

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

23-12889

<input checked="" type="checkbox"/> PHOTOS TAKEN	<input type="checkbox"/> OH-2	<input checked="" type="checkbox"/> OH-3	LOCAL INFORMATION	6200 WOOSTER PIKE	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
<input type="checkbox"/> SECONDARY CRASH	<input type="checkbox"/> OH-1P	<input checked="" type="checkbox"/> OTHER	REPORTING AGENCY NAME *	Montville Police Department	1 - SOLVED	2	98 - ANIMAL
<input type="checkbox"/> PRIVATE PROPERTY					2 - UNSOLVED		99 - UNKNOWN

COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*	CRASH DATE / TIME*	CRASH SEVERITY
52	3	Montville (Township of)	03/05/2023 12:36	5

ROUTE TYPE	ROUTE NUMBER	PREFIX	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES
SR	3				41.105144
REFERENCE	ROUTE TYPE	ROUTE NUMBER	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES
			6200		-81.864167

REFERENCE POINT	DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE	INTERSECTION RELATED
3	2	IR - INTERSTATE ROUTE (TP)	AL - ALLEY	<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH
		US - FEDERAL US ROUTE	HW - HIGHWAY	<input type="checkbox"/> WITHIN INTERCHANGE AREA
		SR - STATE ROUTE	LA - LANE	NUMBER OF APPROACHES
		CR - NUMBERED COUNTY ROUTE	MP - MILEPOST	
		TR - NUMBERED TOWNSHIP ROUTE	OV - OVAL	
			PK - PARKWAY	
			TL - TRAIL	
			WA - WAY	
			PL - PLACE	

LOCATION OF FIRST HARMFUL EVENT	MANNER OF CRASH COLLISION/IMPACT	DIRECTION OF TRAVEL	MEDIAN TYPE
1	2	1 - NORTH	1 - DIVIDED FLUSH MEDIAN (<4 FEET)
		2 - SOUTH	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)
		3 - EAST	3 - DIVIDED, DEPRESSED MEDIAN
		4 - WEST	4 - DIVIDED, RAISED MEDIAN (ANY TYPE)
			9 - OTHER / UNKNOWN

WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE
<input type="checkbox"/>	1 - LANE CLOSURE	1 - BEFORE THE 1ST WORK ZONE WARNING SIGN	1	1	2
<input type="checkbox"/>	2 - LANE SHIFT/ CROSSOVER	2 - ADVANCE WARNING AREA			
<input type="checkbox"/>	3 - WORK ON SHOULDER OR MEDIAN	3 - TRANSITION AREA			
<input type="checkbox"/>	4 - INTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA			
<input type="checkbox"/>	5 - OTHER	5 - TERMINATION AREA			

LIGHT CONDITION	WEATHER
1	1

NARRATIVE	Diagram
Unit 1 and Unit 2 were traveling northbound on Wooster Pike in the 6200 block when a vehicle in front of Unit 1 suddenly stopped, causing Unit 1 to immediately stop. Unit 2 struck Unit 1 from behind. No injuries were reported.	

CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	SCENE CLEARED DATE / TIME	REPORT TAKEN BY
03/05/2023 12:36	03/05/2023 12:36	03/05/2023 12:39	03/05/2023 13:24	<input checked="" type="checkbox"/> POLICE AGENCY
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	<input type="checkbox"/> MOTORIST
0	0	48	Brenner, Andy	<input checked="" type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)
			OFFICER'S BADGE NUMBER*	CHECKED BY OFFICER'S NAME*
			1631	Gaede, Seth
				CHECKED BY OFFICER'S BADGE NUMBER*
				1608

OWNER

UNIT # **1** OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) **FRASIER, BRIAN** OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER) [REDACTED]

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
7525 DEERPATH TRAIL, SEVILLE, OH, 44273

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

VEHICLE

LP STATE **OH** LICENSE PLATE # **JSV9479** VEHICLE IDENTIFICATION # **KM8K12AAXKU247073** VEHICLE YEAR **2019** VEHICLE MAKE **HYUNDAI**

INSURANCE VERIFIED INSURANCE COMPANY **USAA** INSURANCE POLICY # **0079940327104** COLOR **BLK** VEHICLE MODEL **KONA**

COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE TYPE OF USE US DOT # TOWED BY: COMPANY NAME

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS VEHICLE WEIGHT GVWR/GCWR HAZARDOUS MATERIAL

1- <10K LBS. MATERIAL RELEASED CLASS # PLACARD ID #

2- 10,001 - 26K LBS. PLACARD

3- > 26K LBS.

UNIT TYPE 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 28 UNKNOWN OR HIT/SKIP

OF TRAILING UNITS 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 NO AUTOMATION 1 DRIVER ASSISTANCE 2 PARTIAL AUTOMATION 3 CONDITIONAL AUTOMATION 4 HIGH AUTOMATION 5 FULL AUTOMATION 9 UNKNOWN

1 YES 2 NO 9 OTHER / UNKNOWN

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. 16 FARM 17 MOWING 18 SNOW REMOVAL 19 TOWING 20 SAFETY SERVICE PATROL 21 MAIL CARRIER 99 OTHER / UNKNOWN

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 11 DUMP 12 CONCRETE MIXER 13 AUTO TRANSPORTER 14 GARBAGE/REFUSE 99 OTHER / UNKNOWN

VEHICLE DEFECTS 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 INTERSECTION - MARKED CROSSWALK 2 INTERSECTION - UNMARKED CROSSWALK 3 INTERSECTION - OTHER 4 MIDDLEBLOCK - MARKED CROSSWALK 5 TRAVEL LANE - OTHER LOCATION 6 BICYCLE LANE 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 1 NON-CONTACT 2 NON-COLLISION 3 STRIKING 4 STRUCK 5 BOTH STRIKING & STRUCK 9 OTHER / UNKNOWN 11 PRE-CRASH ACTIONS 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 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 / JCDA 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/SPILLING 20 IMPROPER CROSSING 21 LYING IN ROADWAY 22 NOT DISCERNIBLE 23 OPENING DOOR INTO ROADWAY 99 OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1 20 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

EVENTS 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 MEDIUM CABLE BARRIER 34 MEDIUM GUARDRAIL BARRIER 35 MEDIUM CONCRETE BARRIER 36 MEDIUM 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
23-12889

DAMAGE

DAMAGE SCALE

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

0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN

TRAFFIC

TRAFFICWAY FLOW 1 ONE-WAY 2 TWO-WAY

TRAFFIC CONTROL 1 ROUNDABOUT 2 SIGNAL 3 FLASHER 4 STOP SIGN 5 YIELD SIGN 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 2 TO 1

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

UNIT SPEED 0

POSTED SPEED 45

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

OWNER

UNIT # 2 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
DAUBENSPECK, JOHN, LEE

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
4731 RIVERROCK WAY, MEDINA, OH, 44256

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

LP STATE OH LICENSE PLATE # JDP4816 VEHICLE IDENTIFICATION # 5XYP5DHC8NG264865 VEHICLE YEAR 2022 VEHICLE MAKE KIA

INSURANCE VERIFIED INSURANCE COMPANY STATE FARM INSURANCE POLICY # 2704284-SFP-35 COLOR BLK VEHICLE MODEL TELLURIDE

TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

US DOT # _____ TOWED BY: COMPANY NAME BEARS

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

UNIT TYPE 3

OF TRAILING UNITS 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0

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 BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP

SPECIAL FUNCTION 1

CARGO BODY TYPE 1

VEHICLE DEFECTS 1

1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER

1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE

1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS

NON-MOTORIST LOCATION 1

ACTION 3

CONTRIBUTING CIRCUMSTANCES 8

1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK 3 - INTERSECTION - OTHER

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

1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN 7 - LEFT OF CENTER

SEQUENCE OF EVENTS

1 20

2 1

3 1

4 1

5 1

6 1

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 - MEDIUM CABLE BARRIER 34 - MEDIUM GUARDRAIL BARRIER 35 - MEDIUM CONCRETE BARRIER 36 - MEDIUM 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

EVENTS

1 20

2 1

3 1

4 1

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LOCAL REPORT NUMBER
23-12889

DAMAGE

DAMAGE SCALE

1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN

3

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY

INITIAL POINT OF CONTACT

0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN

12

TRAFFIC

TRAFFICWAY FLOW: 2

TRAFFIC CONTROL: 6

OF THROUGH LANES ON ROAD: 2

RAIL GRADE CROSSING: 1

UNIT / NON-MOTORIST DIRECTION

FROM 2 TO 1

UNIT SPEED: 30

POSTED SPEED: 45

DETECTED SPEED: 1

DETECTED SPEED

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

MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER 23-12889		
DATE OF BIRTH 12/02/1998	AGE 24	GENDER F

UNIT # 1	NAME: LAST, FIRST, MIDDLE FRASIER, MEKENZIE, DONICA	
ADDRESS: STREET, CITY, STATE, ZIP 7525 DEERPATH TRAIL, SEVILLE, OH, 44273		
INJURIES 5	INJURED TAKEN BY 1	EMS AGENCY (NAME)
OL STATE OH	OPERATOR LICENSE NUMBER	OFFENSE CHARGED
OL CLASS 4	ENDORSEMENT	RESTRICTION SELECT UP TO 3

CONTACT PHONE - INCLUDE AREA CODE [REDACTED]		
SAFETY EQUIPMENT USED 4	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	SEATING POSITION 1
AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
OFFENSE DESCRIPTION	CITATION NUMBER	
ALCOHOL TEST	DRUG TEST(S)	
STATUS 1	TYPE 1	VALUE .
STATUS 1	TYPE 1	RESULTS SELECT UP TO 4

UNIT # 2	NAME: LAST, FIRST, MIDDLE DAUBENSPECK, JOHN, LEE	
ADDRESS: STREET, CITY, STATE, ZIP 4731 RIVERROCK WAY, MEDINA, OH, 44256		
INJURIES 5	INJURED TAKEN BY 1	EMS AGENCY (NAME)
OL STATE OH	OPERATOR LICENSE NUMBER	OFFENSE CHARGED 4511.21A
OL CLASS 4	ENDORSEMENT	RESTRICTION SELECT UP TO 3

CONTACT PHONE - INCLUDE AREA CODE [REDACTED]		
SAFETY EQUIPMENT USED 4	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	SEATING POSITION 1
AIR BAG USAGE 2	EJECTION 1	TRAPPED 1
OFFENSE DESCRIPTION NO PERSON SHALL OPERATE A MOTO	CITATION NUMBER Y42568	
ALCOHOL TEST	DRUG TEST(S)	
STATUS 1	TYPE 1	VALUE .
STATUS 1	TYPE 1	RESULTS SELECT UP TO 4

UNIT #	NAME: LAST, FIRST, MIDDLE	
ADDRESS: STREET, CITY, STATE, ZIP		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3

CONTACT PHONE - INCLUDE AREA CODE		
SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	SEATING POSITION
AIR BAG USAGE	EJECTION	TRAPPED
OFFENSE DESCRIPTION	CITATION NUMBER	
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 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN	1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO = D) 5 - M/C MOPED ONLY 6 - NO VALID OL	1 - ALCOHOL INTERLOCK DEVICE 2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A & CLASS B BUS 7 - EXCEPT TRACTOR-TRAILER 8 - INTERMEDIATE LICENSE RESTRICTIONS 9 - LEARNER'S PERMIT RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER	1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, EMAILING) 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	1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN
INJURIES TAKEN BY 1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN		EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE	OL ENDORSEMENT H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT		CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL 9 - OTHER / UNKNOWN	ALCOHOL TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER
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 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN		TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS	GENDER F - FEMALE M - MALE U - OTHER / UNKNOWN			DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER
						DRUG TEST RESULT(S) 1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS



OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER

23-12889

OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH		AGE	GENDER		
	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	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH		AGE	GENDER		
	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	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH		AGE	GENDER		
	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	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH		AGE	GENDER		
	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	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED

INJURIES	SAFETY EQUIPMENT USED	SEATING POSITION	AIR BAG USAGE
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	1 - NONE USED - VEHICLE OCCUPANT 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN
INJURED TAKEN BY			EJECTION
1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN			1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE
GENDER			TRAPPED
F - FEMALE M - MALE U - OTHER / UNKNOWN			1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS

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			