OHIO DEPARTME OF PUBLIC SAFE	TRAFFIC (LOCAL REPORT NUMBER *										
PHOTOS TAKE	OH -2	JOH-3	ALINFORMATION 6080 WA		21-49018							
SECONDARY C	RASH OH-1P	Nomen.	RTING AGENCY NAME *		NCIC *	HIT/SKIP NUMBER OF 1 - SOLVED		INITS UNIT IN ERROR 98 - ANIMAL				
	PRIVATE PRO	L	tville Police Department	05213	2 - UNSOLVED		99 - UNKNOWN					
COUNTY* LOCAL	1 - CiTY	CATION: CITY, VILL		CRASH DATE / TIME* CRASH SEVERITY								
52 3	2 - VILLAGE MC	ontville (Town	09/08/2021 02:13 3 2 - SERIOUS INJURY									
ROUTE TYPE RO		- NORTH LOCA 2 - SOUTH	ROAD TYPE	LATITUDE DECIMAL DEGREES SUSPECTED 3 - MINOR INJURY								
SR	57 13	B - EAST L - WEST			41.108986 3 - MINOR INDURY SUSPECTED							
ROUTE TYPE RO	JTE NUMBER PREFIX 1	I - NORTH REFE	RENCE ROAD NAME (ROAD, N	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE 0	ECIMAL DEGREES	4 - INJURY POSSIBLE				
FEREN	, ,3	S - SOUTH 608	30			-81.838	5 - PROPERTY DAMAGE ONLY					
REFERENCE POIL		- WEST	ROUTE TYPE	ROAD TYPE	umanyos (Arrista		INTERSECTIO	N RELATED				
1 - INTERSECT	FROM REFERENCE	CE .	RSTATE ROUTE (TP) AL -	Y RD - ROAD	WITHIN INTE	RSECTION OR ON						
3 2 - MILE POST		JTH LUC FEED	SQ - SQUARE F ST - STREET									
3 - HOUSE #	4 - WES	ST SR - STAT	TE - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES								
DISTANCE FROM REFERENCE			TL - TRAIL	ROADWAY								
1 - MILES 1 - MILES 1 - MILES 1 - PI - PIKE WA - WAY HE - HEIGHTS PL - PLACE ROADWAY DIVIDED												
LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT DIRECTION OF TRAVEL MEDIAN TYPE												
1 - ON RO		ROSSOVER	1 - NOT	COLLISION 4 - REAR-TO-REA		1 - NORTH		DIVIDED FLUSH MEDIAN				
2 2-ON SI 3-IN ME		DRIVEWAY/ALLEY RAILWAY GRADE	I —	MOTOR		2 - SOUTH 3 - EAST	(<4 FEET)				
4 - ON RC	DADSIDE 12 - S	SHARED USE PAT	HS OR VEHIC	CLES IN 6 - ANGLE SPORT 7 - SIDESWIPE, SA	ME DIRECTION	4 - WEST		DIVIDED FLUSH MEDIAN ≥4 FEET)				
5 - ON GO		FRAILS BIKE LANE	POSITE DIRECTION			DIVIDED, DEPRESSED MEDIAN DIVIDED, RAISED MEDIAN						
7 - ON R4		TOLL BOOTH	NWON		U	ANY TYPE)						
8 - OFF RA	AMP 99 - 0	OTHER / UNKNO	WN				9-0	OTHER / UNKNOWN				
WORK ZONE RE	LATED	W	ORK ZONE TYPE	LOCATION OF CRASH II	WORK ZONE	CONTOUR	CONDITIO					
WORKERS PRES	ENT		E CLOSURE	1 - BEFORE THE 15		2	🗓	2				
LAW ENFORCEM	MENT PRESENT		e shift/ crossover RK on shoulder	2 - ADVANCE WAI	NING AREA	1 - STRAIGHT LEVEL	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,				
			MEDIAN	3 - TRANSITION A 4 - ACTIVITY AREA	REA	2 - STRAIGHT	3 - SNOW	BITUMINOUS,				
ACTIVE SCHOO	L ZONE	4 - INTE 5 - OTH	RMITTENT OR MOVING WORK	5 - TERMINATION	AREA	GRADE 3 - CURVE LEVEL	4 - ICE 5 - SAND, MUD	ASPHALT 3 - BRICK/BLOCK				
		3-0IR		NICATURE .		4 - CURVE GRADE	OIL, GRAVE	4 - SLAG , GRAVEL,				
1 - DAYLIG	GHT CONDITION SHT		1 ~ CLEAR	WEATHER 6 - SNOW	9 - OTHER	6 - WATER (STA MOVING)	ANDING, STONE 5 - DIRT					
4 2-DAWN		l ,	2 1 2 - CLOUDY	7 - SEVERE CROSSWINDS	JUNKNOWN	7 - SLUSH	9 - OTHER					
	- LIGHTED ROADWAY - ROADWAY NOT LIGHT	LED ,	3 - FOG, SMOG, SMOKE 4 - RAIN	8 - BLOWING SAND, SOIL, DI 9 - FREEZING RAIN OR FREEZ	•		9 - OTHER / UN	IKNOWN / UNKNOWN				
5 - DARK	- UNKNOWN ROADWA	y lighting	5 - SLEET, HAIL	99 - OTHER / UNKNOWN								
9 - OTHER	/ UNKNOWN				, .							
NARRATIVE						, mil						
			n Wadsworth Road, swerv I struck the mailbox at 608		, 1	\ \						
Wadsworth Roa	d, and came to fina	l rest in a ditcl	h. Unit 1 sustained disabli	ng	\ \	\ \						
damage and wa	s towed by Action	Towing. The d	river of Unit 1 complained	l of pain	The second second							
	ly and was transpor for reasonable con		a Hospital by Medina LST.	ine	6062							
diver was cited	tor reasonable corr			}	000							
				, and the second	, 3							
				ĺ		denotation	A					
						Road 1	W					
					e de deservation de la constitución	e0e0 / /		Not To Scale				
							18/					
					gan e de nomen e	\	111 "					
							-					
CRASH REPORTED DATE / TIME		DISP	ATCH DATE / TIME	ARRIVAL DATE / T	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY					
09/08/2	.021 02:13	09/	08/2021 02:14	09/08/2021 02	15	09/08/202	1 02:55	POLICE AGENCY				
TOTAL TIME	OTHER	TOTAL	OFFICER'S NAME*		R'S NAME	MOTORIST						
ROADWAY CLOSED INVESTIGATION TIME MINUTES Kawalek, Andrew					Searle, Cory Supplement (CORRECTION OR ADDIT)							
0	0	41	OFFICER'S BAD		CHECKED BY	BY OFFICER'S BADGE NUMBER* TO AN EXISTING REPORT SENT						
ا ۲	U	1 "'	161	3		1605	5013)					



LOCAL REPORT NUMBER

21-49018

	OWNER NAME: LAST FIRST MIDDLE (SAME AS DRIVER) OWNER PHONE::NCLUDE AREA CODE (SAME AS DRIVER)						DAMAGE						
UNIT # OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)				OWNER	R PHONE:INCLUDE AR	EA CODE (LL SAME AS DRIVER)	DAMAGE SCALE						
	ARNOLD, BRIAN, C						1 - NONE 3 - FUNCTIONAL DA						
4	DDRESS: STREET, CITY, STATE, 2						4 2 - MINOR DAMAGE 4 - DISABLING DAMA						
171 HIG	H POINT DR, MEDINA	A, OH, 44256		T			9 - UNKNOWN						
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP					MMERCIAL CARRIER PH	ONE: INCLUDE AREA CODE							
							DAMAGED AREA(S) INDICATE ALL THAT APPLY						
LP STATE	LICENSE PLATE #	VE	HICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	INL	DICATE ALL THAT AFFET					
ОН	DSN29	JH	I2PC40478M102696		2008	HONDA	12						
INSURA	INCHIDANCE COMPA	NY	INSURANCE POLICY #		COLOR	VEHICLE MODEL	11 12	" (1)					
VERIFIED			947323357		BLU	CBR1000A2/SUPERSP	10 / 11 /	2 10 11 1 2					
	TYPE OF USE		US DOT#	Tow	ED BY: COMPANY N	IAME	10 2 =						
СОММЕЯ		IN EMERGENCY		ACT	ION TOWING		9 9 3	3 9 9 3					
<u> </u>		RESPONSE	VEHICLE WEIGHT GVWR/GCW	R		S MATERIAL	[
DEVICE	HIT/SKIP UNIT	# OCCUPANTS	1 - ≤10K LBS.		ATERIAL CLAS	SS# PLACARD ID#	0 7 5	4 8 7 5 4					
EQUIPPE			2 - 10,001 - 26K LBS. 3 - > 26K LBS.		LACARD [7 6	12 7 6					
	4 DASCENCED CAR 6 VA	N (9-15 SEATS)		HMO (HVE	RY VEHICLE) 23 -	PEDESTRIAN/SKATER	6	11 6					
		OTORCYCLE 2-WHEELE			···	WHEELCHAIR (ANY TYPE)	10 /	12 2 2					
	(MINIVAN) 8 - MI	OTORCYCLE 3-WHEELE	TO AL STRICTS LINET	OTHER VEH		OTHER NON-MOTORIST	1						
UNIT TYPE	ACTUAL F	JTOCYCLE		HEAVY EQU	JIPMENT 26 -	BICYCLE	9	9 3 3					
	VETICEE 10 - N	IOPED OR MOTORIZED ICYCLE	16 FARM COLURNENT 22-			TRAIN	· _						
	- TICK OF	ILL TERRAIN VEHICLE	17 - MOTORHOME	ANIMAL-DI	RAWN VEHICLE 99.	UNKNOWN OR HIT/SKIP	\و	7 7 3 4					
u , ,	(ATV,		77 MOTORITORIE				J	6					
<u> </u>	# OF TRAILING UNITS		<u></u>				11 12 1	7 6 11 12					
=	WAS VEHICLE OPERATING IN A		0 - NO AUTOMATION	3 - CONDIT	IONAL AUTOMATION	9 - UNKNOWN	12	12					
<u> ч</u>	MODE WHEN CRASH OCCURRE	D? O	`		JTOMATION		10/ `	2 10/ \ 11 1 / \ 2					
1 2 1	1-YES 2-NO 9-OTHER/U	LINVAIONAL ALITONO	OMOUS 2 - PARTIAL AUTOMATION				<u>16</u> 16 2 -						
	, 113 2-NO 9-OIRCK/C	MODE		. , , , , , , , , , , , , , , , , , , ,			9 3] ⁹ ⁹ ³ ³					
	1 - NONE	6 - BUS - CHARTER	/TOUR 11 - FIRE	16 - F/	ARM	21 - MAIL CARRIER		7. THAN 7.					
. 1 .	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - M	IOWING	99 - OTHER / UNKNOWN		8 \					
L '	3 - ELECTRONIC RIDE	8 - BUS - SHUTTLE	13 - POLICE		NOW REMOVAL		7	7 5					
SPECIAL	SHARING 4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY		OWING		6	6					
FUNCTION	5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUI		AFETY SERVICE ATROL			12 12 12					
							13						
1 1 4	1 - NO CARGO BODY TYPE / NOT APPLICABLE	4 - LOGGING 5 - INTERMODAL	7 - GRAIN/CHIPS/GRAVEL	11 - D		99 - OTHER / UNKNOWN	12						
CARGO	2 - BUS	CONTAINER CHA	8 - POLE ASSIS 9 - CARGO TANK		ONCRETE MIXER UTO TRANSPORTER		, R A R.	9 49 3 9 7 3 9 60 3					
BODY	3 - VEHICLE TOWING	6 - CARGOVAN	10 CLAT DED		ARBAGE/REFUSE		Γ ,(Λ ∨ ⊃),						
TYPE	ANOTHER MOTOR VEHICLE	/ENCLOSED BOX	(10 1541 565				90	T					
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MC	TOR TROUBLE	99 - OTHER / UNKNOWN	6						
L L	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT		SABLED FROM PRIOR			6 6 6					
VEHICLE DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	A	CIDENT								
BEILEGIS							∐- NO DAMA	GE [0] XI- UNDERCARRIAGE [14]					
	1 - INTERSECTION -	4 - MIDBLOCK -	7 - SHOULDER/ROADSIDE		RIVEWAY ACCESS	99 - OTHER / UNKNOWN	□-тор[13]	☐- ALL AREAS [15]					
NON-	MARKED CROSSWALK 2 - INTERSECTION -	MARKED CROSS 5 - TRAVEL LANE -	8 - SIDEWALK		łared USE Paths R trails			E- ALL ARLAS [15]					
MOTORIST	UNMARKED CROSSWALK	OTHER LOCATION	ON 9 - MEDIAN/CROSSING ISLAND	12 - F1	RST RESPONDER			- UNIT NOT AT SCENE [16]					
LOCATION	3 - INTERSECTION - OTHER	6 - BICYCLE LANE			INCIDENT SCENE								
	1 - NON-CONTACT	1 - STRAIGHT AHEAI 2 - BACKING	D 9 - LEAVING TRAFFIC LANE		ALKING, RUNNING, OGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE	INITI	AL POINT OF CONTACT					
_	2 - NON-COLLISION	2 - BACKING 3 - CHANGING LANI			ORKING	99 - OTHER / UNKNOWN	0 - NO DA	MAGE 14 - UNDERCARRIAGE					
3	3 - STRIKING 4- OVERTAKING/PASSING 11 - SLOWING OR STOPPED 17 - PUSHING VEHICLE 17 - 1-12 - REFER TO UNIT 15 - VEHICLE NOT A												
ACTION	ION 4 STRUCK PRE-CRASH 5 MAKING RIGHT TURN IN TRAFFIC 18 - APPROACHING OR DIAGRAM												
	5 - BOTH STRIKING	6 - MAKING LEFT TU 7 - MAKING U-TURN			AVING VEHICLE		13 - TOP						
	& STRUCK	8 - ENTERING TRAF			THER NON-MOTORIST	Г							
	9 - OTHER / UNKNOWN	LANE	SPECIFIED LOCATION					TRAFFIC					
	1 - NONE		O CLOSE 13 - IMPROPER START FROM		PERATING DEFECTIVE UIPMENT	23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL					
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	/ACDA 9 - IMPROPER LANE	A PARKED POSITION 14 - STOPPED OR PARKED		UIPMENT AD SHIFTING	99 - OTHER IMPROPER	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN					
ı 15 ı	4 - RAN STOP SIGN	CHANGE	ILLEGALLY		ALLING/SPILLING	ACTION	2 - TWO-WAY	6 2-SIGNAL 5-YIELD SIGN					
	5 - UNSAFE SPEED	10 - IMPROPER PASS			PROPER CROSSING			3 - FLASHER 6 - NO CONTROL					
CONTRIBUTING CIRCUMSTAN	IG 6 - IMPROPER TURN CES 7 - LEFT OF CENTER	11 - DROVE OFF RO			ING IN ROADWAY OT DISCERNIBLE		# of THROUGH LANES	RAIL GRADE CROSSING					
^ ··· ·	7 - LEFT OF CENTER	12 - IMPROPER BAC	MING 17 - VISION OBSTRUCTION	22 - 140	O DISCENSIBLE		ON ROAD	1 - NOT INVLOVED					
SEOUFNCE	OF EVENTS							2 - INVOLVED-ACTIVE CROSSING					
			EVENTS				[2]	3 - INVOLVED-PASSIVE CROSSING					
₁₁ 18	1 - OVERTURN/ROLLOVER	7 - SEPARATION OF L	JNITS 12 - DOWNHILL RUNAWAY			23 - STRUCK BY FALLING, SHIFTING CARGO OR							
1 _ 10	J 2 - FIRE/EXPLOSION 3 - IMMERSION	8 - RAN OFF ROAD RI 9 - RAN OFF ROAD LE			OTOR VEHICLE IN ANSPORT	ANYTHING CARGO OR	UNIT / N	ION-MOTORIST DIRECTION					
8	4 - JACKKNIFE	10 - CROSS MEDIAN	15 - PEDALCYCLE		ARKED MOTOR	MOTION BY A MOTOR		1 - NORTH 5 - NORTHEAST					
2	5 - CARGO / EQUIPMENT	11 - CROSS CENTERLI	INE - 16 - RAILWAY VEHICLE		HICLE	VEHICLE 24 - OTHER MOVABLE		2 - SOUTH 6 - NORTHWEST					
	LOSS OR SHIFT	OPPOSITE DIRECT			ORK ZONE AINTENANCE	OBJECT	, , ,	1 3 - EAST 7 - SOUTHEAST					
. ₃ <u>L 4 /</u>	6 - EQUIPMENT FAILURE		18 - ANIMAL - DEER		UIPMENT		FROM 2 TO	4 - WEST 8 - SOUTHWEST					
	19. Ac. 30 (193)		OLLISION WITH FIXED OBJECT			es y lasks		9 - OTHER / UNKNOWN					
41 44	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END 32 - PORTABLE BARRI		45 - EN 46 - FE		52 - BUILDING 53 - TUNNEL	UNIT SPEED	DETECTED SPEED					
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE E	BARRIER SUPPORT	47 - M	AILBOX	54 - OTHER FIXED	UNKI SPEED	DETECTED SPRED					
51	STRUCTURE	34 - MEDIAN GUARDI		48 - TR 49 - FII		OBJECT 99 - OTHER / UNKNOWN	ı 35 ı	1 - STATED / ESTIMATED SPEED					
J	J 27 - BRIDGE PIER OR ABUTMENT	BARRIER 35 - MEDIAN CONCR	41 - OTHER POST, POLE OR SUPPORT	50 - W	ORK ZONE	on on one							
_ 1	28 - BRIDGE PARAPET	BARRIER	42 - CULVERT		AINTENANCE QUIPMENT			1 2-CALCULATED/EDR					
6	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER 37 - TRAFFIC SIGN PC		51 - W			POSTED SPEED						
_				**	=		ı 45 ı	3 - UNDETERMINED					
2	FIRST HARMFUL EVEN	п [4]	MOST HARMFUL EVENT				45						

OND DEPARTMENT MOTORIST / NON-MOTORIST									LOCAL REPORT NUMBER								
UNIT #	TAIOTOKIST / TAOIN-TAIOTOKIST								-	21-49018 DATE OF BIRTH AGE GENDER							
1	NAME: LAST, FIRST, MIDDLE APPLICIT OF RELAN C							05/23/1977					44	l			
ADDRESS	ARNOLD, BRIAN, C STREET, CITY, STATE, ZIP								05/23/1977 44 M CONTACT PHONE - INCLUDE AREA CODE								
171 HIG	H POINT E	R, MEDINA, OH, 44256															
INJURIES	TAUEN .					AKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED				SEATING AND DOT-COMPLIANT POSITION				EJECTIO	N TRAPPED		
100 3	MEDINA LST			LST				8	Шмс	HELMET	1		5 3 1				
171 HIG INJURIES 3 OL STATE OH	OPERATOR	LICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL OF			OFFENSE DESCR	SCRIPTION			CITA	TATION NUMBER				
OH				· · · · · · · · · · · · · · · · · · ·				OPERATING VEHICLE WITHOUT REAS					Y41645				
OL CLASS	ENDORSEME	ENDORSEMENT RESTRICTION SELECT UP TO 3			DRIVER ALCOHOL / DRUG SUSPECT			CONDITION	ALCOHOL TEST STATUS TYPE VALUE			STATUS	TYPE	RESULTS	SELECT UP TO 4		
4	м		BY 1	1 OTHER DRUG			1	1	1		1	1		Jacker of 104			
UNIT #	NAME: LAS	T, FIRST, MIDDLE	- 1-								DATE OF BIRTH			AGE	GENDER		
ADDRESS:	STREET, CITY,	STATE, ZIP					-		CONT	ACT PHO	ONE - INCLUDE	AREA CODE					
INJURIES	INJURED EMS AGENCY (NAME) TAKEN BY			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY			TTY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT POSITION MC HELMET			AIR BA	AIR BAG USAGE EJECTION		N TRAPPED		
ADDRESS: INJURIES OL STATE	OPERATOR	LICENSE NUMBER	OFFENSE CHARGED LOCAL CODE					IPTION	CITA	CITATION NUMBER							
OL CLASS	ENDORSEME	NT RESTRICTION SELECT UP TO 3	E	DRIVER	ALCO	HOL / DRUG SUSPE		CONDITION	А	LCOHO	L TEST		DRUG	TEST(S)		
				DISTRACTED BY			ANA		STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4		
	NAME IAC	F FIRST A HODIE			Полня	ER DRUG		<u></u>	<u> </u>	<u> </u>	ATE OF BIRTH	<u>l</u>	<u> </u>	AGE	GENDER		
UNIT #	NAME: LAS	r, first, middle									ATE OF BIRTH			AGE	GENDER		
ADDRESS:	STREET, CITY,	STATE, ZIP							CONT	ACT PHO	NE - INCLUDE	AREA CODE					
인	INJURED TAKEN BY	AKEN			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPM USED			SAFETY EQUIPMENT USED	DOT-COMPLIANT POSITION AIR			AIR BA	AIR BAG USAGE EJECTION TRAPPED				
OL STATE	OPERATOR	PERATOR LICENSE NUMBER			OFFENSE CHARGED LOCAL CODE					PTION				CITATION NUMBER			
OL CLASS	ENDORSEME				VER ALCOHOL / DRUG SUSPECTED ALCOHOL MARUUANA OTHER DRUG			CONDITION	A	TYPE	VALUE	STATUS	DRUG TYPE	TEST(SELECT UP TO 4		
INJU	JRIES	SEATING POSITION		AIR BAG	G	OL CLAS	s	OL RESTRIC	TION(S) DRI	VER DISTRA	CTION	I	EST STA	ATUS		
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 1 - POSSIBLE INJURY 5 - NO APPARENT INJURY 1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN 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 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC) 10 - REFLECTIVE (LOTHING 11 - LIGHTING - PEDESTRIAN		9 - THIRD - MIDDLE 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 112 - DASSENGER IN	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT 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		1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLAS: (OHIO = D) 5 - M/C MOPED OI 6 - NO VALID OL OL ENDORSE H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOO R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIP TRAILERS X - TANKER / HAZN GENDE: F - FEMALE M - MALE U - OTHER / UNKN	MENT FER LE	11 - ALCOHOL INTER DEVICE 2 - CDL INTRASTAT 3 - CORRECTIVE LEI 4 - FARM WAIVER 5 - EXCEPT CLASS A & CLASS B BUS 7 - EXCEPT TRACTO B - INTERMEDIATE RESTRICTIONS 9 - LEARNER'S PER RESTRICTIONS 10 - LIMITED TO DA 11 - LIMITED TO DA 12 - LIMITED TO DA 13 - MECHANICAL (SPECIAL BRAK) CONTROLS, OR ADAPTIVE DEV 14 - MILITARY VEHI 15 - MOTOR VEHI 16 - OUTSIDE MIRR 17 - PROSTHETIC A 18 - OTHER	E ONLY SES R-TRAILER LICENSE MIT YLIGHT IPLOYMEN ER SES, HAND OTHER CES) CLES ONLY ES SRAKES OR	ELE CCC	ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALINIC) 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 CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL IE.G., DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL 9 - OTHER / UNKNOWN			1 - MONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN ALCOHOL TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER DRUG TEST TYPE 1 - MONE 2 - BLOOD 3 - URINE 4 - OTHER DRUG TEST TYPE 1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINIOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS				