



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

22-55113

<input checked="" type="checkbox"/> PHOTOS TAKEN	<input type="checkbox"/> OH -2	<input type="checkbox"/> OH -3	LOCAL INFORMATION	RIVER STYX/MEDINA
<input type="checkbox"/> SECONDARY CRASH	<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME *	NCIC *
<input type="checkbox"/> PRIVATE PROPERTY			Montville Police Department	05213
			HIT/SKIP	NUMBER OF UNITS
			1 - SOLVED	2
			2 - UNSOLVED	
			UNIT IN ERROR	
			1 98 - ANIMAL	
			1 99 - UNKNOWN	

COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*	CRASH DATE / TIME*	CRASH SEVERITY
52	3	Montville (Township of)	10/13/2022 17:37	5

ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES
			River Styx	RD	41.135513

ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES
			5115		-81.811943

REFERENCE POINT	DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE	INTERSECTION RELATED
3	3 - EAST	IR - INTERSTATE ROUTE (TP)	AL - ALLEY	<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH
		US - FEDERAL US ROUTE	AV - AVENUE	<input type="checkbox"/> WITHIN INTERCHANGE AREA
		SR - STATE ROUTE	BL - BOULEVARD	NUMBER OF APPROACHES
		CR - NUMBERED COUNTY ROUTE	MP - MILEPOST	
		TR - NUMBERED TOWNSHIP ROUTE	OV - OVAL	
			PK - PARKWAY	
			TE - TERRACE	
			TL - TRAIL	
			WA - WAY	
			PL - PLACE	

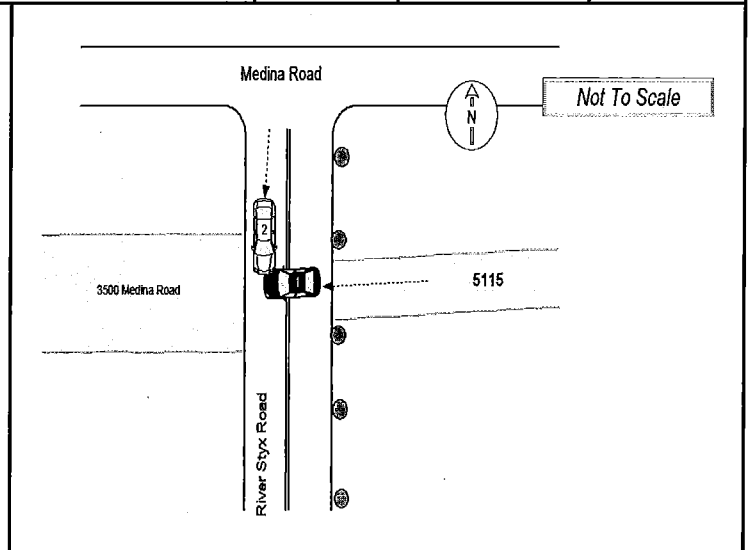
LOCATION OF FIRST HARMFUL EVENT	MANNER OF CRASH COLLISION/IMPACT	DIRECTION OF TRAVEL	MEDIAN TYPE
1	3	3 - EAST	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)

WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE
<input type="checkbox"/>	3 - WORK ON SHOULDER OR MEDIAN	4 - ACTIVITY AREA	2	1	1

LIGHT CONDITION	WEATHER
1	1 - CLEAR

NARRATIVE

Unit 1 was attempting to cross River Styx Road from the driveway of 5115 River Styx Road, to the driveway of 3500 Medina Road. Unit 1 failed to yield the right of way and entered the path of Unit 2 and was struck by Unit 2. Both units sustained functional damage. No injuries were reported and both vehicles were able to leave under their own power. The driver of Unit 1 was cited for right of way from private driveway. The driver of Unit 2 cited with expired plates.



CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	SCENE CLEARED DATE / TIME	REPORT TAKEN BY
10/13/2022 17:37	10/13/2022 17:38	10/13/2022 17:41	10/13/2022 18:28	<input checked="" type="checkbox"/> POLICE AGENCY
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	CHECKED BY OFFICER'S NAME*
0	0	50	Sheers, Christian	Harrison, Brett
			OFFICER'S BADGE NUMBER*	CHECKED BY OFFICER'S BADGE NUMBER*
			1617	1606
				<input checked="" type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)

OWNER

UNIT # **1** OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
MILES, ELIZABETH, A

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
2641 IMPALA AVE, WOOSTER, OH, 44691

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE **OH** LICENSE PLATE # **HBK8532** VEHICLE IDENTIFICATION # **5Y2SP67899Z450452** VEHICLE YEAR **2009** VEHICLE MAKE **PONTIAC**

INSURANCE VERIFIED INSURANCE COMPANY **GRANGER** INSURANCE POLICY # **4933075** COLOR **BLK** VEHICLE MODEL **VIBE**

TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

US DOT # _____ TOWED BY: COMPANY NAME _____

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS **1**

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

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

UNIT TYPE: **1** 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? **0**

1 - YES 2 - NO 9 - OTHER / UNKNOWN

AUTONOMOUS MODE LEVEL: **0** 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** 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

NON-MOTORIST LOCATION: **1** 1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER

4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - INTERSECTION - OTHER

7 - SHOULDER/ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND

10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE

99 - OTHER / UNKNOWN

ACTION: **3** 1 - NON-CONTACT, 2 - NON-COLLISION, 3 - STRIKING, 4 - STRUCK, 5 - BOTH STRIKING & STRUCK, 9 - OTHER / UNKNOWN

PRE-CRASH ACTIONS: **1** 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: **2** 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 / A/CDA, 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/SPLILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE

23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

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

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

LOCAL REPORT NUMBER
22-55113

DAMAGE

DAMAGE SCALE: **3** 1 - NONE, 2 - MINOR DAMAGE, 3 - FUNCTIONAL 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, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

TRAFFIC

TRAFFICWAY FLOW: **2** 1 - ONE-WAY, 2 - TWO-WAY

TRAFFIC CONTROL: **6** 1 - ROUNDABOUT, 2 - SIGNAL, 3 - FLASHER, 4 - STOP SIGN, 5 - YIELD SIGN, 6 - NO CONTROL

OF THROUGH LANES ON ROAD: **2**

RAIL GRADE CROSSING: **2** 1 - NOT INVOLVED, 2 - INVOLVED-ACTIVE CROSSING, 3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION: FROM **3** TO **4**

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

UNIT SPEED: **2**

POSTED SPEED: **35**

DETECTED SPEED: **1** 1 - STATED / ESTIMATED SPEED, 2 - CALCULATED / EDR, 3 - UNDETERMINED

OWNER

UNIT # 2 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
TALLMAN, DEVIN, MARIE-GRACE

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
195 S PARDEE ST, WADSWORTH, OH, 44281

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

VEHICLE

LP STATE OH LICENSE PLATE # N585010 VEHICLE IDENTIFICATION # KNDJT2A24B7313263 VEHICLE YEAR 2011 VEHICLE MAKE KIA

INSURANCE VERIFIED INSURANCE COMPANY PROGRESSIVE INSURANCE POLICY # 942691994 COLOR WHI VEHICLE MODEL SOUL

COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE TYPE OF USE

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS 1 VEHICLE WEIGHT GVWR/GCWR
 1 - ≤10K LBS.
 2 - 10.001 - 26K LBS.
 3 - > 26K LBS.

HAZARDOUS MATERIAL CLASS # PLACARD ID #

UNIT TYPE 1

1 - PASSENGER CAR	6 - VAN (9-15 SEATS)	12 - GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN/SKATER
2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED	13 - SNOWMOBILE	19 - BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)
3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED	14 - SINGLE UNIT TRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST
4 - PICK UP	9 - AUTOCYCLE	15 - SEMI-TRACTOR	21 - HEAVY EQUIPMENT	26 - BICYCLE
5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	16 - FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN
	11 - ALL TERRAIN VEHICLE (ATV/UTV)	17 - MOTORHOME	99 - UNKNOWN OR HIT/SKIP	

OF TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0

1 - YES 2 - NO 9 - OTHER / UNKNOWN

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

SPECIAL FUNCTION 1

1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16 - FARM	21 - MAIL CARRIER
2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - MOWING	99 - OTHER / UNKNOWN
3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE	18 - SNOW REMOVAL	
4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19 - TOWING	
5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIP.	20 - SAFETY SERVICE PATROL	

CARGO BODY TYPE 1

1 - NO CARGO BODY TYPE / NOT APPLICABLE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99 - OTHER / UNKNOWN
2 - BUS	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE	12 - CONCRETE MIXER	
3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	6 - CARGOVAN /ENCLOSED BOX	9 - CARGO TANK	13 - AUTO TRANSPORTER	
		10 - FLAT BED	14 - GARBAGE/REFUSE	

VEHICLE DEFECTS

1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN
2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT	
3 - TAIL LAMPS	6 - TIRE BLOWOUT			

NON-MOTORIST LOCATION

1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - CROSSWALK	7 - SHOULDER/ROADSIDE	10 - DRIVEWAY ACCESS	99 - OTHER / UNKNOWN
2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	
3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER AT INCIDENT SCENE	

ACTION 4 PRE-CRASH ACTIONS 1

1 - NON-CONTACT	1 - STRAIGHT AHEAD	9 - LEAVING TRAFFIC LANE	15 - WALKING, RUNNING, JOGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE
2 - NON-COLLISION	2 - BACKING	10 - PARKED	16 - WORKING	99 - OTHER / UNKNOWN
3 - STRIKING	3 - CHANGING LANES	11 - SLOWING OR STOPPED IN TRAFFIC	17 - PUSHING VEHICLE	
4 - STRUCK	4 - OVERTAKING/PASSING	12 - DRIVERLESS	18 - APPROACHING OR LEAVING VEHICLE	
5 - BOTH STRIKING & STRUCK	5 - MAKING RIGHT TURN	13 - NEGOTIATING A CURVE	19 - STANDING	
9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	14 - ENTERING OR CROSSING SPECIFIED LOCATION	20 - OTHER NON-MOTORIST	
	7 - MAKING U-TURN			
	8 - ENTERING TRAFFIC LANE			

CONTRIBUTING CIRCUMSTANCES 1

1 - NONE	8 - FOLLOWING TOO CLOSE /ACDA	13 - IMPROPER START FROM A PARKED POSITION	18 - OPERATING DEFECTIVE EQUIPMENT	23 - OPENING DOOR INTO ROADWAY
2 - FAILURE TO YIELD	9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY	19 - LOAD SHIFTING /FALLING/SPILLING	99 - OTHER IMPROPER ACTION
3 - RAN RED LIGHT	10 - IMPROPER PASSING	15 - SWERVING TO AVOID	20 - IMPROPER CROSSING	
4 - RAN STOP SIGN	11 - DROVE OFF ROAD	16 - WRONG WAY	21 - LYING IN ROADWAY	
5 - UNSAFE SPEED	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION	22 - NOT DISCERNIBLE	
6 - IMPROPER TURN				
7 - LEFT OF CENTER				

SEQUENCE OF EVENTS

EVENTS

1 <u>20</u> 1 - OVERTURN/ROLLOVER	7 - SEPARATION OF UNITS	12 - DOWNHILL RUNAWAY	19 - ANIMAL - OTHER	23 - STRUCK BY FALLING SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
2 2 - FIRE/EXPLOSION	8 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION	20 - MOTOR VEHICLE IN TRANSPORT	24 - OTHER MOVABLE OBJECT
3 3 - IMMERSION	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	21 - PARKED MOTOR VEHICLE	
4 4 - JACKKNIFE	10 - CROSS MEDIAN	15 - PEDALCYCLE	22 - WORK ZONE MAINTENANCE EQUIPMENT	
5 5 - CARGO / EQUIPMENT LOSS OR SHIFT	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE		
6 6 - EQUIPMENT FAILURE		17 - ANIMAL - FARM		
		18 - ANIMAL - DEER		

COLLISION WITH FIXED OBJECT - STRUCK

25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END	38 - OVERHEAD SIGN POST	45 - EMBANKMENT	52 - BUILDING
26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER	39 - LIGHT / LUMINARIES SUPPORT	46 - FENCE	53 - TUNNEL
27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	40 - UTILITY POLE	47 - MAILBOX	54 - OTHER FIXED OBJECT
28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER	41 - OTHER POST, POLE OR SUPPORT	48 - TREE	99 - OTHER / UNKNOWN
29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	42 - CULVERT	49 - FIRE HYDRANT	
30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT	
	37 - TRAFFIC SIGN POST	44 - DITCH	51 - WALL	

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

LOCAL REPORT NUMBER 22-55113

DAMAGE

DAMAGE SCALE

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

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

TRAFFIC

TRAFFICWAY FLOW 2 TRAFFIC CONTROL 6

1 - ONE-WAY 4 - STOP SIGN
 2 - TWO-WAY 5 - YIELD SIGN
 3 - FLASHER 6 - NO CONTROL

OF THROUGH LANES ON ROAD 2 RAIL GRADE CROSSING

1 - NOT INVOLVED
 2 - INVOLVED-ACTIVE CROSSING
 3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION

FROM 1 TO 2

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

UNIT SPEED 15 DETECTED SPEED

1 - STATED / ESTIMATED SPEED
 2 - CALCULATED / EDR
 3 - UNDETERMINED

POSTED SPEED 35



MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER
22-55113

UNIT # 1	NAME: LAST, FIRST, MIDDLE FIOCCA, PAUL, JOSEPH	DATE OF BIRTH 06/21/1960	AGE 62	GENDER M
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ADDRESS: STREET, CITY, STATE, ZIP 189 BROOKSHORE DR, CHIPPEWA LAKE, OH, 44215		CONTACT PHONE - INCLUDE AREA CODE		
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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
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OL STATE OH	OPERATOR LICENSE NUMBER	OFFENSE CHARGED 4511.44	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION RIGHT OF WAY ON PUBLIC HIGHWAY	CITATION NUMBER Y43074
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OL CLASS 4	ENDORSEMENT M	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	TYPE	VALUE	STATUS	TYPE	RESULTS SELECT UP TO 4

UNIT # 2	NAME: LAST, FIRST, MIDDLE TALLMAN, DEVIN, MARIE-GRACE	DATE OF BIRTH 01/31/2000	AGE 22	GENDER F
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ADDRESS: STREET, CITY, STATE, ZIP 195 S PARDEE ST, WADSWORTH, OH, 44281		CONTACT PHONE - INCLUDE AREA CODE		
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INJURIES 5	INJURED TAKEN BY 1	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 1	<input type="checkbox"/> DOT-COMPLIANT <input checked="" type="checkbox"/> MC HELMET	SEATING POSITION 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
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OL STATE OH	OPERATOR LICENSE NUMBER	OFFENSE CHARGED 4503.21	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION FAILURE TO DISPLAY MOTOR VEHICLE	CITATION NUMBER Y43075
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OL CLASS 4	ENDORSEMENT	RESTRICTION SELECT UP TO 3 3	DRIVER DISTRACTED BY 4	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST			DRUG TEST(S)		
						STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS SELECT UP TO 4

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
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ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
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INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT <input checked="" type="checkbox"/> MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION	CITATION NUMBER
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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 & 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 & CLASS B BUS	6 - PASSENGER	ALCOHOL TEST TYPE
	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE	1 - NONE
	8 - THIRD - MIDDLE	EJECTION	OL ENDORSEMENT	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	2 - BLOOD
	9 - THIRD - RIGHT SIDE	1 - NOT EJECTED	H - HAZMAT	9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	3 - URINE
	10 - SLEEPER SECTION OF TRUCK CAB	2 - PARTIALLY EJECTED	M - MOTORCYCLE	10 - LIMITED TO DAYLIGHT ONLY		4 - BREATH
	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	3 - TOTALLY EJECTED	P - PASSENGER	11 - LIMITED TO EMPLOYMENT		5 - OTHER
	12 - PASSENGER IN UNENCLOSED CARGO AREA	4 - NOT APPLICABLE	N - TANKER	12 - LIMITED - OTHER	CONDITION	DRUG TEST TYPE
INJURIES TAKEN BY	13 - TRAILING UNIT		Q - MOTOR SCOOTER	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	1 - APPARENTLY NORMAL	1 - NONE
1 - NOT TRANSPORTED / TREATED AT SCENE	14 - RIDING ON VEHICLE EXTERIOR	TRAPPED	R - THREE-WHEEL MOTORCYCLE	14 - MILITARY VEHICLES ONLY	2 - PHYSICAL IMPAIRMENT	2 - BLOOD
2 - EMS	15 - NON-MOTORIST	1 - NOT TRAPPED	S - SCHOOL BUS	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	3 - URINE
3 - POLICE	99 - OTHER / UNKNOWN	2 - EXTRICATED BY MECHANICAL MEANS	T - DOUBLE & TRIPLE TRAILERS	16 - OUTSIDE MIRROR	4 - ILLNESS	4 - OTHER
9 - OTHER / UNKNOWN		3 - FREED BY NON-MECHANICAL MEANS	X - TANKER / HAZMAT	17 - PROSTHETIC AID	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	
SAFETY EQUIPMENT				18 - OTHER	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	DRUG TEST RESULT(S)
1 - NONE USED			GENDER		9 - OTHER / UNKNOWN	1 - AMPHETAMINES
2 - SHOULDER BELT ONLY USED			F - FEMALE			2 - BARBITURATES
3 - LAP BELT ONLY USED			M - MALE			3 - BENZODIAZEPINES
4 - SHOULDER & LAP BELT USED			U - OTHER / UNKNOWN			4 - CANNABINOIDS
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING						5 - COCAINE
6 - CHILD RESTRAINT SYSTEM - REAR FACING						6 - OPIATES / OPIOIDS
7 - BOOSTER SEAT						7 - OTHER
8 - HELMET USED						8 - NEGATIVE RESULTS
9 - PROTECTIVE: PADS USED (ELBOWS, KNEES, ETC)						
10 - REFLECTIVE CLOTHING						
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						
99 - OTHER / UNKNOWN						



OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER
22-55113

OCCUPANT	UNIT # 1	NAME: LAST, FIRST, MIDDLE MILES, ELIZABETH, A	DATE OF BIRTH 05/15/1966	AGE 56	GENDER F					
	ADDRESS: STREET, CITY, STATE, ZIP 2641 IMPALA ST, WOOSTER, OH, 44691		CONTACT PHONE - INCLUDE AREA CODE [REDACTED]							
OCCUPANT	INJURIES 5	INJURED TAKEN BY 1	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 3	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
	UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER	CONTACT PHONE - INCLUDE AREA CODE				
OCCUPANT	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
	UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER	CONTACT PHONE - INCLUDE AREA CODE				
OCCUPANT	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
	UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER	CONTACT PHONE - INCLUDE AREA CODE				
OCCUPANT	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
	UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER	CONTACT PHONE - INCLUDE AREA CODE				

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

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