OHIO DEPARTE	TRAFFIC (	LOCAL REPORT NUMBER *										
X PHOTOS TAKE		OH-3 LOC		21-55786								
SECONDARY	RASH OH-1P	OTHER REPO	DRTING AGENCY NAME *		NCIC *	HIT/SKIP NUMBER OF UNITS UNIT IN ERROF						
	PRIVATE PR	OPERTY Mor	ntville Police Department		2 - UNSOLVED	2						
COUNTY* LOCA	1 - CHY	CATION: CITY. VILI		CRASH DATE / TIME* CRASH SEVERITY								
52 3	2 - VILLAGE M. 3 - TOWNSHIP	ontville (Towr	10/17/2021	2 - SERIOUS INJURY								
ROUTE TYPE RO		1 - NORTH LOC 2 - SOUTH	ROAD TYPE	LATITUDE DECIMAL DEGREES SUSPECTED  3 - MINOR INJU								
SR		3 - EAST 4 - WEST					41.1355	SUSPECTED				
ROUTE TYPE RO		1 - NORTH REF	ERENCE ROAD NAME (ROAD,	MILEPOST, HO	USE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE			
REFER	I		50 Medina Rd			-81.789	330	ONLY				
REFERENCE POI	FROM KEFEKEN	N ICE	ROUTE TYPE	503 DAN 1670	ROAD TYPE	801.70851.00	INTERSECTION RELATED					
1 - INTERSEC	1 - NC		NOTATE NOOTE (11)	- ALLEY ' - AVENUE	HW - HIGHWAY	rd - road SQ - square	WITHIN INTERSECTION OR ON APPROACH					
3 - HOUSE #	3 - EA: 4 - WE	ST US - FEDI			MP - MILEPOST		WITHIN INTER	CHANGE AREA	NUMBER OF APPROACHES			
DISTANCE FROM REFERENCE	DISTANCI UNIT OF MEASU		(1984) (1984) (1984) (1984) (1984) (1984) (1984) (1984)	- CIRCLE - COURT	OV - OVAL PK - PARKWAY	TE - TERRACE TL - TRAIL		ROAD	WAY			
, ,,,,,,,	1 - MI	LES	DR	- DRIVE - HEIGHTS	PI - PIKE PL - PLACE	WA - WAY	ROADWAY D	IVIDED				
50.00	L 3 - YA	RDS ROU	ITE .	- HEIGHTO	TE TEACE							
1 - ON R	CATION OF FIRST HARI DADWAY 9 - C	MFUL EVENT PROSSOVER			H COLLISION/IN - REAR-TO-REAR		DIRECTION OF TRAV		MEDIAN TYPE			
1 2-ON S		DRIVEWAY/ALLEY	ACCESS   2   BETV		- BACKING		1 - NORTH 3 2 - SOUTH	.4. (	VIVIDED FLUSH MEDIAN <4 FEET )			
4 - ON R		SHARED USE PAT	'HS OR VEHI	ICLES IN	- ANGLE - SIDESWIPE, SAN	IF DIRECTION	3 - EAST 4 - WEST		2 - DIVIDED FLUSH MEDIAN ( ≥4 FEET )			
5 - ON G	DRE DE TRAFFIC WAY 13 -	TRAILS BIKE   ANE	1 IRAN 2 - REA	NOPONI	- SIDESWIPE, OPP			1	IVIDED, DEPRESSED MEDIAN			
7 - ON R	AMP 14 -	TOLL BOOTH	3 - HEA	D-ON 9	- OTHER / UNKN	OWN		(A	IVIDED, RAISED MEDIAN NY TYPE)			
8 - OFF R	AMP 99 -	OTHER / UNKNO	wn	<del> </del>					THER / UNKNOWN			
WORK ZONE RI	ELATED		ORK ZONE TYPE E CLOSURE		N OF CRASH IN BEFORE THE 1ST		CONTOUR	CONDITIO	l l			
WORKERS PRES	SENT		E SHIFT/ CROSSOVER		WARNING SIGN		2	1 227	2			
LAW ENFORCE	MENT PRESENT	1 1	RK ON SHOULDER	ADVANCE WARE TRANSITION AF		1 ~ Straight Level	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,				
			MEDIAN ERMITTENT OR MOVING WORK		ACTIVITY AREA		2 - STRAIGHT GRADE	3 - SNOW 4 - ICE	BITUMINOUS, ASPHALT			
ACTIVE SCHOO	L ZONE	5 - OTH	IER .	5 -	TERMINATION A	REA	3 - CURVE LEVEL	5 - SAND, MUD	, <sub>DIRT,</sub> 3 - BRICK/BLOCK			
1	IGHT CONDITION			WEATHER 6 - SNOW			4 - CURVE GRADE 9 - OTHER	OIL, GRAVEI 6 - WATER (STA				
1 - DAYLI 1 - DAWN			1 - CLEAR 2 , 2 - CLOUDY	OSSWINDS		/UNKNOWN	MOVING) 7 - SLUSH	5 - DIRT 9 - OTHER				
3 - DARK	- LIGHTED ROADWAY		3 - FOG, SMOG, SMOKE	8 - BLOWING	SAND, SOIL, DIR			9 - OTHER / UN				
	- Roadway Not Ligh' - Unknown Roadwa	1	4 - RAIN 5 - SLEET, HAIL	rain or Freezii Unknown	NG DRIZZLE							
9 - OTHE	R / UNKNOWN		,	•								
NARRATIVE												
			ond eastbound lane from signalled a turn and was s									
1	,		so. Unit #2 was also eastb						»   <b>*</b>			
			he south side of the roady	· 1	-							
		_	nd Unit #1 and also signa urned her attention to the					<u> </u>				
			ithout any child restraint)									
			she struck it from behind. Ised him to lunge forward									
			sport to Medina Hospital					8	<u>&amp;</u>			
	e anver of Unit #2 v 1 required recovery		CDA and failure to use a ced by Bears.	cniia		#2 #1						
			·									
									7			
2884 2850           Mot To Sca									Not To Scale			
					'	1 1	1					
									_			
1	TED DATE / TIME	i	ATCH DATE / TIME		IVAL DATE / TIN		SCENE CLEARED D		REPORT TAKEN BY  POLICE AGENCY			
10/17/2	:021 14:05	10/	17/2021 14:07	10/	17/2021 14:1	9	10/17/2021	15:40	MOTORIST			
TOTAL TIME	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*			CHECKED BY OFFICER'S NAME*						
	, LO,, OANION INVE	MINUTES	Hazek, Daniel  OFFICER'S BAD	GE NUMBER*		larrison, Brett	(CORRECTION					
		93	160		1606 /68 6				TO AN EXISTING REPORT SENT TO ODPS)			



## LOCAL REPORT NUMBER

21-55786

UNIT # OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER)						D DUONE		D A M A G E						
			ORIVER)		CANINE	K PHONE:INCLUDE AF	REA CODE ( SAME AS DRIVER)	DAMAGE SCALE						
	QUARTERMAN, OCTA D <b>DRESS:</b> STREET, C1TY, STATE, Z		n	· · · · ·			<u> </u>	1 - NONE 3 - FUNCTIONAL DAMAGE						
	RBERICH AVE., AKRO							4 2 - MINOR D	AMAGE	4 - DISABLING DAMAGE				
	IAL CARRIER: NAME, ADDRES		<u>.                                    </u>	I		OMMERCIAL CARRIER PH	ONE: INCLUDE AREA CODE	1	9 - UNKNOV	WN				
		-,,,						DAMAGED AREA(S)						
I P STATE	LICENSE PLATE #	I v	EHICLE I	DENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	INI	DICATE ALL TH	IAT APPLY				
	HUS4090			AE1HU373652		2017	HYUNDAI	42		49				
				SURANCE POLICY #		COLOR	VEHICLE MODEL	""		11 1				
INSURA	PROGRESSIVE		6024	10329		WHI	ACCENT	10	\2	10				
	TYPE OF USE		Γ'	US DOT#	,	VED BY: COMPANY N	IAME	10 2 =	7	16 2 2				
СОММЕ	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	[ ∟		_	ARS TOWING	<del> </del>	9 9 3	3	9 3 3				
INTERLO	OCK	# OCCUPANTS	VEHICL	E WEIGHT GVWR/GCWR	1	HAZARDOU MATERIAL CLAS	S MATERIAL SS # PLACARD ID #							
DEVICE	HIT/SKIP UNIT		,	1 - ≤10K LBS. 2 - 10.001 - 26K LBS.	IJ	RELEASED								
EQUIPE				3 - > 26K LBS.	_=	PLACARD			11 12	1 6				
		NN (9-15 SEATS) OTORCYCLE 2-WHEE				•	PEDESTRIAN/SKATER		12	$\mathbb{D}_{\lambda}$				
<u>[</u> 1	(MINIVAN) 8 - MC	OTORCYCLE 3-WHEE		CINCLEUNIT	US (16+ THER VE	· · · · · · · · · · · · · · · · · · ·	WHEELCHAIR (ANY TYPE) OTHER NON-MOTORIST	l 10/	1118	1 1				
UNIT TYPE	1 15 1 1 5 1 5	JTOCYCLE	16	TRUCK			BICYCLE	7 و	9 8	<sup>2</sup> / <sub>3</sub>				
	10 - M	MOPED OR MOTORIZI ICYCLE	LD				TRAIN	<u> </u>	8	∄ <b>⊿</b> ″				
		LL TERRAIN VEHICLE		- MOTORHOME	NIMAL-E	PRAWN VEHICLE 99 -	UNKNOWN OR HIT/SKIP	/8	シ回副	5 4				
<b>3</b> 1 1	# of TRAILING UNITS	(UTV)						12	700					
<u> </u>	WAS VEHICLE OPERATING IN AL	ITOMOMOUS							6	" "				
	MODE WHEN CRASH OCCURRE		Λ.			TIONAL AUTOMATION	9 - UNKNOWN	10	\ <sup>2</sup>	10 11 2				
2 .						UTOMATION		10 2 -	7	10 2				
	1 - YES 2 - NO 9 - OTHER / U		NOMOUS 2 E LEVEL	2 - PARTIAL AUTOMATION 5	FULL A	DTOMATION		9 3	3	9 3 3				
	1 - NONE	6 - BUS - CHARTE		11 - FIRE	16 - F	ARM	21 - MAIL CARRIER	<del> </del>	7					
. 1 .	2 - TAXI	7 - BUS - INTERCIT		12 - MILITARY	17 - ř	MOWING	99 - OTHER / UNKNOWN		4	$B \bigvee \frac{7}{5} \frac{5}{5} \bigvee 4$				
	3 - ELECTRONIC RIDE	8 - BUS - SHUTTLE	Ē	13 - POLICE		NOW REMOVAL		7 5		7				
SPECIAL	SHARING 4 - SCHOOL TRANSPORT	9 - BUS - OTHER 10 - AMBULANCE		14 - PUBLIC UTILITY  15 - CONSTRUCTION EQUIP.		OWING AFETY SERVICE		•		6				
TONCHON	5 - BUS - TRANSIT/COMMUTER	10 - AMBOLANCE		13 - CONSTRUCTION EQUIF.		ATROL			12	12 12				
	1 - NO CARGO BODY TYPE	4 - LOGGING		7 - GRAIN/CHIPS/GRAVEL	11 - E	DUMP	99 - OTHER / UNKNOWN	12	1					
	/ NOT APPLICABLE	5 - INTERMODAL		8 - POLE	12 - 0	CONCRETE MIXER		. 11 .	<b>∕</b> ₹\					
CARGO	2 - BUS 3 - VEHICLE TOWING	CONTAINER CH 6 - CARGOVAN	HASSIS	9 - CARGO TANK		AUTO TRANSPORTER		9 ( ) 3	9 🚜 🦰 3	9 📆 3 9 🌉 3				
BODY TYPE	ANOTHER MOTOR VEHICLE	/ENCLOSED BO	οx	10 - FLAT BED	14 - 0	SARBAGE/REFUSE			•	0				
	1 - TURN SIGNALS	4 - BRAKES		7 - WORN OR SLICK TIRES	9 - M	OTOR TROUBLE	99 - OTHER / UNKNOWN	6						
VEHICLE	2 - HEAD LAMPS	5 - STEERING		8 - TRAILER EQUIPMENT		DISABLED FROM PRIOR			6	6 6				
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	r	DEFECTIVE	A	CCIDENT		☐- NO DAMA	CE LOI	X - UNDERCARRIAGE [ 14 ]				
	4 INTERCECTION	4 - MIDBLOCK -		7 CHOULDED TO ADCIDE	10 "	DRIVEWAY ACCESS	99 - OTHER / UNKNOWN	∐- NO DAMA	GE[U]	IAI- UNDERCARRIAGE [ 14 ]				
1 1	1 - INTERSECTION - MARKED CROSSWALK	MARKED CRO	SSWALK	7 - SHOULDER/ROADSIDE 8 - SIDEWALK		HARED USE PATHS	99 - OTHER / DINKINOWIN	☐- <b>TOP</b> [13]		- ALL AREAS [ 15 ]				
NON- MOTORIST	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE - OTHER LOCAT		9 - MEDIAN/CROSSING		R TRAILS IRST RESPONDER			LIMIT NOT	AT SCENE [ 16 ]				
LOCATION	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	IION	ISLAND		T INCIDENT SCENE	:	. L	- UNIT NOT	AT SCENE [ 10 ]				
	1 - NON-CONTACT	1 - STRAIGHT AHE	AD	9 - LEAVING TRAFFIC		VALKING, RUNNING,	21 - STANDING OUTSIDE	INITI	AL POINT OF	CONTACT				
	2 - NON-COLLISION	2 - BACKING , 3 - CHANGING LAI	NES	LANE 10 - PARKED		ogging, Playing Vorking	DISABLED VEHICLE  99 - OTHER / UNKNOWN	0 - NO DA	MAGE	14 - UNDERCARRIAGE				
ı 4 ı	3-STRIKING 3	4 - OVERTAKING/P		11 - SLOWING OR STOPPED		USHING VEHICLE	33 Official official	1 6 1 1-12 - REF	ER TO UNIT	15 - VEHICLE NOT AT SCENE				
ACTION	PRE-CRASH	5 - MAKING RIGHT 6 - MAKING LEFT T		IN TRAFFIC		APPROACHING OR EAVING VEHICLE		DIA:	GRAM	99 - UNKNOWN				
	5 - BOTH STRIKING	7 - MAKING U-TUR		12 - DRIVERLESS 13 - NEGOTIATING A CURVE		TANDING		13 - TOP						
	& STRUCK	8 - ENTERING TRA	AFFIC	14 - ENTERING OR CROSSING	20 - C	THER NON-MOTORIST	Г		T.D.A.C.C					
	9 - OTHER / UNKNOWN 1 - NONE	B - FOLLOWING TO	OO CLOS#	SPECIFIED LOCATION  13 - IMPROPER START FROM	18 - 0	PERATING DEFECTIVE	23 - OPENING DOOR INTO	TOATTICINAVEIGUE	TRAFF					
	2 - FAILURE TO YIELD	/ACDA		A PARKED POSITION	EC	QUIPMENT	ROADWAY	TRAFFICWAY FLOW 1 - ONE-WAY		TRAFFIC CONTROL - ROUNDABOUT 4 - STOP SIGN				
	3 - RAN RED LIGHT	9 - IMPROPER LAN CHANGE	IE.	14 - STOPPED OR PARKED ILLEGALLY		OAD SHIFTING ALLING/SPILLING	99 - OTHER IMPROPER ACTION	2 - TWO-WAY	_ 2	- SIGNAL 5 - YIELD SIGN				
1	4 - RAN STOP SIGN 5 - UNSAFE SPEED	10 - IMPROPER PA	SSING	15 - SWERVING TO AVOID		PROPER CROSSING	7,0,10,1		. 6 .	- FLASHER 6 - NO CONTROL				
CONTRIBUTION	G & IMPRODED TUDN	11 - DROVE OFF R	OAD	16 - WRONG WAY		ING IN ROADWAY		# or TUPOUGUS STATE		UL CRADE CROSSING				
a	2ES 7 - LEFT OF CENTER	12 - IMPROPER BA	CKING	17 - VISION OBSTRUCTION	22 - N	OT DISCERNIBLE		# OF THROUGH LANES ON ROAD		NIL GRADE CROSSING NOT INVLOVED				
SEQUENCE	OF EVENTS							4		INVOLVED-ACTIVE CROSSING				
2		7 000404700	LINUTE	EVENTS	••	NIBAN OTUES	DO CTRILOU BU EXTURE	4		INVOLVED-PASSIVE CROSSING				
1 20	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	7 - SEPARATION OF 8 - RAN OFF ROAD		12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION		NIMAL -OTHER : IOTOR VEHICLE IN	23 - STRUCK BY FALLING, SHIFTING CARGO OR		1011 14525	er Dipreviou				
	3 - IMMERSION	9 - RAN OFF ROAD	LEFT	14 - PEDESTRIAN	TF	RANSPORT	ANYTHING SET IN MOTION BY A MOTOR	UNIT / N		IST DIRECTION				
2	4 - JACKKNIFE 5 - CARGO / EQUIPMENT	10 - CROSS MEDIAN 11 - CROSS CENTER		15 - PEDALCYCLE 16 - RAILWAY VEHICLE		ARKED MOTOR EHICLE	VEHICLE			NORTH 5 - NORTHEAST SOUTH 6 - NORTHWEST				
	LOSS OR SHIFT	OPPOSITE DIRE		17 - ANIMAL - FARM	22 - W	ORK ZONE	24 - OTHER MOVABLE OBJECT	_	a 3-E					
зІ	6 - EQUIPMENT FAILURE	OF TRAVEL		18 - ANIMAL - DEER		AINTENANCE QUIPMENT		FROM 4 TO	3 4-4					
T - L	• The second of			N WITH FIXED OBJECT - :	TRUCI	K				9 - OTHER / UNKNOWN				
4	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL EN 32 - PORTABLE BAR		38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES	45 - El 46 - Fi		52 - BUILDING 53 - TUNNEL	LIAUT COFFO	<del></del>	DETECTED COSES				
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE	BARRIER	SUPPORT	47 - N	IAILBOX :	54 - OTHER FIXED	UNIT SPEED		DETECTED SPEED				
5	STRUCTURE  27 - BRIDGE PIER OR	34 - MEDIAN GUARI BARRIER	DRAIL	40 - UTILITY POLE 41 - OTHER POST, POLE		RE HYDRANT	OBJECT 99 - OTHER / UNKNOWN	ı 40 ı		1 - STATED / ESTIMATED SPEED				
	ABUTMENT	35 - MEDIAN CONC	RETE	OR SUPPORT	50 - W	ORK ZONE AINTENANCE			4					
6 L	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 36 - MEDIAN OTHER	R BARRIER	42 - CULVERT 43 - CURB		QUIPMENT		POSTED SPEED		2 - CALCULATED / EDR				
		37 - TRAFFIC SIGN F		44 - DITCH	51 - W	/ALL			ĺ	3 - UNDETERMINED				
<u>[ 1</u>	FIRST HARMFUL EVEN	т <sub>(</sub> 1 <sub>і</sub>	MOST H	ARMFUL EVENT				40	1					
								1						



## LOCAL REPORT NUMBER

								21-55/86	
<u>د</u> 2	OWNER NAME: LAST, FIRST, EPPINGER, JEROME		ER)	OWNER	R PHONE:INCLUDE AR	EA CODE ( SAME AS DRIVER)		D A M A G E  DAMAGE SCALE	-
~	DDRESS: STREET, CITY, STATE, Z NNISON AVE., CLEVE		09				1 - NONE 1 - NONE 2 - MINOR DA	3 - FUNCTIONAL DAMAGE AMAGE 4 - DISABLING DAMAGE	
0	CIAL CARRIER: NAME, ADDRES			Col	MMERCIAL CARRIER PH	ONE: INCLUDE AREA CODE	<u> </u>	9 - UNKNOWN	_
LP STATE	LICENSE PLATE #	VEH	IICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE		DAMAGED AREA(S) DICATE ALL THAT APPLY	
ОН	HVY2719	1C3	CDFCA6DD710970		2013	DODGE		12 1	
UNSURA VERIFIE		NY	INSURANCE POLICY#		COLOR GRY	VEHICLE MODEL STRATUS	10 11 1	2 10 11 12	\ <sup>2</sup>
Псомме	TYPE OF USE  RCIAL GOVERNMENT	IN EMERGENCY	US DOT #	Tow	ED BY: COMPANY N	AME	9 10 2 -	3 9 9 3	7
INTERLO	оск —	# OCCUPANTS	EHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS.	J⊟∾	HAZARDOU MATERIAL CLAS				/,
EQUIPP	ED HIT/SKIP UNIT	2 l	2 - 10.001 - 26K LBS. 3 - > 26K LBS.		ELEASED LACARD [			12 7 6 5	
UNIT TYP	2 - PASSENGER VAN 7 - MG (MINIVAN) 8 - MG E 3 - SPORT UTILITY VEHICLE 10 - N 4 - PICK UP 8	IN (9-15 SEATS) OTORCYCLE 2-WHEELED OTORCYCLE 3-WHEELED JTOCYCLE AOPED OR MOTORIZED ICYCLE LLL TERRAIN VEHICLE AUTY)	13 - SNOWMOBILE 19 - B 14 - SINGLE UNIT 20 - C TRUCK 21 - F 15 - SEMI-TRACTOR 22 - A	IUS (16+ P. OTHER VEH HEAVY EQU INIMAL WI	ASSENGERS) 24 - IICLE 25 - JIPMENT 26 - ITH RIDER OR 27 -	PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE) OTHER NON-MOTORIST BICYCLE TRAIN UNKNOWN OR HIT/SKIP	9	11 12 1 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRE		0 - NO AUTOMATION 3	- CONDITI	ONAL AUTOMATION	9 - UNKNOWN	11 12	3 40 11 12	,
			MOUS 2 - PARTIAL AUTOMATION 5		TOMATION TOMATION		9 9 3	3 9 9 3	)
SPECIAL FUNCTION	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	6 - BUS - CHARTER/T 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	OUR 11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIP	18 - SN 19 - TC . 20 - SA	owing Now Removal	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	7 6 5	7 6 5 5 12 12 12	7.4
1 1 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	4 - LOGGING 5 - INTERMODAL	7 - GRAIN/CHIPS/GRAVEL 8 - POLE	11 - DL	JMP DNCRETE MIXER	99 - OTHER / UNKNOWN	12		
CARGO	2 - BUS 3 - VEHICLE TOWING	CONTAINER CHASE 6 - CARGOVAN		13 - AL	JTO TRANSPORTER ARBAGE/REFUSE		9 <b>W</b> 3 9 9	9 9 3 9 3 3	i
TYPE VEHICLE	ANOTHER MOTOR VEHICLE  1 - TURN SIGNALS  2 - HEAD LAMPS  3 - TAIL EAMPS	/ENCLOSED BOX 4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MO 10 - DI	TOR TROUBLE SABLED FROM PRIOR CIDENT	99 - OTHER / UNKNOWN	6		
DEFECTS							☐- NO DAMAG	GE [0]	
NON- MOTORIST LOCATION	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK 3 - INTERSECTION - OTHER	4 - MIDBLOCK - MARKED CROSSW 5 - TRAVEL LANE - OTHER LOCATION 6 - BICYCLE LANE	0 - SIDEWALK	11 - SH OR 12 - FIR	RIVEWAY ACCESS IARED USE PATHS I TRAILS RST RESPONDER INCIDENT SCENE	99 - OTHER / UNKNOWN	□- <b>тор</b> [13] □-	U- ALL AREAS [15] - UNIT NOT AT SCENE [16]	
	1 - NON-CONTACT	1 - STRAIGHT AHEAD 2 - BACKING	9 - LEAVING TRAFFIC LANE	15 - W		21 - STANDING OUTSIDE DISABLED VEHICLE	INITIA	AL POINT OF CONTACT	_
3 1	2 - NON-COLLISION 3 - STRIKING	3 - CHANGING LANES 4 - OVERTAKING/PASS	10 - PARKED	16 - W	ORKING ISHING VEHICLE	99 - OTHER / UNKNOWN	0 - NO DAN 1-12 - REFE	MAGE 14 - UNDERCARRIAGE ER TO UNIT 15 - VEHICLE NOT AT SCENE	
ACTION	4 - STRUCK PRE-CRASH ACTIONS	5 - MAKING RIGHT TU 6 - MAKING LEFT TUR!	RN IN TRAFFIC	18 - AP	PROACHING OR AVING VEHICLE		DIAG	GRAM 99 - UNKNOWN	
	5 - BOTH STRIKING & STRUCK	7 - MAKING U-TURN 8 - ENTERING TRAFFIC			ANDING 'HER NON-MOTORIST		13 - TOP		
	9 - OTHER / UNKNOWN 1 - NONE		SPECIFIED LOCATION  CLOSE 13 - IMPROPER START FROM			23 - OPENING DOOR INTO	TRAFFICWAY FLOW	TRAFFIC TRAFFIC CONTROL	
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	/ACDA 9 - IMPROPER LANE	A PARKED POSITION  14 - STOPPED OR PARKED	19 - LO	JIPMENT AD SHIFTING	ROADWAY  99 - OTHER IMPROPER	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN	
8	4 - RAN STOP SIGN 5 - UNSAFE SPEED	CHANGE 10 - IMPROPER PASSIN		20 - 1MP	LLING/SPILLING PROPER CROSSING	ACTION	<u> </u>	6 3 - FLASHER 6 - NO CONTROL	L
CIRCUMSTAN	IG 6 - IMPROPER TURN CES 7 - LEFT OF CENTER	11 - DROVE OFF ROAD  12 - IMPROPER BACKIF			ng in Roadway T discernible		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVLOVED	
SEQUENCE	OF EVENTS	<del> </del>					1 4 1	2 - INVOLVED-ACTIVE CROSSING	
₁ [ 20	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	7 - SEPARATION OF UN 8 - RAN OFF ROAD RIGH			IMAL -OTHER 2 OTOR VEHICLE IN	3 - STRUCK BY FALLING, SHIFTING CARGO OR		3 - INVOLVED-PASSIVE CROSSING	_
21	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	15 - PEDALCYCLE	21 - PAF	Ansport RKED Motor	ANYTHING SET IN MOTION BY A MOTOR VEHICLE	UNIT / N	ON-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST	
	5 - CARGO / EQUIPMENT LOSS OR SHIFT 6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE OPPOSITE DIRECTIO OF TRAVEL		22 - WO	HICLE 2 DRK ZONE INTENANCE	4 - OTHER MOVABLE OBJECT	, 4 , ,	2 - SOUTH 6 - NORTHWEST  3 - EAST 7 - SOUTHEAST 9 - SOUTHWEST	
3	J S EGGI MENT PALONE		LISION WITH FIXED OBJECT - S	EQU	JIPMENT	and the second	FROM TO	4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	'N
4	/ CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BAR	38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES		NCE 5	2 - BUILDING 3 - TUNNEL 4 - OTHER EIVED	UNIT SPEED	DETECTED SPEED	_
5	STRUCTURE 27 - BRIDGE PIER OR	34 - MEDIAN GUARDRA BARRIER	IL 40 - UTILITY POLE 41 - OTHER POST, POLE	48 - TRE 49 - FIRI	E HYDRANT 9	4 - OTHER FIXED OBJECT 9 - OTHER / UNKNOWN	ı 40 ı	1 - STAYED / ESTIMATED SPEED	
6 L	28 - BRIDGE PARAPET	35 - MEDIAN CONCRETI BARRIER 36 - MEDIAN OTHER BA	42 - CULVERT	MA	DRK ZONE INTENANCE JIPMENT		POSTED SPEED	1 2 - CALCULATED / EDR	
. 1		37 - TRAFFIC SIGN POST		51 - WA	ALL		40	3 - UNDETERMINED	
	) HARMOR EVEN	. [	, , , , , , , , , , , , , , , , , ,					I	

Otto Day or Publi	Motorist / Non-Motorist									LOCAL REPORT NUMBER							
UNIT #	NAME: LAST, FIRST, MIDDLE										21-55786  DATE OF BIRTH AGE GENDER						
1 1	1	•	IAN, OCTAVIA									04/26/2001			20	F	
	: STREET, CI		<u> </u>							CONTACT PHONE - INCLUDE AREA CODE							
1146 HE	ERBERICH	I AVE	E., AKRON, OH, 44301										•				
INJURIES	INJURED TAKEN	EM	S AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY (NAME,	CfTY)	SAFETY EQUIPMENT		OT-Compli	SEATING ANT POSITION		BAG USA	GE EJECTIO	ON TRAPPED	
5 S	BY 1								4		C HELME			1	1	1	
OL STATE	OPERATO	R LICE	ENSE NUMBER		OFFEN	ISE CHARG	SED	LOCAL	OFFENSE DESCR	RIPTION			СІТА	ATION	NUMBER		
OH			· · · · · · · · · · · · · · · · · · ·			•											
OL CLASS	ENDORSE	MENT	RESTRICTION SELECT UP TO 3		RIVER STRACTED		HOL / DRUG SUSPE		CONDITION	STATUS	TYPE	OL TEST VALUE	STATUS	DRU	JG TEST	(S) S SELECT UP TO 4	
4				ВУ			ER DRUG	JAIN.	1	1	1		1	1		3 SELECT OF 1.0 .	
UNIT #	NAME: L	AST, FI	RST, MIDDLE				,		·	1	•	DATE OF BIRT	1	ĖΤ	AGE	GENDER	
2	WILLIA	MS, S	SIERRA, M									08/12/1996		$\Box$	25	F	
	STREET, CIT	Y, STA	TE, ZIP							CON.	ГАСТ РН	ONE - INCLUDE	AREA COD	E			
1236 RE		<del>-</del>	RON, OH, 44301		1				T			STATING.	Lann	- 1164	-1	. I nnsn	
2	INJURED TAKEN	EMS	S AGENCY (NAME)		INJURED	TAKEN TO: I	MEDICAL FACILITY (NAME,	CITY)	SAFETY EQUIPMENT		T-Complia	- 1		AG USA		ON TRAPPED	
	BY 1				 			LICCAL	4	ļ	HELIVIL	3	<del>     </del>	1	1	1	
<u> </u>	OPERATOR LICENSE NUMBER					SE CHARG	<b>SED</b>	CODE	OFFENSE DESCR				ŀ		NUMBER		
≥	ENDORSEMENT RESTRICTION SELECT UP TO 3				4511.			<u>                                     </u>	NO PERSON			TE A MOTO D <b>L TEST</b>	Y41	1834 DRU	JG TEST	<b>(5)</b>	
OL CLASS	ENDORSE	VIENI	RESTRICTION SELECT UP TO 3	DIS	IIVER STRACTED	1—	HOL / DRUG SUSPE DHOL MARIJU		CONDITION	STATUS	TYPE	VALUE	STATUS	TYPE	-	S SELECT UP TO 4	
4				ВҮ	6	ОТНЕ	ER DRUG		1	1	1	<u></u>	1	1			
UNIT #	NAME: LA	ST, FI	RST, MIDDLE								ı	DATE OF BIRTH	ı		AGE	GENDER	
ADDRESS:	STREET, CIT	Y, STA	TE, ZIP							CONT	ACT PHO	ONE - INCLUDE	AREA CODE	£			
INJURIES	JURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)							SAFETY EQUIPMENT	+		SEATING	AIR B	AG USA	GE EJECTIO	N TRAPPED		
	INJURED EMS AGENCY (NAME) TAKEN BY				USED					T-Complize HELMET	NOTIZON						
INJURIES OL STATE	OPERATO	LICE	NSE NUMBER		OFFEN:	SE CHARG	ED	LOCAL	OFFENSE DESCR	IPTION		L	CITA	I NOIT	NUMBER		
								CODE									
OL CLASS	ENDORSEN	MENT	RESTRICTION SELECT UP TO 3		IVER	1	HOL / DRUG SUSPE	CTED	CONDITION	А	LCOHO	DL TEST		DRU	IG TEST(	(S)	
				DIS BY	TRACTED	12		ANA		STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS	S SELECT UP TO 4	
INIU	IDIEC		SEATING POSITION		AID DA		R DRUG		OL DESTRIC	TIONIC	) IDD	.  Ver distr <i>i</i>	CTION		TEST ST	ATUS	
- FATAL	JRIES			1 - NOT D			OL CLAS	»S	OL RESTRIC		1 - N	OT DISTRACTED		\$ 0.28.00g	TEST ST. ONE GIVEN	ATUS	
2 - SUSPECTED INJURY	SERIOUS;	2	2 - FRONT - MIDDLE	3 - DEPLO			2 - CLASS B		DEVICE 2 - CDL INTRASTAT		EL	ianually oper/ ectronic			ST REFUSED ST GIVEN,		
S - SUSPECTED INJURY	MINOR		- SECOND - LEFT SIDE	FRONT			3 - CLASS C 4 - REGULAR CLAS	·c	3 - CORRECTIVE LE 4 - FARM WAIVER		σ	OMMUNICATION EXTING, TYPING,		_/ U	INTAMINATI INUSABLE	ED SAMPLE	
+ POSSIBLE IN		and the second	5 - SECOND - MIDDLE		APPLICABLE DYMENT UN		4 - REGULAR CLAS (OHIO = D)	55	5 - EXCEPT CLASS A 6 - EXCEPT CLASS A		3 - T/	IAI ING! ALKING ON HAN OMMUNICATION		RES	ST GIVEN, SULTS KNOV	WN	
- NO APPAREI	NT INJURY	The second of the second	5 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE		EJECTIO	N	5 - M/C MOPED O	NLY	& CLASS B BUS 7 - EXCEPT TRACTO 8 - INTERMEDIATE	R-TRAILE	4 - T/	ALKING ON HAN OMMUNICATION	D-HELD	Section and	ST GIVEN, SULTS UNKN	10MN	
INJURIES	CARCOTON SERVE			1 - NOT E	JECTED ALLY EJECTE	:D	OL ENDORSE	MENIT	RESTRICTIONS 9 - LEARNER'S PERI	MIT	EL	THER ACTIVITY V ECTRONIC DEVIC		ALC 1 - NO		EST TYPE	
/TREATED		200	0 - SLEEPER SECTION	3 - TOTAL	LY EJECTED	,	H - HAZMAT		RESTRICTIONS 10 - LIMITED TO DA	YLIGHT	7 - 0	ASSENGER THER DISTRACTI		2 - BLC	OOD		
? - EMS 8 - POLICE		, 5	OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO		TRAPPE		M - MOTORCYCLE		ONLY 11 - LIMITED TO EN		<sub>IT</sub> 8-0	ISIDE THE VEHICI THER DISTRACTI UTSIDE THE VEHI	ON	3 - UR 4 - BRI 5 - OT	EATH		
OTHER/U	NKNOWN		AREA (NON-TRAILING UNIT,	1 - NOT TI 2 - EXTRIC			P - PASSENGER N - TANKER		12 - LIMITED - OTH 13 - MECHANICAL I (SPECIAL BRAK	DEVICES		THER / UNKNOW	/N	81194 (1955)	HER RUG TES	т түрг	
SAFETY E	QUIPMEN	o 1	2 - PASSENGER IN UNENCLOSED CARGO AREA	MECHA	ANICAL ME	ANS	Q - MOTOR SCOO	TER	CONTROLS, OF	OTHER	11-AI	CONDITIC PPARENTLY NOR		1 - NO 2 - BLC	)NE	88 00 00 88 90 86 00 00 00 00	
- NONE USEL - SHOULDER I			3 - TRAILING UNIT 4 - RIDING ON VEHICLE	NON-N	MECHANICA	AL MEANS	R - THREE-WHEEL MOTORCYCLE		14 - MILITARY VEHI 15 - MOTOR VEHIC	CLEŚ ONL		HYSICAL IMPAIRN MOTIONAL (E.G.,	1ENT	3 - UR 4 - OT		3-1	
USED 3 - LAP BELT ON	VLY USED		EXTERIOR (NON-TRAILING UNIT)				S - SCHOOL BUS T - DOUBLE & TRIE	PLE	WITHOUT AIR I 16 - OUTSIDE MIRR	OR		PRESSED, ANGRY, STURBED)		DRU	G TEST R	RESULT(S)	
4 - SHOULDER ( USED	& LAP BELT		5 - NON-MOTORIST 19 - OTHER / UNKNOWN				TRAILERS X - TANKER / HAZ		17 - PROSTHETIC A 18 - OTHER	ID ,	4 - ILI 5 - FE	LNESS LL ASLEEP, FAINT	TED,		PHETAMINE RBITURATES		
5 - CHILD RESTI - FORWARD		VI					A TANKENY MAZ					TIGUED, ETC. NDER THE INFLU	NCE OF		NZODIAZEPII NNABINOID:		
6 - CHILD RESTI REAR FACII		VI				581 (.keQ8) 41.56788660	GENDE!	<b>R</b> 50/11/19/00	<b>4</b>		AL	EDICATIONS / DF COHOL		5 - CO 6 - OPL	CAINE IATES / OPIC	DIDS	
7 - BOOSTER SE 3 - HELMET USE							M - MALE	10.50			9 - 0	THER / UNKNOW	N	7 - OT) 8 - NEC	HER GATIVE RESU	JLTS	
PROTECTIVE (ELBOWS, KI				der Hild Gestablig			U - OTHER / UNKN	10WN									
10 - REFLECTIVE 11 - LIGHTING -					idhe e												
/ BICYCLE C								병학, 환성			54.2 S						

Otto De Or Puni	OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER 21–55786						
UNIT #		ST, FIRST, MIDDLE	DA	AGE	GENDER									
2		R, YOREL, LEROY					10		30	М				
₫	S: STREET, CIT						CONTACT PHONE - INCLUDE AREA CODE							
×	YAL RD., C	LEVELAND, OH, 4410	D1 	INNI IDED TAVEN TO: BATTOCAL EACH TO	(ALAME CITY)	SAFETY EQUIPMENT		SEATING	AIR BAG USAG	ELECTION	N TRAPPED			
3	TAKEN	EMS AGENCY (NAME) MEDINA LST		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  MEDINA HOSPITAL  1			DOT-COMPLIANT	POSITION 3	1	1				
UNIT #		ST, FIRST, MIDDLE		MEDINA HOSPITAL		,		TE OF BIRTH	<u>'</u>	AGE	1 GENDER			
2		, ·												
									CONTACT PHONE - INCLUDE AREA CODE					
ADDRESS		ī		ſ <del>.</del>		SAFETY EQUIPMENT			T					
INJURIES 5	INJURED TAKEN BY 1	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG		TRAPPED					
UNIT #		ST, FIRST, MIDDLE	4		4 TE OF BIRTH	1	AGE	GENDER						
		.,,					-			,,,,,				
ADDRESS	: STREET, CIT	, STATE, ZIP					CONTACT PHON	E - INCLUDE AR	EA CODE					
1000		<b>.</b>												
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
UNIT #	BY LI	ST, FIRST, MIDDLE						TE OF BIRTH	<u> </u>	AGE	GENDER			
ONII #	IVAIVIE: LA	SI, FIRSI, MIDDLE						TE OF BIRTH		AGE	GENDER			
ADDRESS	: STREET, CITY	, STATE, ZIP					CONTACT PHONI	- INCLUDE ARI	EA CODE					
ADDRESS:														
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED				
	BY	LIBLES	CAFFE	Y EQUIPMENT USED		CEATING BOO		1	AID DAG I	CACE				
1 - FAT		URIES	1 - NONE U		1 - FRON	SEATING POS IT - LEFT SIDE		1 = NOT I	AIR BAG U DEPLOYED	SAGE				
		ERIOUS INJURY		OCCUPANT		FORCYCLE DRIVE IT - MIDDLE								
		IINOR INJURY		DER BELT ONLY USED T ONLY USED			OYED SIDE							
	SSIBLE INJU APPAREN			DER & LAP BELT USED	NGER)	dyed both T/Side								
5 110				RESTRAINT SYSTEM - 5 - SECOND - MIDDLE RED FACING 6 - SECOND - RIGHT SIDI				APPLICABLE		er in terr				
1 - NO	T TRANSP	TAKEN BY ORTED /		RESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE			9 - DEPLOYMEN			IKNOWI	N .			
TRE	ATED AT S	each thair in March (Medical training	REAR FA		AR)			EJECTION						
2 - EMS			7 - BOOSTE		D - MIDDLE D - RIGHT SIDE		JECTED ALLY EJECT	CD.						
3 - POL 9 - OTH	.ICE IER / UNK	NOWN	8 - HELMET 9 - PROTEC	TIVE PADS USED	F TRUCK CAB 2 - PARTIALLY E ER ENCLOSED 3 - TOTALLY EJI									
				S, KNEES, ETC)	CAR	GO AREA (NON-TI	TRAILING UNIT 4 - NOT APPLICABLE							
1 - 1 - 1 120	an May benglin	NDER		TIVE CLOTHING		NCLOSED	TRAPP	TRAPPED KAPPED						
F - FEN			医囊膜炎 化二氯化甲酰胺 法保持证	NG - PEDESTRIAN LE ONLY	CAR 13 - TRA	1 - NOT TR					RAPPED			
M - MA		NOWN!	99 - OTHER	/ UNKNOWN	TILES 1 TO 1 T	NG ON VEHICLE	EXTERIOR	ANIC						
0 - 011	HER / UNK	INOVVIN				-TRAILING UNIT) 1-MOTORIST		3 - FREED	anical me By	AINS				
					in talke white it freeds	ER / UNKNOWN		NON-	MECHANIC	AL MEAI	VS			
NAME: LA	ST, FIRST, MI	DDLE					DA	TE OF BIRTH		AGE	GENDER			
ADDRESS.	CTREET CITY	CTATE 7ID				1	CONTACT BUCNE	- McDine to	A CODE					
ADDRESS:	: STREET, CITY	, STATE, ZIP					CONTACT PHONE	INCLUDE ARE	A CUDE					
NAME: LA	NAME: LAST, FIRST, MIDDLE							TE OF BIRTH	Т	AGE	GENDER			
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							- INCLUDE ARE	A CODE					
MARKET I	CT FIDET LA	DDI E					DATE OF BIRTH AGE GEN							
MAIVIE: LA	ST, FIRST, MIL	,DLE						PMIII			GENDER			
ADDRESS:	STREET, CITY	, STATE, ZIP					CONTACT PHONE	- INCLUDE ARE	A CODE					