



**OWNER**

UNIT # **1** OWNER NAME: LAST, FIRST, MIDDLE ( ) (SAVE AS DRIVER)  
**WARNER, DAWN, RENE**

OWNER ADDRESS: STREET, CITY, STATE, ZIP ( ) (SAVE AS DRIVER)  
**6825 MAPLEBROOKE TRACE, MEDINA, OH, 44256**

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

OWNER PHONE: (INCLUDE AREA CODE) ( ) (SAVE AS DRIVER)

COMMERCIAL CARRIER PHONE: (INCLUDE AREA CODE)

**VEHICLE**

LP STATE **OH** LICENSE PLATE # **KHP5214** VEHICLE IDENTIFICATION # **1FTYE1Y83PKB16912** VEHICLE YEAR **2023** VEHICLE MAKE **FORD**

INSURANCE VERIFIED INSURANCE COMPANY **PROGRESSIVE** INSURANCE POLICY # **40787921** COLOR **WHI** VEHICLE MODEL **TRANSIT**

COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE

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

MATERIAL RELEASED  PLACARD HAZARDOUS MATERIAL CLASS # PLACARD ID #

TYPE OF USE

PASSENGER CAR  VAN (9-15 SEATS)  GOLF CART  LIMO (LIVERY VEHICLE)  PEDESTRIAN/SKATER

PASSENGER VAN (MINIVAN)  MOTORCYCLE 2-WHEELED  SNOWMOBILE  BUS (16+ PASSENGERS)  WHEELCHAIR (ANY TYPE)

SPORT UTILITY VEHICLE  MOTORCYCLE 3-WHEELED  SINGLE UNIT TRUCK  OTHER VEHICLE  OTHER NON-MOTORIST

PICK UP  AUTO CYCLE  HEAVY EQUIPMENT  BICYCLE  TRAIN

CARGO VAN  MOPED OR MOTORIZED BICYCLE  FARM EQUIPMENT  ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE  UNKNOWN OR HIT/SKIP

# OF TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?  0 - NO AUTOMATION  1 - DRIVER ASSISTANCE  3 - CONDITIONAL AUTOMATION  9 - UNKNOWN

2 - YES  1 - NO  9 - OTHER / UNKNOWN AUTONOMOUS MODE LEVEL  2 - PARTIAL AUTOMATION  5 - FULL AUTOMATION

SPECIAL FUNCTION

NONE  BUS - CHARTER/TOUR  FIRE  FARM  MAIL CARRIER

TAXI  BUS - INTERCITY  MILITARY  MOWING  BUS (16+ PASSENGERS)

ELECTRONIC RIDE SHARING  BUS - SHUTTLE  POLICE  SNOW REMOVAL  OTHER / UNKNOWN

SCHOOL TRANSPORT  BUS - OTHER  PUBLIC UTILITY  TOWING  SAFETY SERVICE PATROL

BUS - TRANSIT/COMMUTER  AMBULANCE  CONSTRUCTION EQUIP.  OTHER / UNKNOWN

CARGO BODY TYPE

NO CARGO BODY TYPE / NOT APPLICABLE  LOGGING  GRAIN/CHIPS/GRAVEL  DUMP  OTHER / UNKNOWN

BUS  INTERMODAL CONTAINER CHASSIS  POLE  CONCRETE MIXER  AUTO TRANSPORTER

VEHICLE TOWING ANOTHER MOTOR VEHICLE  CARGO VAN  FLAT BED  GARBAGE/REFUSE

VEHICLE DEFECTS

TURN SIGNALS  BRAKES  WORN OR SLICK TIRES  MOTOR TROUBLE  OTHER / UNKNOWN

HEAD LAMPS  STEERING  TRAILER EQUIPMENT DEFECTIVE  DISABLED FROM PRIOR ACCIDENT

TAIL LAMPS  TIRE BLOWOUT

NON-MOTORIST LOCATION

INTERSECTION - MARKED CROSSWALK  MIDBLOCK - MARKED CROSSWALK  SHOULDER/ROADSIDE  DRIVEWAY ACCESS  OTHER / UNKNOWN

INTERSECTION - UNMARKED CROSSWALK  TRAVEL LANE - OTHER LOCATION  SIDEWALK  SHARED USE PATHS OR TRAILS

INTERSECTION - OTHER  BICYCLE LANE  MEDIAN/CROSSING ISLAND  FIRST RESPONDER AT INCIDENT SCENE

ACTION

NON-CONTACT  STRAIGHT AHEAD  LEAVING TRAFFIC LANE  WALKING, RUNNING, JOGGING, PLAYING  STANDING OUTSIDE DISABLED VEHICLE

NON-COLLISION  BACKING  PARKED  WORKING  OTHER / UNKNOWN

STRIKING  CHANGING LANES  SLOWING OR STOPPED IN TRAFFIC  PUSHING VEHICLE  APPROACHING OR LEAVING VEHICLE

STRUCK  OVERTAKING/PASSING  DRIVERLESS  STANDING

BOTH STRIKING & STRUCK  MAKING RIGHT TURN  NEGOTIATING A CURVE  OTHER NON-MOTORIST

OTHER / UNKNOWN  MAKING LEFT TURN  ENTERING OR CROSSING SPECIFIED LOCATION

CONTRIBUTING CIRCUMSTANCES

NONE  FOLLOWING TOO CLOSE /ACDA  IMPROPER START FROM A PARKED POSITION  OPERATING DEFECTIVE EQUIPMENT  OPENING DOOR INTO ROADWAY

FAILURE TO YIELD  IMPROPER LANE CHANGE  STOPPED OR PARKED ILLEGALLY  LOAD SHIFTING /FALLING/SPILLING  OTHER IMPROPER ACTION

RAN RED LIGHT  RAN STOP SIGN  UNSAFE SPEED  IMPROPER TURN  LEFT OF CENTER

IMPROPER PASSING  DROVE OFF ROAD  IMPROPER BACKING

SWERVING TO AVOID  WRONG WAY  VISION OBSTRUCTION

LYING IN ROADWAY  NOT DISCERNIBLE

SEQUENCE OF EVENTS

1  21  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

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  24 - OTHER MOVABLE OBJECT

6  6 - EQUIPMENT FAILURE

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  55 - OTHER / UNKNOWN

29 - BRIDGE RAIL  35 - MEDIAN CONCRETE BARRIER  42 - CULVERT  49 - FIRE HYDRANT  50 - WORK ZONE MAINTENANCE EQUIPMENT

30 - GUARDRAIL FACE  36 - MEDIAN OTHER BARRIER  43 - CURB  51 - WALL

37 - TRAFFIC SIGN POST  44 - DITCH

1 FIRST HARMFUL EVENT  1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER  
**24-35563**

DAMAGE

DAMAGE SCALE

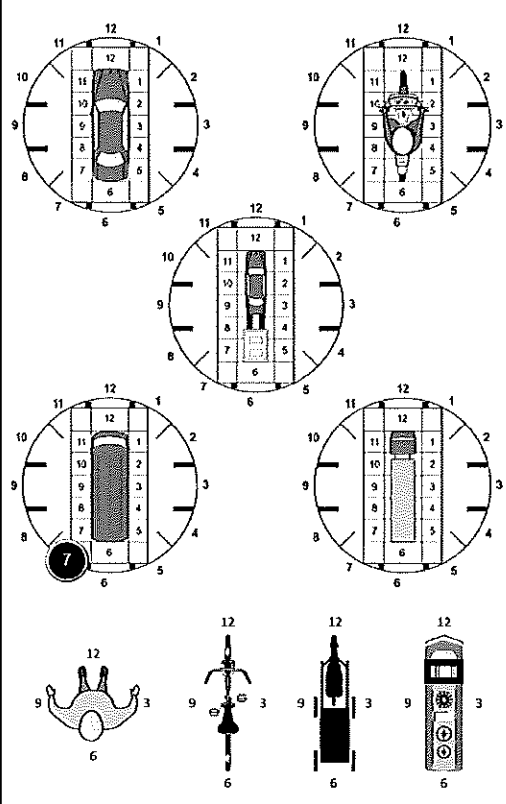
1 - NONE  3 - FUNCTIONAL DAMAGE

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

7  1-12 - REFER TO UNIT DIAGRAM  15 - VEHICLE NOT AT SCENE

99 - UNKNOWN

13 - TOP

TRAFFIC

TRAFFICWAY FLOW

1 - ONE-WAY  6

2 - TWO-WAY

TRAFFIC CONTROL

1 - ROUNDABOUT  4 - STOP SIGN

2 - SIGNAL  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  3 TO  4

1 - NORTH  5 - NORTHEAST

2 - SOUTH  6 - NORTHWEST

3 - EAST  7 - SOUTHEAST

4 - WEST  8 - SOUTHWEST

9 - OTHER / UNKNOWN

UNIT SPEED  2

POSTED SPEED  25

DETECTED SPEED

1 - STATED / ESTIMATED SPEED

2 - CALCULATED / EDR

3 - UNDETERMINED

**OWNER**

UNIT # 2 OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) ADKINS, DAWN OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER) [REDACTED]

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)  
6828 MAPLEBROOKE TRACE, MEDINA, OH, 44256

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

**VEHICLE**

LP STATE OH LICENSE PLATE # JZP1032 VEHICLE IDENTIFICATION # 1HGCV1F43JA193188 VEHICLE YEAR 2018 VEHICLE MAKE HONDA

INSURANCE VERIFIED INSURANCE COMPANY GEICO INSURANCE POLICY # \_\_\_\_\_ COLOR WHI VEHICLE MODEL ACCORD

COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE TYPE OF USE

INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT # OCCUPANTS \_\_\_\_\_ 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? 2

0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN  
1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION  
AUTONOMOUS 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 - MOVING	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

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

1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - MARKED 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 10

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	

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

1 20 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 30 - GUARDRAIL END 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

EVENTS

1 1 FIRST HARMFUL EVENT 1 1 MOST HARMFUL EVENT

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

LOCAL REPORT NUMBER 24-35563

**DAMAGE**

DAMAGE SCALE

2 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

8 0 - NO DAMAGE 14 - UNDERCARRIAGE  
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
99 - UNKNOWN  
13 - TOP

**TRAFFIC**

TRAFFICWAY FLOW	TRAFFIC CONTROL
<u>2</u> 1 - ONE-WAY 2 - TWO-WAY	<u>6</u> 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD <u>2</u>	RAIL GRADE CROSSING
	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION	
FROM _____ TO _____	
UNIT SPEED <u>0</u>	DETECTED SPEED
POSTED SPEED <u>25</u>	1 - STATED / ESTIMATED SPEED <u>1</u> 2 - CALCULATED / EDR 3 - UNDETERMINED





# OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER  
24-35563

<b>OCCUPANT</b>	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER	
	1	BOYES, BRIAN, K.				03/03/1971		53	M	
	ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE				
6817 MAPLEBROOKE TRACE, MEDINA, OH, 44256										
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	
5	1			4		3	1	1	1	

<b>OCCUPANT</b>	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 MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED

<b>OCCUPANT</b>	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 MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED

<b>OCCUPANT</b>	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 MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED

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
<b>INJURED TAKEN BY</b>		6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN
1 - NOT TRANSPORTED / TREATED AT SCENE	6 - CHILD RESTRAINT SYSTEM - REAR FACING	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	<b>EJECTION</b>
2 - EMS	7 - BOOSTER SEAT	8 - THIRD - MIDDLE	1 - NOT EJECTED
3 - POLICE	8 - HELMET USED	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED
9 - OTHER / UNKNOWN	9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED
<b>GENDER</b>		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE
F - FEMALE	10 - REFLECTIVE CLOTHING	12 - PASSENGER IN UNENCLOSED CARGO AREA	<b>TRAPPED</b>
M - MALE	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	13 - TRAILING UNIT	1 - NOT TRAPPED
U - OTHER / UNKNOWN	99 - OTHER / UNKNOWN	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2 - EXTRICATED BY MECHANICAL MEANS
		15 - NON-MOTORIST	3 - FREED BY NON-MECHANICAL MEANS
		99 - OTHER / UNKNOWN	

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

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

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