD CHILD RESTIF - FORWARD CHILD RESTIF - REAR FACIN BOOSTER USE BOOSTER USE BOOSTER USE BOOSTER USE CHILD RESTIF - FORWARD - FORWARD - CHILD RESTIF - FORWARD - CHILD RESTIF - FORWARD - FOR	MINOR JURY TAKEN B SPORTED AT SCENE NKNOWN QUIPMEN SELT ONLY JULY USED ALAP BELT RAINT SYSTEM FACING AT IO PADS USED AT IO PADS USED NEES, ETC)	(MOTC 2 - FRON 3 - FRON 4 - SECON (MOTC 5 - SECON 7 - THIRD 9 - THIRD 9 - THIRD 10 - SLEEL BUS, PICE 12 - PASS UNER 13 - TRAIL 14 - RIDIN EXTEL (NON 15 - NON 99 - OTHI	DRCYCLE DRIVER) 1 - MIDDLE 1 - MIDDLE 1 - T. RIGHT SIDE ND - LEFT SIDE DRCYCLE PASSENGER) 10 - MIDDLE 10 - RIGHT SIDE 11 - RIGHT SIDE 11 - RIGHT SIDE 12 - RIGHT SIDE 13 - RIGHT SIDE 14 - RIGHT SIDE 16 - RIGHT SIDE 17 - RIGHT SIDE 18 - RIGHT SIDE 18 - RIGHT SIDE 19 - RIGHT SIDE 10 - RIGHT	1 - NOT EIE 2 - PARTIAL 3 - TOTALLY 4 - NOT API 1 - NOT TRA 2 - EXTRICA MECHAN 3 - FREED B	ED FRONTED SIDE ED BOTH SIDE PLICABLE MENT UN IECTIO CTED LY EJECTE PLICABLE RAPPE RAPPE APPED TIED MED THE BETTED THE BETTE THE BETT THE BETTE THE BETT THE BETTE THE BETTE THE BETTE THE BETTE THE BETTE THE BETTE THE	known V D D	1 - CLASS Å 2 - CLASS B 3 - CLASS C 4 - REGULAR CLAS (OHIO = D) 5 - M/C MOPED OL 6 - NO VALID OL OL ENDORSE H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOL R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIL TRAILERS X - TANKER / HAZ GENDE F - FEMALE M - MALE U - OTHER / UNKN	NLY MENT TER TER MAT	1 - ALCOHOL INTEL DEVICE 2 - CDL INTRASTAT 3 - CORRECTIVE LE 4 - FARM WAIVER 5 - EXCEPT CLASS, 6 - EXCEPT CLASS, 7 - EXCEPT CLASS, 8 - CLASS B BUS 9 - LEARNER'S PERI RESTRICTIONS 10 - LIMITED TO D. ONLY 11 - LIMITED TO D. 12 - LIMITED TO D. 13 - MECHANICAL CSPECIAL BRAK CONTROLS, OB 14 - MILITARY VEH 15 - MOTOR VEHIC WITHOUT AB 16 - OUTSIDE MIRR 16 - OUTSIDE MIRR 17 - PROSTHETIC A	E ONLY NSES A BUS A OR-TRAILER LICENSE MIT AYLIGHT AYLIGHT AYLIGHT AYLIGHT CONTROL AYLIGHT AYLIGHT CONTROL AYLIGHT AY	2 - M ELI CC (T) 3 - T/ CC 4 - T/ CC 5 - O EL 6 - P/ 7 - O IN T 8 - O IN T 8 - O IN T 9 - O IN T 8 - O IN T 9 - O IN T 8 - O IN T 9 - O IN T 8 - O IN T 9 - O IN T 8 - O IN T 8 - O IN T 9	OT DISTRACTED IANUALLY OPERS CETRONIC DEMINICATION EXTING, TYPING, AILING, TYPING, AILING, TYPING, AILING, TYPING, AILING, TYPING, AILING, TYPING, AILING, THER ON HAND MAMUNICATION THER ACTIVITY WITHER ACTIVITY WITHER DISTRACTIVITY THER DISTRACTIVISIDE THE VEHICL THER DISTRACTIVISIDE THE VEHICL THER AUTHORACTIVISIDE THE VEHICL ASLEEP, FAINT TIGUED, ETC. WOER THE INFLUIEDICATIONS / DECOHOL THER AUTHORACTIVISIDE AUTHORACTIVISION AUTHOR	I DEVICE DS-FREE I DEVICE D-HELD I DEVICE VITH AN E ON E ON CLE VN MAL JEN E E E E E E E E E E E E E E E E E E	2 - TEST 3 - TEST CON / UNI 4 - TEST RESU 5 - TEST RESU 1 - NON 2 - BLOC 3 - URIN 4 - OTHE DRUG 1 - AMPH 2 - BARBI 3 - BENZ 4 - CANIN 5 - COCA 6 - OPIA 7 - OTHE	TAMINATE USABLE GOVEN, JUTS KNOW GIVEN, JUTS UNKNI JUTS	/N OWN ST TYPE TYPE ESULT(S) S HES

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER					
UNIT # NAME: LAST, FIRST, MIDDLE								21-38963 Date of birth Age G					
		•											
ADDRESS:	STREET, CIT	Y, STATE, ZIP				-	CONTACT PHONI	E - INCLUDE AR	ea code				
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	GE EJECTION	TRAPPE		
	TAKEN BY				MC HELMET	POSITION							
UNIT #	NAME: LA	ST, FIRST, MIDDLE	DA		AGE	GENDER							
ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHONE	E - INCLUDE AR	ea code				
INJURIES	INTURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	(NAME CITY)	SAFETY EQUIPMENT	 	SEATING	AIR BAG USA	GE EJECTION	N TRAPPE		
INJURIES	TAKEN BY	EIVIS AGENCY (NAME)		TOOKES PARENTS. INCOME PARENTS		DOT-COMPLIANT MC HELMET							
UNIT #	NAME: LA	ST, FIRST, MIDDLE		·	-	1	DA		AGE	GENDER			
ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHONE	- INCLUDE AR	EA CODE				
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT				G USAGE EJECTION TRAP			
	TAKEN BY						DOT-COMPLIANT MC HELMET	POSITION					
UNIT #	NAME: LA	ST, FIRST, MIDDLE			•••		DA	TE OF BIRTH		AGE	GENDER		
ADDRESS:	STREET, CITY	/, STATE, ZIP					CONTACT PHONE	E - INCLUDE AR	EA CODE				
ADDRESS:	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT	<u> </u>	SEATING	AIR BAG USA	GE EJECTION	N TRAPPED		
INJUNIES	TAKEN BY	ENS AGENCI WAVE			, ,		MC HELMET	POSITION					
	INJ	URIES	SAFETY	EQUIPMENT USED		SEATING POS	ITION	110px = 0, private (1, 1, 1, 1)	AIR BAG	USAGE			
2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY 5 - NO APPARENT INJURY 5 - CHIL INJURED TAKEN BY 1 - NOT TRANSPORTED / 6 - CHIL TREATED AT SCENE REA 2 - EMS 7 - BOC 3 - POLICE 8 - HELI 9 - OTHER / UNKNOWN 9 - PRO (ELB GENDER 10 - REF F - FEMALE / BI M - MALE			2 - SHOULE 3 - LAP BEL 4 - SHOULE 5 - CHILD R FORWA 6 - CHILD R REAR FA 7 - BOOSTE 8 - HELMET 9 - PROTEC (ELBOW 10 - REFLEC 11 - LIGHTII / BICYC	R SEAT	1 - NOT EJECTEI 2 - PARTIALLY EJE ER ENCLOSED 3 - TOTALLY EJE RAILING UNIT 4 - NOT APPLICA ENCLOSED TR 1 - NOT TRAPPE 2 - EXTERIOR MECHANICA 3 - FREED BY			SIDE SOTH ABLE IT UNKNOWN ECTION D JECTED SCTED ABLE APPED ED BY					
	ST, FIRST, MI	NNrg					JA	TE OF BIRTH		AGE	GENDER		
ADDRESS:	STREET, CITY	, STATE, ZIP					CONTACT PHONE	- INCLUDE ARE	EA CODE				
NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH			AGE	GENDER			
ADDRESS:	STREET, CITY	/, STATE, ZIP					CONTACT PHONE	- INCLUDE ARE	EA CODE				
	ST, FIRST, MI	DDLE		·			DATE OF BIRTH			AGE	GENDER		
ADDRESS:	STREET, CITY	r, STATE, ZIP		·	<u> </u>		CONTACT PHONE	- INCLUDE ARE	A CODE				