OHO DEPARTM OF PUBLIC SAN DETI - BENEFI - PET	TRAFFIC (LOCAL REPORT NUMBER *									
PHOTOS TAKE	N ☐ОН-2 ∑	OH-3 LOC	ALINFORMATION RIVER S		21-41944						
SECONDARY	DASH OH-1P	OTHER REP	ORTING AGENCY NAME *			NCIC *	1-SOLVED			UNIT IN ERROR 98 - ANIMAL	
	PRIVATE PR	OPERTY MOI	ntville Police Department		2 - UNSOLVED 2 99 - UNKNOW						
COUNTY* LOCA	1 - CITY	CATION: CITY. VIL	LAGE. TOWNSHIP*				CRASH DATE	ASH SEVERITY - FATAL			
52 3	2 - VILLAGE MO	ontville (Tow	nship of)				07/30/2021	- SERIOUS INJURY			
ROUTE TYPE RO		1 - NORTH LOC 2 - SOUTH	ATION ROAD NAME			ROAD TYPE	LATITUDE DE	LATITUDE DECIMAL DEGREES SUSF			
ROUTE TYPE RO	- Is 15	D EACT !	ver Styx			RD	41.1312	285	3 ·	- MINOR INJURY SUSPECTED	
FOUTE TYPE RO	UTE NUMBER PREFIX	1 - NORTH REF	ERENCE ROAD NAME (ROAD,	MILEPOST, HOL	JSE #)	ROAD TYPE	LONGITUDE DI	ECIMAL DEGREES		- INJURY POSSIBLE	
FEREN	1,3,5	2 - SOUTH B - EAST Sn	nith			RD	5 - PROPERTY DA -81.812380 ONLY				
REFERENCE POI		1 - MF21	ROUTE TYPE		ROAD TYPE		INTERSECTION RELATED				
1 - INTERSEC	FROM REFEREN	CE CE	A SECTION OF STREET OF STREET STREET, STREET STREET, S	- ALLEY		Y RD - ROAD	WITHIN INTER				
2 - MILE POS		UTH	GPALLIS POLITE AV		LA - LANE	NE SQ - SQUARE				_4	
3 - HOUSE #	4 - WE	ST SR - STA	NO. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		OV - OVAL	T ST - STREET TE - TERRACE	WITHIN INTER	RCHANGE AREA	NUM	IBER OF APPROACHES	
DISTANCE FROM REFERENCE			MREKED COOM LY KOOTE		PK - PARKWAY		!	ROAD	WAY		
15.00	1 - MII	TR NU	MBERED TOWNSHIP HE	a Mathama wa nenyi ilibi. 140	PI - PIKE PL - PLACE	WA - WAY	ROADWAY D	IVIDED			
	3 - YA	1				<u> Mahapitin on til</u>		, l			
1 - ON R	CATION OF FIRST HARM DADWAY 9 - C	ROSSOVER	1 - NO	NNER OF CRASH T COLLISION 4 -			DIRECTION OF TRAV 1 - NORTH	l l	MEDIAI	JSH MEDIAN	
2 - ON S 3 - IN ME		DRIVEWAY/ALLE RAILWAY GRADE		AULTUB	BACKING		2 - SOUTH	1	<4 FEET)		
4 - ON R		SHARED USE PAT	rhs or VEH	ICLES IN 6 -	ANGLE SIDESWIPE, SA	ME DIRECTION	3 - EAST 4 - WEST		DIVIDED FLI ≥4 FEET)	JSH MEDIAN	
5 - ON G	ORE DE TRAFFIC WAY 13 - 1	TRAILS	2 - REA	NSPORT	•	POSITE DIRECTION				PRESSED MEDIAN	
7 - ON R/		TOLL BOOTH	3 - HEA		OTHER / UNK	NOWN			DIVIDED, RA ANY TYPE)	AISED MEDIAN	
8 - OFF R	AMP 99 -	OTHER / UNKNO	NM					9 - 1	OTHER / UN	IKNOWN	
WORK ZONE RI	ELATED	W	ORK ZONE TYPE	LOCATION	N OF CRASH II	N WORK ZONE	CONTOUR	CONDIT	ON5	SURFACE	
WORKERS PRES	SENT		IE CLOSURE		1 - BEFORE THE 1ST WORK ZONE 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
LAW ENFORCE	MENT PRESENT		IE SHIFT/ CROSSOVER RK ON SHOULDER	2-,	(FVF)					1 - CONCRETE	
		OR	MEDIAN	1 4-	TRANSITION A ACTIVITY AREA		2 - STRAIGHT	2 - WET 3 - SNOW		2 - BLACKTOP, BITUMINOUS,	
ACTIVE SCHOO	L ZONE		ERMITTENT OR MOVING WORK	. 1	TERMINATION		GRADE	4 - ICE		ASPHALT . 3 - BRICK/BLOCK	
Ε	<u></u>	5 - OTH	IEK	<u> </u>	3 - CURVE LEVEL 5 - SAND, MUD, DIRT, OIL, GRAVEL						
1 - DAYLI	I GHT CONDITION GHT		1 - CLEAR	WEATHER 6 - SNOW	WEATHER 9 - OTHER 6 - WATER (STANDING,						
1 2 DAWN	•		1 2 - CLOUDY	7 - SEVERE CR		/UNKNOWN	7 - SLUSH		5 - DIRT 9 - OTHER		
1	- LIGHTED ROADWAY - ROADWAY NOT LIGHT	red	3 - FOG, SMOG, SMOKE 4 - RAIN	E 8 - BLOWING S 9 - FREEZING F				9 - OTHER / U	NKNOWN	/ UNKNOWN	
	- UNKNOWN ROADWA		5 - SLEET, HAIL	99 - OTHER / L		IN O DNIZZEE			ľ		
	r / UNKNOWN										
NARRATIVE											
1			ፄ River Styx, while northb ፥1, the driver of which adr					l			
			hile stopped. When the li								
			ng functional damage to								
			 Neither vehicle required in at the scene, but refuse 			(i)	` <i>//</i> /—"	L E	. Smith Rd.	v.	
			other injuries were claim					7			
							=	-			
								#1			
							표 💆				
							River Styx Rd	#2			
								#2			
•]			ļ		
				İ			Not To Sca	ale			
						<u>-</u>					
CRASH REPOR	TED DATE / TIME	DISP	ATCH DATE / TIME	ARRI	VAL DATE / T	ME	SCENE CLEARED D	PATE / TIME		EPORT TAKEN BY	
07/30/2	021 16:18	07,	/30/2021 16:18	07/3	30/2021 16	25	07/30/2021	1 17:13	/ =	OLICE AGENCY	
TOTAL TIME	OTHER	TOTAL	OFFICER'S NAME*			CHECKED BY OFFICER	'S NAME*	5////	╱	IOTORIST	
KOADWAY CLOSED	INVESTIGATION TIME	MINUTES	Hazek, Daniel			Searle, Cory		X 1.	ٽ ا	JPPLEMENT RRECTION OR ADDITION	
		55	OFFICER'S BAD			CHECKED BY	OFFICER'S BADGE N	UMBER*	TO A	N EXISTING REPORT SENT TO	
				1605 ODPS)							



LOCAL REPORT NUMBER

							21-41944 DAMAGE						
UNIT#	OWNER NAME: LAST, FIRST, I		IVER)	OWNER	R PHONE::NCLUDE ARE	EA CODE (SAME AS DRIVER)	DAMAGE SCALE						
OWNER A	MCCONNELL, KATHE DDRESS: STREET, CITY, STATE, Z						1 - NO			AGE			
5878 EN	MERALD LAKES DR., M	EDINA, OH, 4	4256				32 - MIN			SE .			
COMMERC	CIAL CARRIER: NAME, ADDRES	S, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE; INCLUDE AREA CODE									
	· · · · · · · · · · · · · · · · · · ·			L.,.	r								
					1	i i	40		40				
	T		INSURANCE POLICY #		COLOR	VEHICLE MODEL	11 12	1	11 12	1			
VERIFIE	GRANGE		617749518697		BLU	CROSSTREK	10 11 1	2	10 11 1	2			
	TYPE OF USE	IN EMERGENCY	US DOT #	Tow	ED BY: COMPANY NA	AME	10 2	 		7			
		RESPONSE	VEHICLE WEIGHT GVWR/GCWR	· 🗀									
DEVICE	HIT/SKIP UNIT	# OCCUPANTS	1 - ≤10K LBS. 2 - 10.001 - 26K LBS.	IJ⊟ĸ	ELEASED	S # PLACARD ID #	8 7 5	\\\^4	8 7 9 5	√ ⁴			
EQUIPP	ED	1 1	3 - > 26K LBS.	L_IP			76	5 11	12 7	5			
					=	· ·		XI	12				
	(MINIVAN) 8 - MC	OTORCYCLE 3-WHEEL	ED 14 - SINGLE UNIT 20 - C					7	11 10 2				
UNIT TYP	E VEHICLE 10 - N		D 15 - SEMI-TRACTOR 21 - H					9 (9 3 3				
			16 - FARM EQUIPMENT A					7	7 1000 5				
9 1	(ATV)		17 - MOTORITOME				40	, X	0				
		ITOMOMOUS					11 12		6 "	1			
)			9 - UNKNOWN	10 11 1	^2	10 11 17	^ 2			
1 2 1	1-YES 2-NO 9-OTHER/U	L	1 - BRITER ADDISTANCE 4				10 2	<i>-</i> − 1, 1	10 10 2	\dashv			
		MODE					9 8 8 4		a a a a a				
1	1 - NONE 2 - TAXI					21 - MAIL CARRIER 99 - OTHER / UNKNOWN	B 7 5	√4 ·	B 7 3	$\sqrt{4}$			
	3 - ELECTRONIC RIDE	8 - BUS - SHUTTLE	13 - POLICE				7	5		5			
FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER 10 - AMBULANCE					6		b				
	5 - BUS - TRANSIT/COMMUTER			P.A	TROL			1	12 12 11	2			
l 1 i	1 - NO CARGO BODY TYPE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL			99 - OTHER / UNKNOWN	12 • •	ا فيسر					
CARGO	2 - BUS	CONTAINER CHA					. R. M. J.	ا / اد و ا	1) 3			
BODY	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE		(10 - FLAT BED	14 - G/	ARBAGE/REFUSE			e	, 'E' [6	Ð			
,	, 1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MO	TOR TROUBLE	99 - OTHER / UNKNOWN	6	1					
VEHICLE	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT			DAMAGE SALE DAMAGE SALE 1 - NONE 3 - FUNCTIONAL DAMAGE 9 - UNKNOWN DAMAGED AREAS) INDICATE ALL THAT APPLY SUSMARU VEHICLE MAKE SUBARU VEHICLE MODEL CROSSTREK NAME UNIT MATERIAL ASS # PLACARD ID # - POSSTBANASSATER - WHERLCHAIR (ANY TYPE) - OTHER FORM MOTORIST - ENCYCLE - TRAIN 1 - PODISTBANASSATER - WHERLCHAIR (ANY TYPE) - OTHER FUNKNOWN 99 - OTHER FUNKNOWN 99 - OTHER FUNKNOWN 99 - OTHER FUNKNOWN 10 - NO DAMAGE [0] - UNDERCARRIAGE [14] - OND DAMAGE 14 - UNDERCARRIAGE 14 - UNDERCARRIAGE 1 - TOP [13] - ALL AREAS [15] - INDITIAL POINT OF CONTACT ON DAMAGE 14 - UNDERCARRIAGE 1 - TOP 13 - TOP 15 - VEHICLE MOTAT SCENE ODINGRAMM 99 - OTHER FUNKNOWN 13 - TOP TRAFFIC CONTROL - REPER TO UNIT 15 - VEHICLE MOTAT SCENE ODINGRAMM 99 - UNKNOWN 13 - TOP TRAFFIC CONTROL - REPER TO UNIT 15 - VEHICLE MOTAT SCENE ODINGRAMM 99 - UNKNOWN 13 - TOP TRAFFIC CONTROL - ROUGHMAND 99 - UNKNOWN 13 - TOP TRAFFIC CONTROL - ROUGHMAND 99 - UNKNOWN 13 - TOP TRAFFIC CONTROL - ROUGHMAND 99 - UNKNOWN 1 - NOTION SOW A MOTOR - NOTION SY A MOTOR - N							
DEFECTS		9 - TIKE BLOWOUT	DETECTIVE	,,,			□- NO D	AMAGE [0] UNDERCARRIAGE	[14]			
	1 - INTERSECTION -	4 - MIDBLOCK -	7 - SHOULDER/ROADSIDE			99 - OTHER / UNKNOWN	П толг	431	D ALL ADDACE (SE				
NON-	2 - INTERSECTION -	5 - TRAVEL LANE -	0 - SIDEWACK	OF	RTRAILS		☐- IOP(
MOTORIST LOCATION	UNMARKED CROSSWALK 3 - INTERSECTION - OTHER	OTHER LOCATION 6 - BICYCLE LANE	ON ISLAND					ואט - 🎞	IT NOT AT SCENE[16]				
	1 - NON-CONTACT							INITIAL PO	OINT OF CONTACT				
4	2 - NON-COLLISION 11			40 141				O DAMAGE	E 14 - UNDERCARRIAGE				
·	3 - STRIKING PRE-CRASH					-	6 1-12			CENE			
ACTION	4 - STRUCK ACTIONS	6 - MAKING LEFT TU	JRN 12 - DRIVERLESS	LE	AVING VEHICLE		13 -		99 - UNKNOWN				
	& STRUCK	8 - ENTERING TRAF	FIC 14 - ENTERING OR CROSSING										
				18 - OP	FRATING DEFECTIVE	23 - OPENING DOOR INTO	TO A TRICULAY PLO						
	2 - FAILURE TO YIELD	/ACDA	A PARKED POSITION	EQI	JIPMENT	ROADWAY				SIGN			
1. 1.	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY					W	/				
CONTRIBUTI	5 - UNSAFE SPEED							ا_ــــــــــــــــــــــــــــــــــ	3 - FLASHER 6 - NO CO	NTROL			
CIRCUMSTAN	7 - LEFT OF CENTER							1E2					
SFOUENCE	E OF EVENTS							-		G			
			LVLIVIO		WAAL OTUED 3		<u> 2</u>	L	1				
₁	2 - FIRE/EXPLOSION	8 - RAN OFF ROAD R	IGHT 13 - OTHER NON-COLLISION	1 20 - MC	OTOR VEHICLE IN	SHIFTING CARGO OR	1161	T / NON '	MOTORIST DIRECTION				
.	3 - IMMERSION 4 - JACKKNIFE	9 - RAN OFF ROAD LI 10 - CROSS MEDIAN	EFT 14 - PEDESTRIAN 15 - PEDALCYCLE			MOTION BY A MOTOR	JN	. , 14014-1		F			
2	5 - CARGO / EQUIPMENT	11 - CROSS CENTERL	INE - 16 - RAILWAY VEHICLE	VE	HCLE 2	4 - OTHER MOVABLE			2 - SOUTH 6 - NORTHWES	T			
- I	6 - EQUIPMENT FAILURE	OF TRAVEL	18 - ANIMAL - DEER	MA	INTENANCE	OBJECT	_{from} 2	то [1	1				
з [C							_				
4		31 - GUARDRAIL END	38 - OVERHEAD SIGN POST	45 - EM	IBANKMENT 5	2 - BUILDING	HAIT SPEE		DETECTED SPEED				
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE I	BARRIER SUPPORT	47 - MA	AILBOX 5	4 - OTHER FIXED	O'AII SEE	-	Science Speed				
5	J 27 - BRIDGE PIER OR	BARRIER	41 - OTHER POST, POLE	49 - FIR	E HYDRANT 9		0		1 - STATED / ESTIMATED :	E 1 2 3 3 1 [14] ENE			
ا ء ا	28 - BRIDGE PARAPET	BARRIER	42 - CULVERT	MA	INTENANCE		DOCTED CO		1 12-CALCULATED/EDR				
	☐ 29 - BRIDGE RAIL 30 - GUARDRAIL FACE						POSTED SPE	נט	3 - UNIDETEDMINED				
լ 1	Description												
	_								1				



LOCAL REPORT NUMBER

(A)—	- man - man O I A I I		21-41944									
UNIT#	OWNER NAME: LAST, FIRST, CROSSEN, THOMAS,			OWNER	R PHONE:INCLUDE ARE	EA CODE (SAME AS DRIVER)	D A M A G E DAMAGE SCALE					
4	ADDRESS: STREET, CITY, STATE, 2 AFAYETTE RD., LOT F26						1 - NONE 3 2 - MINOR D		- FUNCTIONAL DAMAGE - DISABLING DAMAGE			
0	CIAL CARRIER: NAME, ADDRES	·		Coi	MMERCIAL CARRIER PHO	ONE: INCLUDE AREA CODE		9 - UNKNOWN				
I P STATE	LICENSE PLATE #	VEHICLE	IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE		DAMAGED ARE DICATE ALL THAT				
OH	GCK5310	1Y1SK	5285YZ401971		2000	CHEVROLET			12 1			
INSUR.	ANCE INSURANCE COMPA ED STATE FARM	1	SURANCE POLICY # 17629-A21-35		color RED	VEHICLE MODEL MALIBU	10 11 2 1	\ ²	10 11 12 2			
Сомм	TYPE OF USE ERCIAL GOVERNMENT	IN EMERGENCY	US DOT #	Tow	ED BY: COMPANY NA	AME	9 9 3)3	9 3 3			
INTERL		# OCCUPANTS VEHICE	.E WEIGHT GVWR/GCWR 1 - ≤10K LBS.		HAZARDOUS		8 4 -) ,	- 3 -			
EQUIPE			2 - 10.001 - 26K LBS. 3 - > 26K LBS.		ELEASED LACARD [6 5	12	7 6 5			
UNIT TYP	2 - PASSENGER VAN 7 - M (MINIVAN) 8 - M E 3 - SPORT UTILITY 9 - AL VEHICLE 10 - N 4 - PICK UP B	OTORCYCLE 2-WHEELED 1 OTORCYCLE 3-WHEELED 1 JTOCYCLE MOPED OR MOTORIZED 1 ICYCLE 1 MLL TERRAIN VEHICLE 1	3 - SNOWMOBILE 19 - BI 4 - SINGLE UNIT 20 - O TRUCK 21 - H 5 - SEMI-TRACTOR 22 - A	US (16+ P. THER VEH EAVY EQU NIMAL WI	ASSENGERS) 24 - 1 HICLE 25 - 0 JIPMENT 26 - 1 ITH RIDER OR 27 -	PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE) OTHER NON-MOTORIST BICYCLE IRAIN JNKNOWN OR HIT/SKIP	6 10 9 8	11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 3 5 12 4			
2	WAS VEHICLE OPERATING IN AI MODE WHEN CRASH OCCURRE 1 - YES 2 - NO 9 - OTHER / L	D? 0		HIGH AU	ONAL AUTOMATION ITOMATION TOMATION	9 - UNKNOWN	10 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6 2 3	10 11 12 1 2 9 9 9 9 9 9			
SPECIAL FUNCTION	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.	18 - SN 19 - TC 20 - SA	ARM OWING NOW REMOVAL DWING AFETY SERVICE KTROL	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	7 6 5	12	12 12			
CARGO BODY TYPE	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	4 - LOGGING 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGOVAN /ENCLOSED BOX	7 - GRAIN/CHIPS/GRAVEL 8 - POLE 9 - CARGO TANK 10 - FLAT BED	13 - AU	UMP ONCRETE MIXER UTO TRANSPORTER ARBAGE/REFUSE	99 - OTHER / UNKNOWN	9 3	9 0 3	9 3 9 9 3			
VEHICLE DEFECTS		4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	10 - DI	OTOR TROUBLE SABLED FROM PRIOR CCIDENT	99 - OTHER / UNKNOWN	□- NO DAMA	6 GE[0] □	6 6 - UNDERCARRIAGE [14]			
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	11 - SH OR 12 - FIF	RIVEWAY ACCESS HARED USE PATHS R TRAILS RST RESPONDER INCIDENT SCENE	99 - OTHER / UNKNOWN	□-TOP [13}	UNIT NOT AT	- ALL AREAS [15] SCENE[16]			
3 ACTION	4 - STRUCK ACTIONS 5 - BOTH STRIKING & STRUCK	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 1 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 7 - MAKING U-TURN 8 - ENTERING TRAFFIC	9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS 13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING	JO- 16 - W- 17 - PU 18 - AP LEA 19 - ST	GGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DA 1 12 1-12 - REF	ER TO UNIT 15 GRAM 99	- UNDERCARRIAGE - VEHICLE NOT AT SCENE - UNKNOWN			
	9 - OTHER / UNKNOWN 1 - NONE		SPECIFIED LOCATION 13 - IMPROPER START FROM			23 - OPENING DOOR INTO	TRAFFICWAY FLOW	TRAFFIC TRA	AFFIC CONTROL			
8	2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED	/ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING	A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID	19 - LO/ /FA	DIPMENT AD SHIFTING LLING/SPILLING PROPER CROSSING	ROADWAY 99 - OTHER IMPROPER ACTION	1 - ONE-WAY 2 - TWO-WAY 2 - 1	, 2 , ^{2-SI}	OUNDABOUT 4 - STOP SIGN GNAL 5 - YIELD SIGN ASHER 6 - NO CONTROL			
CONTRIBUTI CIRCUMSTAN	ING 6 - IMPROPER TURN NCES 7 - LEFT OF CENTER	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY 17 - VISION OBSTRUCTION		ng in Roadway It discernible		# of THROUGH LANES		GRADE CROSSING			
SEQUENC	E OF EVENTS	anarananan a	manu ngalubanan a		amuus usruu riid		on ROAD	2 - INV	T INVLOVED OLVED-ACTIVE CROSSING			
1	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	EVENTS 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	20 - MC	OTOR VEHICLE IN	3 - STRUCK BY FALLING, SHIFTING CARGO OR			OLVED-PASSIVE CROSSING			
2	3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 6 - EQUIPMENT FAILURE	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER	21 - PAI VEI 22 - WO MA EQI	ORK ZONE UNTENANCE UIPMENT	ANYTHING SET IN MOTION BY A MOTOR VEHICLE 4 - OTHER MOVABLE OBJECT	FROM 2 TO	2 - SOUTH 6 - 1 3 - FAST 7 - 5 FROM 2 1 1 4 - WEST 8 - 5				
4	25 - IMPACT ATTENUATOR / CRASH CUSHION		N WITH FIXED OBJECT - S 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES	45 - EM 46 - FEN	IBANKMENT 5: NCE 5:	2 - BUILDING 3 - TUNNEL	UNIT SPEED	-				
5	26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE	SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT		EE	4 - OTHER FIXED OBJECT 9 - OTHER / UNKNOWN	5		1 - STATED / ESTIMATED SPEED			
6	28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST	42 - CULVERT	MA	INTENANCE UIPMENT		POSTED SPEED		EUNCTIONAL DAMAGE DISABLING DAMAGE SI PPLY 12 13 14 17 16 17 16 17 17 16 17 18 19 19 10 11 11 11 11 11 11 11 11 11 11 11 11			
∟1	FIRST HARMFUL EVEN	т1 моѕт	HARMFUL EVENT				35		2 - AMACIEKIMINEN			

	OHO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST									LOCAL REPORT NUMBER 21–41944									
UN											DATE OF BIRTH AGE GENDE								
	1	HEINISCH, RICHARD, A.										08/13/1941					79	М	
ADD	RESS:	STREET, CIT	Y, STA	TE, ZIP								CONTACT PHONE - INCLUDE AREA CODE							
⊡—				DR., MEDINA, OH, 442	256														
אראו אראו		INJURED TAKEN	EMS	AGENCY (NAME)		INJURE	D TAKEN TO:	: MEDICAL FACILITY (NAME	, CITY)	SAFETY EQUII	PMENT		T-COMPLIA	.		AIR BAG USAGE EJECTION TRAPP			
N S		BY 1	1116	NICE AN IMPER		orre	NSE CHAR		LOCAL	4	rcent		HELIVIET	1 1		1 1 1 1			
O O O O O O O O O O O O O O O O O O O		OPERATOR	LICE	NSE NUMBER	GED	CODE	OFFENSE D	JESCKI	PIION			Cit	AHONI	MOMREK					
	LASS	ENDORSEM	ENT	RESTRICTION SELECT UP TO 3	Ir	 DRIVER	IVER ALCOHOL / DRUG SUSPECTED			CONDITI	ON	А	LCOHO	L TEST		DRUG TEST(S)			
			DIS				TRACTED ALCOHOL MARUUANA					STATUS	TYPE	VALUE	STATUS	ТҮРЕ	RESULTS	SELECT UP TO 4	
4		NAME 14	CT. FI	3		" 1	от⊦	IER DRUG		1		1	1		<u> 1</u>	1 1	A.C.F.	CEMPER	
UNI			-	RST, MIDDLE										OATE OF BIRTI	1	ŀ	AGE	GENDER	
Z ADD		STREET, CIT	_	HOMAS, G. TE, ZIP								CONT)6/23/1953 I NE - INCLUDE	ARFA COL	F	68	M	
	6 LAF	AYETTE I	RD.,	LOT F26, MEDINA, OH,	44256	6										-			
MOTORIST / NON-MOTORS	JRIES	INJURED TAKEN	EMS	AGENCY (NAME)		INJURE	D TAKEN TO:	MEDICAL FACILITY (NAME,	.CHY)	SAFETY EQUIP	MENT	L-1DO	T-COMPLIA	SEATING NT POSITION		AG USAG	E EJECTIOI	TRAPPED	
ON 5	;	BY 1				1				4			HELMET			1	1	1	
S OLS	TATE	OPERATOR	LICE	NSE NUMBER		OFFE	NSE CHAR	GED	LOCAL	OFFENSE D	ESCRI	PTION	TION			CITATION NUMBER			
일 이	Н					451	1.21A			NO PERS	SON S			TE A MOTO) Y4	41595			
OL C	LASS	ENDORSEM	ENT	RESTRICTION SELECT UP TO 3	ءًا	RIVER DISTRACTE				CONDITIO	- 1	STATUS	TYPE	L TEST VALUE	STATUS	DRU		RESULTS SELECT UP TO 4	
4	.				В	³ 7	1=	IER DRUG		1		1	1		1	1			
UNI	Т#	NAME: LA	ST, FIF	RST, MIDDLE									D	ATE OF BIRTI	1		AGE	GENDER	
.								·											
ADD!	RESS: S	STREET, CITY	, STA	TE, ZIP								CONT	АСТ РНО	NE - INCLUDE	AREA COD	Ε			
טנאו <u>ש</u>	IRIES	INJURED	EMS	AGENCY (NAME)		INJURE	D TAKEN TO:	MEDICAL FACILITY (NAME,	CITY)	SAFETY EQUIP	MENT			SEATING		AG USAG	E EJECTION	TRAPPED	
NON-		TAKEN BY					USED					T-COMPLIAI HELMET	POSITION						
OTORIST / NON-MOTORIST P P Z Z	TATE	OPERATOR	LICE	NSE NUMBER		OFFEI	OFFENSE CHARGED LOCAL OFFENSE DESCRIPTION				ESCRII	PTION C				CITATION NUMBER			
OIOR							CODE												
OF C	LASS	ENDORSEM	ENT	RESTRICTION SELECT UP TO 3		RIVER	_	HOL / DRUG SUSPI		CONDITIO	Г		СОНО			1	G TEST(•	
	ŀ		ŀ		В		III	ER DRUG	JANA		İ	STATUS	TYPE	VALUE	STATUS	TYPE	KEZOLIZ	SELECT UP TO 4	
	ULNI	RIES		SEATING POSITION		AIR BA	ıG	OL CLA	ss	OL RES	TRICT	ion(s)	DRI	VER DISTRA	CTION	Ĺ	IEST STA	TUS	
1 - FATAL			1			DEPLOYED		1 - CLASS A		1 - ALCOHOL DEVICE	INTERL	ock .		OT DISTRACTED ANUALLY OPER	TING AN		NE GIVEN T REFUSED		
2 - SUSPE INJUR	Y 🗆 🗓			- FRONT - MIDDLE	4 - DEPI	LOYED SIDE		2 - CLASS B 3 - CLASS C		2 - CDL INTRA 3 - CORRECTI				CTRONIC MMUNICATION	DEVICE	3 - TES	T GIVEN, NTAMINATE	D SAMPLE	
3 - SUSPE (NJUR)	Υ	605050505050	3.4	(MOTORCICEL PASSENGER)	5 - NOT	NT/SIDE FAPPLICABI LOYMENT L		4 - REGULAR CLA	4 - FARM WA 5 - EXCEPT CI	(TEXTING, TYPING, BUS DIALING) 3 - TALKING ON HANDS-F			DS-EREE	/ UNUSABLE 4 - TEST GIVEN,					
4 - POSSII 5 - NO AF		Mark Calabrida (Contraction Contraction Co	6	- SECOND - RIGHT SIDE	9 - DEP	ÇR BİLLIBY		(OHIO = D) 5 - M/C MOPED (ONLY	6 - EXCEPT CI & CLASS I 7 - EXCEPT TR	COMMUNICATION DE			DEVICE	VICE 5 - TEST GIVEN,				
וטנאו	RIES	TAKEN B	7	- THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	1 NOT	EJECTIO EJECTED	ON Marie Land	6 - NO VALID OL		8 - INTERMEE	DIATE L		5 - 01	MMUNICATION HER ACTIVITY V	VITH AN	d primari	OHOL TE	ST TYPE	
1 - NOT	2 200 500	111908081180808080808080	- 9	- THIRD - RIGHT SIDE	2 - PAR	TIALLY EJEC ALLY EJECTE		OL ENDORS	EMENT	9 - LEARNER'S RESTRICTION	ONS		6 - PA	CTRONIC DEVI SSENGER	ad the	1 - NO 2 - BLC	NE		
2 - EMS	KIED A	T SCENE				APPLICABL	E	H - HAZMAT ■ M - MOTORCYCL		10 - LIMITED ONLY		INS	HER DISTRACTI SIDE THE VEHIC HER DISTRACTI	E	3 - URI 4 - BRE	NE			
3 - POLIC	10.25%	NKNOWN		OTHER ENCLOSED CARGO	1 - NOT	TRAPPED	ED	P - PASSENGER		11 - LIMITED 12 - LIMITED 13 - MECHAN	(430,000	i Ou	TSIDE THE VEH HER / UNKNOV	CLE	5 - OTI	0.7474030			
		After Indoor Action	1			RICATED BY HANICAL M	EANS	N = TANKER Q = MOTOR SCOO	OTER	(SPECIAL CONTRO	BRAKES	, HAND		CONDITIO		1 - NO	NE TEST	TYPE	
1 - NONE	. ch. 6.5.6	UIPMEN	1	UNENCLOSED CARGO AREA : 3 - TRAILING UNIT		D BY I-MECHANI	CAL MEANS	R - THREE-WHEEL		ADAPTIV 14 - MILITARY	E DEVIC Y VEHIC	ES) LES ONLY	2 - PH	PARENTLY NOR YSICAL IMPAIRI		2 - BLC 3 - URI	NE		
2 - SHOU USED		Brandyc Le	1	4 - RIDING ON VEHICLE EXTERIOR				S - SCHOOL BUS		15 - MOTOR ' WITHOU'	T AIR BI	RAKES	DEP	OTIONAL (E.G., RESSED, ANGRY,		4 - OT	The Margarity	ESULT(S)	
4 - SHOU		LY USED LLAP BELT		(NON-TRAILING UNIT) 5 - NON-MOTORIST 9 - OTHER / UNKNOWN		d Vital	\$5,05.74	T - DOUBLE & TR TRAILERS	PLE	16 - OUTSIDE 17 - PROSTHE 18 - OTHER			4 - ILL	the artifactor of the second second	ren (1 - AM	PHETAMINE	necessor in estimate.	
		AINT SYSTEM		9-OTHER/UNKNOWN				X - TANKER / HAZ	'MAT	erop ociones Ancies ociones			FA1	L ASLEEP, FAIN FIGUED, ETC. IDER THE INFLU		3 - BEN	BITURATES		
6 - CHILD	RESTR	FACING AINT SYSTEM						GENDE	R	125 (C. 2010) - 1865-	0.000		ME	DICATIONS / DI		5 - CO	the second secon		
7 - BOOS 8 - HELM		٩T						F - FEMALE M - MALE			244576 1-16571			HER / UNKNOW	'N	7 - OTH	ATES / OPIO IER SATIVE RESU	Mes Care In 1991	
9 - PROTE	CTIVE	PADS USED IEES, ETC)						U - OTHER / UNK	NOWN							y Nec			
10 - REFL	ECTIVE	CLOTHING PEDESTRIAN						er anger Sast er et also det estist	energi (1906) Partitioner							.546 (5.86) 44 465 (5.46) 46 (4.	or esta estas Orango (1964)		
	YCLE O	NLY					4455		usjane) Jakon						50 (Sec.)	15-100	4 38.00	Sarat (1981)	

©CCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER 21-41944						
UNIT #		AST, FIRST, MIDDLE		DA	DATE OF BIRTH AGE									
1	MCCON	NNELL, KATHRYN, L.					02	02/02/1937						
ADDRESS	S: STREET, CIT	Y, STATE, ZIP					02/02/1937 84 F CONTACT PHONE - INCLUDE AREA CODE							
5878 EN	MERALD L	AKES DR., MEDINA, O	H, 44256											
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY ((NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	E EJECTION	TRAPPED			
4	ву _1	1				4	LIMC HELMET	3	1	1	1			
UNIT #	NAME: LA	AST, FIRST, MIDDLE	DATE OF BIRTH AGE GEN											
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 POSITION AIR BACE			E EJECTION	TRAPPED			
UNIT #	UNIT # NAME: LAST, FIRST, MIDDLE								<u> </u>	AGE	GENDER			
ADDRESS	: STREET, CIT	Y, STATE, ZIP	<u> </u>	<u>.</u>			CONTACT PHONE	- INCLUDE ARE	A CODE					
<u> </u>	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (I	NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
UNIT #		ST, FIRST, MIDDLE		<u> </u>		<u> </u>		TE OF BIRTH		AGE	GENDER			
ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE							
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (N	SAFETY EQUIPMENT	DOT-Compliant	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED				
	ВУ	URIES	1	Y EQUIPMENT USED		SEATING POS	MC HELMET	1	AIR BAG U					
2 - SHOUL 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY 5 - NO APPARENT INJURY 1 - NOT TRANSPORTED / FORW. 1 - NOT TRANSPORTED / FORW. 2 - EMS 7 - BOOST 3 - POLICE 8 - HELME 9 - OTHER / UNKNOWN 9 - PROTECTED / (ELBOV) GENDER 10 - REFLE F - FEMALE 111 - LIGHT M - MALE / BICY			VEHICLI 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	E OCCUPANT DER BELT ONLY USED T ONLY USED DER & LAP BELT USED ESTRAINT SYSTEM - RD FACING ESTRAINT SYSTEM - ACING R SEAT	(MOTO) 2 - FRON 3 - FRON 4 - SECO (MOTO) 5 - SECO) 6 - SECO) 7 - THIRE (MOTO) 8 - THIRE 10 - SLEE 11 - PASS CARC SUCI 12 - PASS CARC 13 - TRAI 14 - RIDII (NON-	IT - LEFT SIDE ORCYCLE DRIVE IT - MIDDLE IT - MIDDLE IT - RIGHT SIDE ND - LEFT SIDE ORCYCLE PASSEI ND - MIDDLE O- LEFT SIDE ORCYCLE SIDE CO OR	2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN CAR) EJECTION 1 - NOT EJECTED OF TRUCK CAB HER ENCLOSED TRAILING UNIT UP WITH CAP) JENCLOSED E EXTERIOR E EXTERIOR 2 - PARTIALLY EJECTED 4 - NOT APPLICABLE TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY							
NAME: LAS	ST, FIRST, MII	DDLE					DAT	E OF BIRTH		AGE	GENDER			
ADDRESS:	STREET, CITY	, STATE, ZIP					CONTACT PHONE	- INCLUDE AREA	A CODE					
NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE (
ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
NAME: LAS	ST, FIRST, MIL	DDLE					DAT	E OF BIRTH		AGE	GENDER			
ADDRESS:	STREET, CITY	, STATE, ZIP		-			CONTACT PHONE	- INCLUDE AREA	CODE	•				