OHIO DEPARTME	TRAFFIC C	LOCAL REPORT NUMBER *								
X PHOTOS TAKEN	, □ОН-2 □	OH -3 LOCAL	24-39585							
SECONDARY CE	RASH PRIVATE PRO	OTHER REPOR	NCIC * 05213	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR 1 - SOLVED 2 - UNSOLVED 2 1 99 - UNKNOWN						
COUNTY* LOCAL	Print	ATION: CITY, VILLA	GE. TOWNSHIP*			CRASH DATE / TIME* CRASH SEVERITY				
52 1		ntville (Towns	hip of)			07/17/2024 18:21 1 - FATAL 5 2 - SERIOUS INJURY				
ROUTE TYPE ROL	ITE NUMBER PREFIX 1	- NORTH LOCAT	LATITUDE DECIMAL DEGREES SUSPECTED							
ROUTE TYPE ROU	57 1 13	- EAST - WEST	41.106921 3 - MINOR INJURY SUSPECTED							
	TE NUMBER PREFIX 1		LONGITUDE DECIMAL DEGREES 4 - INJURY POSSIB 5 - PROPERTY DAN							
g SR	162 13	- EAST - WEST	-81.837084 ONLY							
REFERENCE POIN	T DIRECTION		INTERSECTIO	N RELATED						
1 - INTERSECT 1 2 - MILE POST	, 2 - SOU	тн	WITHIN INTERSECTION OR ON APPROACH							
3 - HOUSE #	3 - EAS1 4 - WES	 Applications 		BOULEVARD MP - MILEPOST - CIRCLE OV - OVAL	ST - STREET TE - TERRACE	WITHIN INTERC	HANGE AREA	NUMBER OF APPROACHES		
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASUR	RE CR - NUMI	SERED COUNTY ROUTE CT -	COURT PK - PARKWAY	TL - TRAIL		ROAD	WAY		
	1 - MIL 2 - FEE 3 - YAR	TR - NUME	ERED TOWNSHIP HE-	- DRIVE PI - PIKE - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DI	VIDED			
	ATION OF FIRST HARM	FUL EVENT		NER OF CRASH COLLISION/IMI	PACT	DIRECTION OF TRAVE	i.	MEDIAN TYPE		
1 - ON RO		rossover Driveway/Alley .	1 7	COLLISION 4 - REAR-TO-REAR /EEN 5 - BACKING		1 - NORTH 2 - SOUTH		DIVIDED FLUSH MEDIAN <4 FEET)		
3 - IN ME	• • • •	RAILWAY GRADE C	N. C.	MOTOR 6 - ANGLE		3 - EAST 4 - WEST	2 - 1	DIVIDED FLUSH MEDIAN		
5 - ON GO	DRE T	RAILS		ISPORT 7 - SIDESWIPE, SAME 8 - SIDESWIPE, OPPO		4 - WES1	3 - (≥4 FEET 1 DIVIDED, DEPRESSED MEDIAN		
6 - OUISI 7 - ON RA	DE TRAFFIC WAY 13 - B JMP 14 - T	OLL BOOTH	3 - HEAD		OWN			DIVIDED, RAISED MEDIAN ANY TYPE)		
8 - OFF RA	NMP 99 - C	OTHER / UNKNOW	'N	•			J	OTHER / UNKNOWN		
WORK ZONE RE	LATED		RK ZONE TYPE CLOSURE	LOCATION OF CRASH IN V		CONTOUR 1	CONDITI 1	ONS SURFACE		
WORKERS PRES	ENT		SHIFT/ CROSSOVER	WARNING SIGN 2 - ADVANCE WARN		1 - STRAIGHT	1 - DRY	1 - CONCRETE		
LAW ENFORCEM	MENT PRESENT	1 1	K ON SHOULDER EDIAN	3 - TRANSITION ARI		LEVEL 2 - WET 2 - BLACKTOP,				
ACTIVE SCHOO	L ZONE	4 - INTER	MITTENT OR MOVING WORK	4 - ACTIVITY AREA 5 - TERMINATION AI	RFA		3 - SNOW 4 - ICE	ASPHALT		
		5 - OTHE	R	<u> </u>		3 - CURVE LEVEL 4 - CURVE GRADE	5 - SAND, MUI OIL, GRAVI			
1 - DAYLK	GHT CONDITION SHT		1 - CLEAR	WEATHER 6 - SNOW			6 - WATER (ST. MOVING)	ANDING, STONE 5 - DIRT		
2 - DAWN	/DUSK - LIGHTED ROADWAY		1 2 - CLOUDY	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT	CNOW		7 - SLUSH	9 - OTHER / UNKNOWN		
4 - DARK	- ROADWAY NOT LIGHT	1	4 - RAIN	9 - FREEZING RAIN OR FREEZIN			9 - OTHER / Ui	AKNOWN 7 OHKNOWN		
	- UNKNOWN ROADWAY L/UNKNOWN	Y LIGHTING	5 - SLEET, HAIL	99 - OTHER / UNKNOWN						
NARRATIVE		<u></u>				<u> </u>				
			Isworth Road southboun							
			lid not stop in time striki ; tow by Llayd's, Unit #2 :				Road)	Â		
	age. No injuries wer					Unit 1	sworth	2		
						Unit 2	57 (Wadsworth Road)			
				SP 163	(Sharon Copley R		88			
					Constant Copies IN	<u>.</u>				
				<u></u>			<u> </u>			
						Ŷ				
				<u> </u>	Not To Scale					
	TED DATE / TIME		TCH DATE / TIME	ARRIVAL DATE / TIN	l	SCENE CLEARED D		REPORT TAKEN BY X POLICE AGENCY		
	2024 18:21		17/2024 18:22	07/17/2024 18:2	<u> </u>	07/17/2024	MOTORIST			
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME* Bennett, Justin		яескео ву OFFICE larrison, Brett	**************************************	(00 G	SUPPLEMENT		
			OFFICER'S BAD		· · · · · · · · · · · · · · · · · · ·	OFFICER'S BADGE N		(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO		
33 1612						1606		ODPS)		



LOCAL REPORT NUMBER

Dy Pus	UNIT							24	-39585
	WNER NAME: LAST, FIRST, N	SAVE AS DRIVER)		OWNER	R PHONE: INCLUDE AR	EA CODE (C) SAIVE AS DRIVER)			MAGE
	(LAUM, ADAM DRESS: street, city, state, zi	P (SAVE AS DRIVER)					1 - NONE	DAM	AGE SCALE 3 - FUNCTIONAL DAMAGE
	ENDER LANE, MEDI								E 4 - DISABLING DAMAGE NKNOWN
COMMERCI	AL CARRIER: NAME, ADDRES!	S, CITY, STATE, ZIP		Cox	MMERCIAL CARRIER PH	ONE: INCLUDE AREA CODE	[GED AREA(S)
LP STATE L	ICENSE PLATE#	VEHICLE II	DENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	IND	ICATE.	ALL THAT APPLY
	KFF3802 ICE INSURANCE COMPAN		56514A010089 SURANCE POLICY #		2004	HONDA			11 12 1
XINSURAN VERIFIED	LIBERTY MUTUAL		28195075240		GRY	VEHICLE MODEL ACCORD	10	,2	10
COMMERC	TYPE OF USE	IN EMERGENCY RESPONSE	US DOT #	TOW LLO			9 9 3	3	9 9 3
INTERLOC DEVICE EQUIPPED	HIT/SKIP UNIT	# OCCUPANTS VEHICLE	E WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10.001 - 26K LBS. 3 - > 26K LBS.	 R	HAZARDOU MATERIAL CLAS ELEASED LACARD [8 4 5	7.	12 8 7 5 5 4
UNIT TYPE	2 - PASSENGER VAN 7 - MC (MINIVAN) 8 - MC 3 - SPORT UTILITY VEHICLE 10 - M 8 BI	DTORCYCLE 2-WHEELED 13 DTORCYCLE 3-WHEELED 14 ITOCYCLE IOPED OR MOTORIZED 15 CYCLE 16 LL TERRAIN VEHICLE 17	- SNOWMOBILE 19 - BU - SINGLE UNIT 20 - O' TRUCK - SENII-TRACTOR 21 - HI	JS (16+ P. THER VEH EAVY EQU NIMAL WI	ASSENGERS) 24 - HICLE 25 - JIPMENT 26 - TITH RIDER OR 27 -	PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE) OTHER NON-MOTORIST BICYCLE TRAIN UNKNOWN OR HIT/SKIP	9	11 10 9 8 7	12 1 2 2 3 4 6
. 2 .	WAS VEHICLE OPERATING IN AL MODE WHEN CRASH OCCURRE 1 - YES 2 - NO 9 - OTHER / U	INKNOWN AUTONOMOUS 2		HIGH AU	IONAL AUTOMATION JTOMATION TOMATION	9 - UNKNOWN	11 12 1 10 10 2 9 9 3	3	9 9 9 1
SPECIAL FUNCTION	1 - NONE 2 - TAX! 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCHY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIP.	18 - SI 19 - TO 20 - 5A	ARM HOWING NOW REMOVAL DWING AFETY SERVICE ATROL	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	7 6 5	7 ₄	B 7 6 5 5 4
CARGO	NO CARGO BODY TYPE / NOT APPLICABLE BUS 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	13 - Al	UMP ONCRETE MIXER UTO TRANSPORTER ARBAGE/REFUSE	99 - Other / Unknown	9	9 E	
VEUICIE	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	10 - DI	OTOR TROUBLE ISABLED FROM PRIOR CCIDENT	99 - OTHER / UNKNOWN	[€] □- NO DAMA	6 6	6 6 6 1 UNDERCARRIAGE [14]
	1 - INTERSECTION -	4 - MID8LOCK -	7 - SHOULDER/ROADSIDE		RIVEWAY ACCESS	99 - OTHER / UNKNOWN		GE [U]	_
MOTORIST	MARKED CROSSWALK 2 - INTERSECTION - LINMARKED CROSSWALK 3 - INTERSECTION - OTHER	MARKED CROSSIVALK 5 - TRAVEL LANE - OTHER LOCATION 6 - BICYCLE LANE	8 - SIDEWALK 9 - MEDIAN/CROSSING ISLAND	OI 12 - FI	HARED USE PATHS R TRAILS IRST RESPONDER I INCIDENT SCENE		□-тор[13] □	- UNIT	- ALL AREAS [15] NOT AT SCENE [16]
3 ACTION	1 - NON-CONTACT 2 - NON-COLUSION 3 - STRIKING PRE-CRASH 4 - STRUCK ACTIONS 6 STRUCK STRUCK	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	9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS 13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING	15 - W 30 16 - W 17 - Pt 18 - Ai LE 19 - ST	/ALKING, RUNNING, DGGING, PLAYING /ORKING USHING VEHICLE PPROACHING OR EAVING VEHICLE TANDING	21 - STANDING OUTSIDE DISABLED VEHKLE 99 - OTHER / UNKNOWN	0 - NO ĐA 12 1-12 - REF	MAGE ER TO GRAM	UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
	9 - OTHER / UNKNOWN 1 - NONE	8 - FOLLOWING TOO CLOSE	SPECIFIED LOCATION 13 - IMPROPER START FROM	18 - OP	PERATING DEFECTIVE	23 - OPENING DOOR INTO	TRAFFICWAY FLOW	TR	TRAFFIC CONTROL
<u>8</u>	2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 6 - IMPROPER TURN	/ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD	A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	19 - LO /F# 20 - IM	HIPMENT DAD SHIFTING ALLING/SPILLING IPROPER CROSSING TING IN ROADWAY	ROADWAY 99 - OTHER IMPROPER ACTION	1 - ONE-WAY 2 - TWO-WAY 2	2	1 - ROUNDABOUT 4 - STOP SIGN
CIRCUMSTANC	es 7 - LEFT OF CENTER	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION		OT DISCERNIBLE		# OF THROUGH LANES ON ROAD		RAIL GRADE CROSSING 1 - NOT INVLOYED
SEQUENCE			EVENTS				3	1_	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
1 20	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLUSION	20 - M		23 – STRUCK BY FALLBNG, SHIFTING CARGO OR ANYTHING SET IN	UNIT /N	ION-M	IOTORIST DIRECTION
2	3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 6 - EQUIPMENT FAILURE	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER	21 - PA VE 22 - W	ARKED MOTOR	MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 1 TO		1 - NORYH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
	25 - IMPACT ATTENUATOR	COLLISIO 31 - GUARDRAIL END	N WITH FIXED OBJECT - S	TRUCK	C	52 - BUILDING			9 - OTHER / UNKNOWN
4	/ CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE	46 - FEI 47 - M/ 48 - TR	NCE AILBOX REE	53 - TUNNEL 54 - OTHER FIXED OBJECT	UNIT SPEED		DETECTED SPEED
اء	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	50 - W/ M/	ORK ZONE AINTENANCE	99 - OTHER / UNKNOWN			1 - STATED / ESTIMATED SPEED 1 12 - CALCULATED / EDR
6 [29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST	43 - CURB 44 - DITCH	EQ 51 - W	QUIPMENT VALL		POSTED SPEED		

1 MOST HARMFUL EVENT

1 FIRST HARMFUL EVENT

3 - UNDETERMINED

45

1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

24-39585

UNIT#	OWNER NAME: LAST, FIRST,			OWNER PHONE: NCLUDE A	REAL CODE (SAME AS DRIVER)	DAMAGE					
2 OWNER A	EMERSON, MICHAEL DDRESS: STREET, CITY, STATE, 2					1 - NONE	3 - FUNCTIONAL DAMAGE				
1	MPDEN COURT, MED	,				L 3 2-MINOR DA					
3	CIAL CARRIER: NAME, ADDRES			COMMERCIAL CARRIER PA	IONE: EXCLUDE AREA CODE	· · · · · · · · · · · · · · · · · · ·	9 - UNKNOWN				
	,					C	DAMAGED AREA(S)				
LP STATE	LICENSE PLATE #	VEHICL	IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE	IND	ICATE ALL THAT APPLY				
ОН	JDQ8358		1EM5DFC87888	2013	FORD	12	12				
X NSUR	ANCE INSURANCE COMPA	NY I	NSURANCE POLICY #	COLOR	VEHICLE MODEL	" "	1 1				
VERIFI	1	22	70672-SFP-35	WHI	F-150	10 11 1	2 10 11 5 2				
.	TYPE OF USE	TIN EMERGENCY	US DOT#	TOWED BY: COMPANY							
СОМИ		IRESPONSE VEHIC		HAZARDO MATERIAL CLA	US MATERIAL						
DEVICE		# OCCUPANTS	1 - ≤10K LBS.	MATERIAL CLA	ASS # PLACARD ID #	7 5	4				
EQUIP	PED -	2	2 - 10.001 - 26K LBS. 3 - > 26K LBS.	PLACARD			12 7 6				
		N (9-15 SEATS)		MO (LIVERY VEHICLE) 23	- PEDESTRIAN/SKATER		11 12 6				
<u> 4</u>	(MINIVAN) 8 - M	OTORCYCLE 2-WHEELED OTORCYCLE 3-WHEELED	12 CINICAR LINET		- WHEELCHAIR (ANY TYPE) - OTHER NON-MOTORIST	10/	11 2				
UNIT TY	1/01/2016	JTOCYCLE	TRUCK		- BICYCLE	,	· 10 2 - 1				
	10 - n	MOPED OR MOTORIZED ICYCLE	16 - FARM FOURNISHED 22 - A		- TRAIN	∫					
		ALL TERRAIN VEHICLE	17 - MOTORHOME	NEMAL-DRAWN VEHICLE 99	- UNKNOWN OR HIT/SKIP	8	√135√ .				
L	# of TRAILING UNITS	/UTV)				12	7 6 5 12				
	WAS VEHICLE OPERATING IN A		0 - NO AUTOMATION 3 -	- CONDITIONAL AUTOMATION	4 9 - UNKNOWN	""	" " " " " " " " " " " " " " " " " " " "				
3	MODE WHEN CRASH OCCURRE	^{10?} 0		- HIGH AUTOMATION		10/ \	2 10 11 2				
	1-YES 2-NO 9-OTHER/		S 2 - PARTIAL AUTOMATION 5	FULL AUTOMATION			3 9 10 13 73				
	1 - NONE	MODE LEVEL 6 - BUS - CHARTER/TOUR	11 - FIRE	16 - FARM	21 - MAIL CARRIER		/ <u> </u>				
, 1	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - MOWING	99 - OTHER / UNKNOWN						
SPECIAL	3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE 9 - BUS - OTHER	13 - POLICE 14 - Public Utility	18 - SNOW REMOVAL 19 - TOWING		, , ,	7				
FUNCTIO	N 4 - SCHOOL TRANSPORT	10 - AMBULANCE	15 - CONSTRUCTION EQUIP.			ů	6				
	5 - BUS - TRANSIT/COMMUTER	(PATROL			12 12 12				
1 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	4 - LOGGING 5 - INTERMODAL	7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99 - OTHER / UNKNOWN	12 8 A					
CARGO	2 - BUS	CONTAINER CHASSIS	8 - POLE 9 - CARGO TANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER		an Maria	9 3 9 1 3 9 3				
BODY TYPE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	6 - CARGOVAN ÆNCLOSED BOX	10 - FLAT 8£D	14 - GARBAGE/REFUSE			4				
	, 1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6					
VEHICLI	2 - HEAD LAMPS	S - STEERING	8 - TRAILER EQUIPMENT	10 - DISABLED FROM PRIO			6 6 6				
DEFECTS		6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			corol Humprocappuaceriti				
	1 - INTERSECTION -	4 - MIDBLOCK -	7 - SHOULDER/ROADSIDE	10 - DRIVEWAY ACCESS	99 - OTHER / UNKNOWN	∐- NO DAMAG	GE [0]				
	MARKED CROSSWALK 2 - INTERSECTION -	MARKED CROSSWALK 5 - TRAVELLANE -		11 - SHARED USE PATHS		☐- TOP [13]	- ALL AREAS [15]				
MON- MOTORIST LOCATION	UNMARKED CROSSWALK	OTHER LOCATION	9 - MEDIAN/CROSSING ISLAND	OR TRAILS 12 - FIRST RESPONDER		□.	UNIT NOT AT SCENE [16]				
LOCATION	3 - INTERSECTION - OTHER 1 - NON-CONTACT	6 - BICYCLE LANE 1 - STRAIGHT AHEAD	9 - LEAVING TRAFFIC	AT INCIDENT SCENE 15 - WALKING, RUNNING,	21 - STANDING OUTSIDE						
	2 - NON-COLLISION	2 - BACKING	LANE	JOGGING, PLAYING	DISABLED VEHICLE	INITIA 0 - NO DA	AL POINT OF CONTACT MAGE 14 - UNDERCARRIAGE				
1 4	3 - STRIKING 11	3 - CHANGING LANES 4 - OVERTAKING/PASSING	10 - PARKED 11 - SLOWING OR STOPPED	16 - WORKING 17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN	_	ER TO UNIT 15 - VEHICLE NOT AT SCENE				
ACTION	PRE-CRASH	1 5 - MAKING RIGHT TURN	IN TRAFFIC	18 - APPROACHING OR LEAVING VEHICLE			FRAM 99 - UNKNOWN				
	5 - BOTH STRIKING	6 - MAKING LEFT TURN 7 - MAKING U-TURN	12 - DRIVERLESS 13 - NEGOTIATING A CURVE	19 - STANDING		13 - ТОР	33 - OIKNOWN				
	& STRUCK 9 - OTHER / UNKNOWN	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	20 - OTHER NON-MOTORI	ST .		TRAFFIC				
··········	1 - NONE	8 - FOLLOWING TOO CLOS	E 13 - IMPROPER START FROM		23 - OPENING DOOR INTO	TRAFFICWAY FLOW	TRAFFIC CONTROL				
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	/ACDA 9 - IMPROPER LANE	A PARKED POSITION 14 - STOPPED OR PARKED	EQUIPMENT 19 - LOAD SHIFTING	ROADWAY 99 - OTHER IMPROPER	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN				
, 1	4 - RAN STOP SIGN	CHANGE	ILLEGALLY	/FALLING/SPILLING	ACTION	2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN				
CONTRIBUT	J 5 - UNSAFE SPEED ING 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	20 - IMPROPER CROSSING 21 - LYING IN ROADWAY			3 - FLASHER 6 - NO CONTROL				
CIRCUMSTA	NCES 7 - LEFT OF CENTER	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION	22 - NOT DISCERNIBLE		# of THROUGH LANES	RAIL GRADE CROSSING				
SEQUENC	E OF EVENTS					ON ROAD	1 - NOT INVLOVED 2 - INVOLVED-ACTIVE CROSSING				
20	1 OWNER DESIGNATION OF THE	2 COMPATION OF HUTC	EVENTS	10 110 11 07070	22 (20)/2//2//2//2//	<u>3</u> [3 - INVOLVED-PASSIVE CROSSING				
1 20	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	12 - DOWNHEL RUNAWAY 13 - OTHER NON-COLLISION	19 - ANIMAL -OTHER 20 - MOTOR VEHICLE IN	23 – STRUCK BY FALLING, SHIFTING CARGO OR						
	3 - IMMERSION , 4 - JACKKNIFE	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TRANSPORT 21 - PARKED MOTOR	ANYTHING SET IN MOTION BY A MOTOR	UNIT / N	ON-MOTORIST DIRECTION				
2	5 - CARGO / EQUIPMENT	11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	VEHICLE	VEHICLE 24 - OTHER MOVABLE		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST				
	LOSS OR SHIFT 6 - EQUIPMENT FAILURE	OPPOSITE DIRECTION OF TRAVEL	17 - ANIMAL - FARM 18 - ANIMAL - DEER	22 - WORK ZONE MAINTENANCE	OBJECT	FROM 1 TO	2 £46T 7 501771545T				
3		pa: • • •	ION WITH FIXED OBJECT -	EQUIPMENT		FROM [4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN				
4		31 - GUARDRAIL END	38 - OVERHEAD SIGN POST	45 - EMBANKMENT	52 - BUILDING						
	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIE		46 - FENCE 47 - MAILBOX	53 - TUNNEL 54 - OTHER FIXED	UNIT SPEED	DETECTED SPEED				
5	STRUCTURE 27 - BRIDGE PIER OR	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE	48 - TREE 49 - FIRE HYDRANT	OBJECT 99 - OTHER / UNKNOWN	. 0 .	1 - STATEO / ESTIMATED SPEED				
	ABUTMENT	35 - MEDIAN CONCRETE	OR SUPPORT	50 - WORK ZONE MAINTENANCE			4				
6	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 36 - MEDIAN OTHER BARRI		EQUIPMENT		POSTED SPEED	2 - CALCULATED / EDR				
	30 - GUARDRAIL FACE	37 - Traffic Sign Post	44 - DITCH	51 - WALL			2 DEFECTION OF THE PARTY OF THE				

MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER 24-39585									
UNIT #									 						GENDER	
1	KLAUM, TI	ERNAN, F							01/12/2001					23	М	
Ħ	STREET, CITY, S	•				****			CONTACT PHONE - INCLUDE AREA CODE							
0	ILLOW BEND DRIVE, MEDINA, OH, 44256 INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAVE. CITY) SAFETY EQUIPMENT SEATING A										1,10,04	CHELCE	Letterion	TRAPPED		
INJURIES 5	TAKEN BY 1 1					EDEAT FACILITY (6XAE)	CHT	USED		T-Complia HELMET	rr POSITION					
S	 	CENSE NUMBER		OFFENS	E CHARG	ED .	LOCAL	OFFENSE DESCRI			1	+	1 1 1 1 CITATION NUMBER			
OH OH		1		4511.2			CODE	NO PERSON		OÞER∆.			Y43420			
OL CLASS	S ENDORSEMENT RESTRICTION SELECT UP TO 3 DRIVER ALCOH					OI. / DRUG SUSPE	CTED	CONDITION		COHO			DRUG TEST(S)			
4	9 DISTRACTED ALCOI				IANA	1	STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4			
UNIT #	NAME-LAST	FIRST, MIDDLE			OTHER	RDRUG			1	1 1	ATE OF BIRTH	1	1	AGE	GENDER	
2	WARRED COT,	THOS, WIDDLE									ATE OF BIRTH			AGE	GENDER	
	: STREET, CITY, S	TATE, ZIP							CONT	ACT PHO	NE - INCLUDE A	REA CODE				
TOR																
INJURIES	INJURED EN	MS AGENCY (NAME)		INJURED 1	TAKEN TO: N	EDKAL FAGLITY (NAVE,	спу)	SAFETY EQUIPMENT USED	Про	T-Complian	SEATING IT POSITION	AIR BA	G USAGE	EJECTION	TRAPPED	
ON 5	BY 1							4	Шмс	HELMET	1		1 1 1 1			
OL STATE	OPERATOR LIC	CENSE NUMBER		OFFENS	E CHARG	ED	LOCAL CODE	OFFENSE DESCRI	PTION			CITAT	CITATION NUMBER			
OH			·····	<u> </u>												
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIV	RACTED		OL / DRUG SUSPE		CONDITION	ALCOHOL TEST STATUS TYPE VALUE			STATUS	DRUG TEST(S) STATUS TYPE RESULTS SELECT UP TO			
4			BY .	1	OTHE	t DRUG		1	1111	1		1	1			
UNIT #	NAME: LAST,	FIRST, MIDDLE						****		D	ATE OF BIRTH			AGE	GENDER	
ADDRESS:	: STREET, CITY, S	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
NJURIES	INJURED EN	MS AGENCY (NAME)		INJURED 1	raken to: M	EDICAL FACILITY (NAVE, O	(my)	SAFETY EQUIPMENT			SEATING	AB SIA	G USAGE	EJECTION	TRAPPED	
INJURIES	TAKEN BY							USED	DOT-COMPLIANT POSITION MC HELMET							
OL STATE	OPERATOR LIC	CENSE NUMBER	······································	OFFENS	E CHARG	ED	LOCAL CODE	OFFENSE DESCRI	PTION			CITAT	CITATION NUMBER			
<u> </u>																
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIV	RACTED ALCOHOL DRUG SUSPECTED COL			CONDITION	CONDITION ALCOHOL TEST STATUS TYPE VALUE			DRUG TEST(S) STATUS TYPE RESULTS SELECT U					
			ВУ		1	DRUG	AII.		214102	ITPE	VALUE .	SIAIUS	ITPE	K620F12	SECECT UP TO 4	
ראו	URIES	SEATING POSITION	,	AIR BAG		OL CLAS	SS	OL RESTRIC	TION(S) DRI	VER DISTRA	CTION	I.	ST STA	TUS	
1 - FATAL 2 - SUSPECTED	crnous	(MOTORCYCLE DRIVER)	1 - NOT DE 2 - DEPLOY	ED FRONT		1 - CLASS A		1 - ALCOHOL INTER DEVICE	LOCK		OT DISTRACTED ANUALLY OPERA	IING AN	1 - NON 2 - TEST	E GIVEN REFUSED		
INJURY 3 - SUSPECTED			3 - DEPLOY 4 - DEPLOY	ED BOTH		2 - CLASS B 3 - CLASS C		2 - CDL INTRASTATI 3 - CORRECTIVE LEN			CTRONIC MMUNICATION		3 - TEST	GIVEN,	D SAMPLE	
INJURY 4 - POSSIBLE IN			5 - NOT AP	RONT/SIDE NOT APPLICABLE 4 - REGULAR CLASS				4 - FARM WAIVER 5 - EXCEPT CLASS A	(TEXTING, TYPING, BUS DIALING)			C TOEC	/UNUSABLE			
5 - NO APPARI		6 - SECOND - RIGHT SIDE	9 - DEPLOY	(MEN) UN	KNOWN	(OHIO = D) 5 - M/C MOPED C	NLY	6 - EXCEPT CLASS A & CLASS B BUS		cc	LKING ON HAND MMUNICATION LKING ON HAND	DEVICE	RESU 5 - TEST	LTS KNOV GIVEN,	N.	
INJURIES	TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	E. 1 - Not eji	JECTIO		6 - NO VALID OL		7 - EXCEPT TRACTO 8 - INTERMEDIATE L RESTRICTIONS	ICENSE	cc	MMUNICATION HER ACTIVITY W	DEVICE	\$34-04-0535-0550	LTS UNKN	atietie bilbereereb	
1 - NOT TRAN		9 - THIRD - RIGHT SIDE	2 - PARTIAI 3 - TOTALL	LLY EJECTE		OL ENDORSE	MENT	9 - LEARNER'S PERN RESTRICTIONS	ACT	6 - PA	CTRONIC DEVICE SSENGER		1 - NON	E	ST TYPE	
2 - EMS	AT SCENE	OF TRUCK CAB	4 - NOT AP			H - HAZMAT		10 - LIMITED TO DA ONLY		IN:	HER DISTRACTION SIDE THE VEHICLE		2 - BLOC 3 - URIN	E		
3 - POLICE	ALZ: I ALIP.	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT,	T 1 - NOT TR	RAPPED M - MOTORCYCLE 11 - LIM P - PASSENGER 12 - LIM			11 - LIMITED TO EM 12 - LIMITED - OTH	R	OL	HER DISTRACTION	LE .	4 - BREA 5 - OTHE				
9 - OTHER / L			2 - EXTRICA		ANS	N - TANKER Q - MOTOR SCOO	YICO	13 - MECHANICAL D	S, HAND	9+01	CONDITIO	Ti .	DRU 1 - NON	JG TEST	TYPE	
1 - NONE USE	QUIPMENT 0	UNENCLOSED CARGO AREA 13 - TRAILING UNIT	3 - FREED E			R - THREE-WHEEL			CONTROLS, OR OTHER ADAPTIVE DEVICES) 1 - APPAF - MILITARY VEHICLES ONLY 2 - PHYSI			IAL	2 - BLOC 3 - URIN	AD CH		
2 - SHOULDER USED	BELT ONLY	14 - RIDING ON VEHICLE EXTERIOR				MOTORCYCLE S - SCHOOL BUS		15 - MOTOR VEHICE WITHOUT AIR B	ES RAKES	3 - EM DEF	OTIONAL (E.G., RESSED, ANGRY,		4 - OTHE	R	re l	
3 - LAP BELT O 4 - SHOULDER		(NON-TRAILING UNIT) 15 - NON-MOTORIST				T - DOUBLE & TRI TRAILERS	PLE	16 - OUTSIDE MIRRO 17 - PROSTHETIC AI		4 - ILL	다음 많은 사람들이 아르아 아이들을 하다고 수를 하는데 다.			IETAMINE	ESULT(S)	
	FRAINT SYSTEM	99 - OTHER / UNKNOWN				X - TANKER / HAZ	MAT	18 - OTHER		FA	L ASLEEP, FAINTE IGUED, ETC.			ITURATES ODIAZEPIN	les .	
	RAINT SYSTEM					GENDE	R			ME	DER THE INFLUE DICATIONS / DRI		4 - CANN 5 - COCA	INE IABINOIDS	•	
- REAR FAC 7 - BOOSTER S	EAT					F - FEMALE					COHOL HER / UNKNOW!	1	7 - OTHE			
8 - HELMET US 9 - PROTECTIV	E PADS USED					M - MALE U - OTHER / UNK!	NWON						8 - NEGA	TIVE RESU	LTS	
(ELBOWS, I 10 - REFLECTIV 11 - LIGHTING	E CLOTHING	į														
/ BICYCLE 99 - OTHER / L	ONLY															

OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER 24-39585						
UNIT #		ST, FIRST, MIDDLE				,	DA	TE OF BIRTH	39303	AGE	GENDER		
1	KLAUM,	ADAM					04.	/05/1974		50	М		
E	STREET, CIT	y, state, zip .ANE, MEDINA, OH, 4	ASEG				CONTACT PHONE - INCLUDE AREA CODE						
	INJURED	EMS AGENCY (NAME)	14230	INJURED TAKEN TO: MEDICAL FACILITY (N	NAVE. CITY)	SAFETY EQUIPMENT		SEATING	AIR BAG USA	GE EJECTION	N TRAPPED		
5	TAKEN BY 1					4	MC HELMET	POSITION 3	1	1	1		
UNIT #		ST, FIRST, MIDDLE					DA	TE OF BIRTH		AGE	GENDER		
2	2												
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONI	E - INCLUDE AR	EA CODE				
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT				SEATING	AIR BAG USA	GE EJECTION TRAPPED			
5	BY 1			4			MC HELMET	роспіон 6	5	1	1		
UNIT #	NAME: LA	ST, FIRST, MIDDLE		<u> </u>			DA	TE OF BIRTH		AGE	GENDER		
2		,											
ADDRESS	: STREET, CET	y, STATE, ZIP					CONTACT PHONI	E - INCLUDE ARI	FA CODE				
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (N	NAVE CITY)	SAFETY EQUIPMENT	SEATING AIR BAG			GE EJECTION	N TRAPPED		
5	TAKEN BY 1					4	MC HELMET	POSITION 5	5	1	1		
UNIT #	NAME: LA	ST, FIRST, MIDDLE					DA	TE OF BIRTH	·	AGE	GENDER		
5									:				
ADDRESS	: STREET, CIT	y, state, zip					CONTACT PHONI	E - INCLUDE ARI	EA CODE				
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAGILITY (NAME, CITY) SAFETY EQUIPMENT			ПОТ-Сомецинт МС НЕЕМЕТ	SEATING POSITION	AIR BAG USA	SE EJECTION	N TRAPPED		
	IN.	IURIES	SAFET	Y EQUIPMENT USED		SEATING POS	I I		AIR BAG	USAGE			
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY 5 - NO APPARENT INJURY 5 - CHILD R INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE REAR F, 2 - EMS 7 - BOOSTE 3 - POLICE 8 - HELMET 9 - OTHER / UNKNOWN 9 - PROTECT (ELBOW. GENDER 10 - REFLECT / BOOKER SERVICE /			E OCCUPANT DER BELT ONLY USED IT ONLY USED DER & LAP BELT USED RESTRAINT SYSTEM - RESTRAINT SYSTEM - ACING RESTRAINT SYSTEM - ACING ER SEAT	NGER) F TRUCK CAB FER ENCLOSED RAILING UNIT WITH CAP) NCLOSED EXTERIOR	DEPLOYED DYED FROID DYED SIDE DYED BOTT T/SIDE APPLICABL DYMENT U EJECTED ALLY EJECTE APPLICABL TRAPP TRAPPED CATED BY ANICAL M D BY	ONT DE DITH BLE UNKNOWN HION ECTED TED BLE PPED O							
NAME: LA	AST, FIRST, MI	DDLE			99 - OTH	IER / UNKNOWN		TE OF BIRTH	MECHANI	AGE	GENDER		
ADDRESS	STREET, CIT	Y, STATE, ZIP	· · · · · · · · · · · · · · · · · · ·				CONTACT PHONE	E - INCLUDE ARE	A CODE				
NAME: LA	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GEND						
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
NAME: LA	AST, FIRST, MI	DDLE					DATE OF BIRTH AGE GI						
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						