OBO DEPARTMENT  TRAFFIC CRASH REPORT  *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT  1.0.CAL REPORT NUMBER *												
PHOTOS TAKEN OH -2 OH -3 LOCAL INFORMATION RIVER STYX/LAKE RIDG								24-52239				
	OH-1P	OTHER REPO	RTING AGENCY NAME *			NCIC *	HIT/SKIP 1 - SOLVED	NUMBER OF UN				
SECONDARY CI	PRIVATE PRO	OPERTY Mon	tville Police Department			1	98 - ANIMAL					
COUNTY* LOCAL	1-CITY	CATION: CITY, VILL	AGE. TOWNSHIP*		CRASH DATE / TIME* CRASH SEVERIT							
52 3	2 - VILLAGE MC 3 - TOWNSHIP	ontville (Town		09/19/2024 11:37   1 - FATAL   5   2 - SERIOUS INJUR								
ROUTE TYPE ROL		1 - NORTH LOCA 2 - SOUTH	TION ROAD NAME	ROAD TYPE			LATITUDE D	CIMAL DEGREES	SUSPECTED			
ROUTE TYPE RO	1 13	D EACY	er Styx	RD			41,113	460	3 - MINOR INJURY SUSPECTED			
g ROUTE TYPE ROL			RENCE ROAD NAME (ROAD, N	AILEPOST, HOUSE #\	1	ROAD TYPE	4 - INJURY POSSIBLE					
EREN		2 - SOUTH	ke Ridge			DR	LONGITUDE 6 -81.813	ŀ	5 - PROPERTY DAMAGE			
REF		dita estua a como terres estate e			-01.013	ONLY						
REFERENCE POIN 1 - INTERSECT	ION FROM REFEREN	CE	ROUTE TYPE		D TYPE HIGHWAY	RO - ROAD	I MATTERIA DETE	N RELATED				
1 1 2 - MILE POST	, 2 , 2 - SOI	UTH		- AVENUE LA - L/		SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH					
3 - HOUSE #	3 - EAS 4 - WE	**	BL -	BOULEVARD MP - N - CIRCLE OV - (		ST - STREET TE - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACE					
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASU		andere (dichelala a dichela dichere) (mali) 🗀 aun S			TL - TRAIL	ROADWAY					
	1 - MII	LES	DR	- DRIVE PI - PI - HEIGHTS PL - PI		WA - WAY	ROADWAY	UVIDED				
50,00	2 3-YA	T 1 10000000000000000000000000000000000		- HEIGHTS PL - PI	LACE							
1 - ON RO	ATION OF FIRST HARM	MFUL EVENT	3	NER OF CRASH COLL COLLISION 4 - REAR		ACT	DIRECTION OF TRAV		MEDIAN TYPE			
1 2-ON SI	HOULDER 10 -	DRIVEWAY/ALLEY	ACCESS 1 BETV	VEEN 5 - BACK			1 - NORTH 2 - SOUTH		IVIDED FLUSH MEDIAN <4 FEET )			
3 - IN ME		RAILWAY GRADE SHARED USE PAT	110000110	MOTOR 6 - ANGL			3 - EAST	2 - D	( <4 FEET ) 2 - DIVIDED FLUSH MEDIAN ( >4 FEET ) 3 - DIVIDED, DEPRESSED MEDIAN			
5 - ON GO	***	TRAILS	TRA	ISPORT 7 - SIDES	SWIPE, SAME	DIRECTION SITE DIRECTION	4 - WEST					
6 - OUTSI 7 - ON RA	DE TRAFFIC WAY 13 -	BIKE LANE TOLL BOOTH	2 - REAF 3 - HEAF	(-EMD	ER / UNKNO			IVIDED, RAISED MEDIAN				
8 - OFF R		OTHER / UNKNO	Į.	J. Olive	LICY OURING	****		ither / Unknown				
WORK ZONE RE	LATED	w	ORK ZONE TYPE	LOCATION OF C	CRASH IN V	VORK ZONE	CONTOUR	CONDITIO	ONS SURFACE			
		1 - LAN	E CLOSURE	1 - BEFOR	RE THE 1ST V	WORK ZONE	131	11,	121			
WORKERS PRES	·	2 - LAN	E SHIFT/ CROSSOVER	3 L	NING SIGN NCE WARNI	NG AREA	1 - STRAIGHT	1 - DRY	1 - CONCRETE			
LAW ENFORCES	MENT PRESENT		RK ON SHOULDER MEDIAN	1	SITION ARE		LEVEL 2 - WET		2 - BLACKTOP,			
D ACTIVIT FELLOO	2011		RMITTENT OR MOVING WORK	4 - ACTIV			2 - STRAIGHT GRADE	3 - SNOW 4 - ICE	BITUMINOUS, ASPHALT			
ACTIVE SCHOO	LZONE	5 - OTI-	ER	2 - IEKMI	ination ar	(EA	3 - CURVE LEVEL	5 - SAND, MUD				
	GHT CONDITION			WEATHER			4 - CURVE GRADE 9 - OTHER	OIL, GRAVE 6 - WATER (STA	CTONE			
1 - DAYLK			1 - CLEAR 1 2 - CLOUDY	6 - SNOW 7 - SEVERE CROSSW	VINDS		MNKNOWN	MOVING)	5 - DIRT 9 - OTHER			
3 - DARK	- LIGHTED ROADWAY		3 - FOG, SMOG, SMOKE			SNOW		7 - SLUSH 9 - OTHER / UN	CONTRACTOR			
	- Roadway Not Ligh - Unknown Roadwa	I	4 - RAIN	9 - FREEZING RAIN C		G DRIZZLE						
	: / UNKNOWN	AT LIGHTENO	5 - SLEET, HAIL	99 - OTHER / UNKNO	IOWN							
NARRATIVE												
deer jumped in time for the driv pulled onto Lak the vehicle. The	Unit #1 was traveling north on River Styx Rd, just south of Lake Ridge Dr., when a deer jumped into the roadway from a densely wooded area to the east, allowing no time for the driver of Unit #1 to avoid hitting it. The deer scampered off, and Unit #1 pulled onto Lake Ridge Dr., after sustaining moderate damage to the entire front of the vehicle. The driver felt it was unsafe to drive, and Jon's towing arrived to recover											
the vehicle. No	injuries were claime	ed at the scen-	2.		H-11-11	- LA	S. Charles	18.00				
					_			<u>Je</u>	THE TOTAL PROPERTY OF THE PARTY			
						=			Land Control of the C			
				~		_	_					
								River	Styx Rd			
					۲							
					JO ⊕ B B B B B B B B B B B B B B B B B B							
				Not To Scale								
					Lake			, , , , , , , , , , , , , , , , , , ,				
]												
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME REPO									REPORT TAKEN BY			
	1024 11:37		/19/2024 11:37		2024 11:42		09/19/202		REPORT TAKEN BY  POLICE AGENCY			
				03/13/20			····	· r 16.6V	- MOTORIST			
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL E MINUTES	OFFICER'S NAME* Hazek, Daniel			ескев ву OFFICEF arrison, Brett	3AAA	Two	SUPPLEMENT			
			OFFICER'S BAD	GE NUMBER*	(CORRECTIO				(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO			
49 1607						1606						

Choo Die	PARTHUMT UNIT		LOCAL REPORT NUMBER									
- White-film	UNII		24-52239									
1 M	WNER NAME: LAST, FIRST, I			OWNER	R PHONE (OLCUDE A)	EA CODE (EL SAME AS DRIVER)	D A M A G E  DAMAGE SCALE					
	ORRIS, CAMERON, PRESS: STREET, CITY, STATE, Z		JKE				1 - NONE 3 - FUNCTIONAL DAMAGE					
≥ 4 CARVER	DR, MEDINA, OH,						3 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
COMMERCIA	L CARRIER: NAME, ADDRES	S, CITY, STATE, ZIP		Co	IMMERCIAL CARRIER PH	ONE: EXCLUDE AREA CODE	9 - UNKNOWN  DAMAGED AREA(S)					
LP STATE 11	CENSE PLATE #	Vei	HICLE IDENTIFICATION #	VEHICLE YEAR VEHICLE MAKE			INDICATE ALL THAT APPLY					
	KU8231		2SKADC3MH492268		2021	SUBARU		12				
INSURANC VERIFIED	INSURANCE COMPAI	NY	INSURANCE POLICY #	COLOR VEHICLE MODEL				11 12				
VERIFIED	VERIFIED   GEICO   4418942910				LBL JED BY: COMPANY N	FORESTER	10 11 2	10 11 1 2				
COMMERCI	,	IN EMERGENCY RESPONSE		NOF	I'S TOWING		9 9 3	9 J				
INTERLOCE	TERLOCK # OCCUPANTS VEHICLE WEIGHT GVWR/GCW				MATERIAL CLA	IS MATERIAL SS # PLACARD ID #						
EQUIPPED			2 - 10.001 - 26K LBS 3 -> 26K LBS.		RELEASED PLACARD [		6 5	12				
		N (9-15 SEATS)				PEDESTRIAN/SKATER	• "	6				
3	(MINIVAN) 8 - M	OTORCYCLE 2-WHEELEI OTORCYCLE 3-WHEELEI	D 14 - SINGLE UNIT 20	- BUS (16+ F - OTHER VE		WHEELCHAIR (ANY TYPE) OTHER NON-MOTORIST	10					
UNIT TYPE	1 (0) 1001 (	JTOCYCLE KOPED OR MOTORIZED	D 15 - SEMI-TRACTOR	- HEAVY EQU		BICYCLE	9 (	9 3 3				
		ICYCLE ILL TERRAIN VEHICLE	16 - FARM EQUIPMENT 22 17 - MOTORHOME			TRAIN UNKNOWN OR HIT/SKIP	7.	7 5 7				
		(UTV)	, moreteene				12 7	6				
	VAS VEHICLE OPERATING IN A		MOITAMOTUA ON - 0	3 - CONDIT	TONAL AUTOMATION	9 - UNKNOWN		11 12				
	NODE WHEN CRASH OCCURRE	D?0			UTOMATION		10/ 11/2					
<u> </u>	-YES 2-NO 9-OTHER/L	JNKNOWN AUTONO	OMOUS 2 - PARTIAL AUTOMATION	5 - FULL AU	JTOMATION		$\left[\begin{array}{c c} 9 & \begin{array}{c c} \hline & 10 \\ \hline & 9 \\ \end{array}\right] = \left[\begin{array}{c c} 2 \\ \hline & 3 \\ \end{array}\right]$	9 9 10 12 7				
1	1 - NONE	6 - BUS - CHARTER/		16 - F	ARM	21 - MAIL CARRIER						
	2 - TAX <del>1</del> 3 - Electronic Ride	7 - BUS - INTERCITY 8 - BUS - SHUTTLE			HOWING NOW REMOVAL	99 - OTHER / UNKNOWN						
SPECIAL FUNCTION 4	SHARING 4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY		OWING		5	6				
5	S - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQ		AFETY SERVICE ATROL			12 12 12				
1 1 1	- NO CARGO BODY TYPE / NOT APPLICABLE	4 - LOGGING 5 - INTERMODAL	7 - GRAIN/CHIPS/GRAVE			99 - OTHER / UNKNOWN	12 B.B.					
CARGO	: - BUS : - VEHICLE TOWING	CONTAINER CHA	8 - POLE ASSIS 9 - CARGO TANK		ONCRETE MIXER AUTO TRANSPORTER		',	1 9 T 3 9 8 3				
BODY 3	ANOTHER MOTOR VEHICLE	6 - CARGOVAN ÆNCLOSED BOX	X 10 - FLAT BED	14 - G	SARBAGE/REFUSE		\0\ '	4 0				
	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES	7 - WORN OR SLICK TIRE		OTOR TROUBLE	99 - OTHER / UNKNOWN	6	0				
VEHICLE	2 - HEAU LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE		ISABLED FROM PRIOR CCIDENT	i						
	, psttortcrou	/ NEDBLOCK	3. CHOULDER BOADGO		- DO TO 1411 1 6 6 5 6 6	CO CALICO HAWKING	- NO DAMAGE (	0 } UNDERCARRIAGE [ 14 ]				
1 1	I - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - MARKED CROSS	7 - SHOULDER/ROADSIDI SWALK 8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER			- TOP [13] - ALL AREAS [15]					
MOTORIST	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE - OTHER LOCATIO	ON 9 - MEDIAN/CROSSING ISLAND									
	3 - INTERSECTION - OTHER 1 - NON-CONTACT	1 - STRAIGHT AHEAD		AT INCIDENT SCENE  15 - WALKING, RUNNING, 21 - STANDING OUTSIDE			INITIAL POINT OF CONTACT					
2	2 - NON-COLLISION	2 - BACKING . 3 - CHANGING LANE	LANE ES 10 - PARKED	JOGGING, PLAYING DISABLED VEHICLE 16 - WORKING 99 - OTHER / UNKNOWN			0 - NO DAMAGE 14 - UNDERCARRIAGE					
	3 - STRIKING PRE-CRASH	4 - OVERTAKING/PA	ASSING 11 - SLOWING OR STOPPI	ED 17 - P	USHING VEHICLE PPROACHING OR	7, 4,,,,,,		TO UNIT 15 - VEHICLE NOT AT SCENE				
		6 - MAKING LEFT TU 7 - MAKING U-TURN	JRN 12 - DRIVERLESS	LE	EAVING VEHICLE		DIAGRAM 99 - UNKNOWN					
	& STRUCK	8 - ENTERING TRAFF	FIC 14 - ENTERING OR CROSS	ING 20 - O	tanding Other non-motoris	т						
	9 - OTHER / UNKNOWN 1 - NONE		SPECIFIED LOCATION  O CLOSE 13 - IMPROPER START FRO	OM 18 - OF	PERATING DEFECTIVE	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		QUIPMENT DAD SHIFTING	ROADWAY 99 - OTHER IMPROPER	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN				
1	4 - RAN STOP SIGN 5 - UNSAFE SPEED	CHANGE 10 - IMPROPER PASS	ELEGALLY SING 15 - SWERVING TO AVOID		ALLING/SPILLING IPROPER CROSSING	ACTION	2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL				
CONTRIBUTING CIRCUMSTANCES	6 - IMPROPER TURN 5 7 - LEFT OF CENTER	11 - DROVE OFF ROA	AD 16 - WRONG WAY	21 - LY	ING IN ROADWAY OT DISCERNIBLE		# of THROUGH LANES	RAIL GRADE CROSSING				
2				/**			ON ROAD	1 - NOT INVLOVED				
SEQUENCE O			EVENTS					2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING				
1 [ 18 ]	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	7 - SEPARATION OF U 8 - RAN OFF ROAD RE	GHT 13 - OTHER NON-COLLIS	ION 20 - M	IOTOR VEHICLE IN	23 - STRUCK BY FALLING, SHIFTING CARGO OR	E 55 1.100 1	***************************************				
	3 - IMMERSION 4 - JACKKNIFE	9 - RAN OFF ROAD LE 10 - CROSS MEDIAN	EFT 14 - PEDESTRIAN 35 - PEDALCYCLE		ransport Arked Motor	ANYTHING SET IN MOTION BY A MOTOR	UNII / NON	-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST				
2 [	5 - CARGO / EQUIPMENT LOSS OR SHIFT	11 - CROSS CENTERLE OPPOSITE DIRECT	INE - 16 - RAILWAY VEHICLE	VE	EHK1E	VEHICLE 24 - OTHER MOVABLE OBJECT		2 - SOUTH 6 - NORTHWEST				
з []	6 - EQUIPMENT FAILURE	OF TRAVEL	18 - ANIMAL - DEER	M	AINTENANCE QUIPMENT	Gasec 1	<sub>FROM</sub> 2 то 1	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST				
	25 - EMPACT ATTENUATOR	CC 31 - GUARDRAIL END	OLLISION WITH FIXED OBJECT 38 - OVERHEAD SIGN PO	- STRUCK	•	52 - BUILDING		9 - OTHER / UNKNOWN				
4	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRI 33 - MEDIAN CABLE B	- PORTABLE BARRIER 39 - LIGHT / LUMINARIES		ENCE	53 - TUNNEL 54 - OTHER FIXED	UNIT SPEED	DETECTED SPEED				
5	STRUCTURE 27 - BRIDGE PIER OR	34 - MEDIAN GUARDE BARRIER		48 - TR 49 - FII	REE RE HYDRANT	OBJECT 99 - OTHER / UNKNOWN	1 40 1	1 - STATED / ESTIMATED SPEED				
	ABUTMENT 28 - BRIDGE PARAPET	35 - MEDIAN CONCRE BARRIER		50 - W Ma	ORK ZONE AINTENANCE	2		1				
6	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER E 37 - TRAFFIC SIGN PO	BARRIER 43 - CURB	EC 51 - W	QUIPMENT VALL		POSTED SPEED	2 - CALCULATED / EOR				
111	FIRST HARMFUL EVEN		MOST HARMFUL EVENT	"			l 45 l	3 - UNDETERMINED				
		'لــــا										

MOTORIST / NON-MOTORIST										LOCAL REPORT NUMBER 24-52239							
	UNIT #									+	DATE OF BIRTH AGE GEN						
	1	MORRIS, C	AMERON, MICHAEL AND	ORE						12/18/1995					28	М	
RIST	(		STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
OTO	4 CARVE	ARVER DR, MEDINA, OH, 44256															
ON-P	INJURIES	TAKEN				MEDICAL FACILITY (NAVE,	CITY)	SAFETY EQUIPMENT USED		Т-Сомрија	.	AIR 8A	IG USAGE	E EJECTION	TRAPPED		
T/N	5	BY 1	CENTER MANAGEMEN						4	1	HELMET	1 1	-	1 1		1 1	
OTORIST / NON-MOTOR	OLSIAIE	E OPERATOR LICENSE NUMBER OFFENSE CHARG					iED	LOCAL	OFFENSE DESCRI	IPTION			CITATION NUMBER				
δ	OH OL CLASS	S ENDORSEMENT RESTRICTION SELECT UP TO 3 DRIVER ALCOH				tor ( paris susp	<u>                                     </u>		Δ	LCOHO	L TEST		DOLL	G TEST(	य		
	OF CLASS	DISTRACTED ALCO			HOL / DRUG SUSPE		CONDITION	STATUS	TYPE	VALUE	STATUS	TYPE		SELECT UP TO 4			
5	4	4 BY 1 OTHE				R DRUG	1			1		. 1	1				
	UNIT #	NAME: LAST,	FIRST, MIDDLE								DATE OF BIRTH				AGE	GENDER	
	Apparce	STEET CITY S	TATE 710				······		**************************************					丄			
OTORIST / NON-MOTORIST	ADDRESS:	STREET, CITY, S	IAIE, ZIP								CONTACT PHONE - INCLUDE AREA COD						
MOT	INJURIES	INJURED EN	VIS AGENCY (NAME)		INJURED	TAKEN TO: N	MEDICAL FACILITY (NAVE.	CITY}	SAFETY EQUIPMENT	-		SEATING	AIR BA	AIR BAG USAGE EJECTION TRAPPED			
NON		TAKEN BY							USED	DOT-COMPLIANT POSITION POSITION							
IST /	OL STATE	OPERATOR LIC	CENSE NUMBER		OFFENS	SE CHARG	iED	LOCAL	OFFENSE DESCRI				CITA	CITATION NUMBER			
O TO								CODE									
ž	OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3		VER		OL / DRUG SUSPI		CONDITION	Α	LCOHO	L TEST	EST		DRUG TEST(S)		
			÷	BA D12	TRACTED		HOL MARIJU R DRUG	JANA		STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS:	SELECT UP TO 4	
	UNIT #	NAME: LAST,	FIRST, MIDDLE	l		I	.,,,,,,,			Τ	<u>                                     </u>	ATE OF BIRTH	<u>i</u>	<u> </u>	AGE	GENDER	
Ş	ADDRESS:	STREET, CITY, ST	TATE, ZIP	·····				CONTACT PHONE - INCLUDE AREA CODE									
DTORIST / NON-MOTORIST					_												
M-N	INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO:					TAKEN TO: N	MEDICAL FACILITY (NAVE,	V (HAVE, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT POSITION			G USAGE	EJECTION	TRAPPED	
N/L		BY LLJ	CENSE NUMBER					Linca		DITION DELINET			—	CITATION MUNICO			
ORIS	OLZIAIE	OPERATOR LIC	TEM2E MOWREK		OFFENS	iE CHARG	ŒD	LOCAL	OFFENSE DESCRI	PTION			CITAT	CITATION NUMBER			
ΟM	OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRI	VER	ALCOF	OL / DRUG SUSPE	DL / DRUG SUSPECTED CONDITION			ALCOHOL TEST			DRUG TEST(S)			
					ISTRACTED ALCOHOL MARIJUANA						STATUS						
3				, B1		OTHE	R DRUG										
1 -	INJU - FATAL	JRIES	SEATING POSITION  1 - FRONT - LEFT SIDE	1 - NOT D	AIR BAC		OL CLA	3S	OL RESTRIC			VER DISTRA  OT DISTRACTED	CTION		<b>EST STA</b> NE GIVEN	TUS	
2 -	SUSPECTED :	SERIOUS	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	3 - DEPLO			1 - CLASS A 2 - CLASS B		DEVICE 2 - CDL INTRASTATI		2 - M	ANUALLY OPERAT	ING AN	2 - TES1	T REFUSED T GIVEN		
3 -	INJURY - SUSPECTED I INJURY	MINOR	4 - SECOND - LEFT SIDE	FRONT	DEPLOYED BOTH 3 - CLASS C 3 - CORRECTIVE LE RONT/SIDE 4 - FARM WAIVER				3 - CORRECTIVE LEN 4 - FARM WAIVER	ISES	MMUNICATION I	DEVICE					
4 -	POSSIBLE IN		5 - SECOND - MIDDLE					5 - EXCEPT CLASS A 6 - EXCEPT CLASS A		BUS DIATING 3 - TALKING ON HANDS-			EE RESULTS KNOWN				
5 -	NO APPAREN	NT INJURY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	E	5 - M/C MOPED ONLY & CLASS 8 BUS 7 - EXCEPT TRACTO 6 - NO VALID OL 8 - INTERMEDIATE L										OWN		
	INJURIES - NOT TRAN	TAKEN BY	o mino import	1 - NOT EI 2 - PARTIA	TTA ETECLE	D	OL ENDORS	MEMIT	RESTRICTIONS 9 - LEARNER'S PERM		EL	THER ACTIVITY W ECTRONIC DEVICE				ST TYPE	
	/TREATED / - EMS		10 - SLEEPER SECTION		LY EJECTED RESTRICTIONS PPLICABLE H - HAZMAT 10 - LIMITED TO DAY					6 - PASSENGER 1 - NO YLIGHT 7 - OTHER DISTRACTION 2 - BLC				2 - BLOO	OD		
	- POLICE		11 - PASSENGER IN OTHER ENCLOSED CARGO	1	TRAPPED M - MOTORCYCLE ONLY 11 - LIMITED TO EMI												
9	- OTHER/UI	nknown	AREA (NON-TRAFING UNIT,	1 - NOT TE 2 - EXTRIC	P - PASSENGER 12 - LIMITED - OTHE					EVICES 9 - OTHER / UNKNOWN			٧ .	5 - OTHER DRUG TEST TYPE			
K	AFETY E	QUIPMENT	12 - PASSENGER IN UNENCLOSED CARGO AREA		NICAL MEA	4NS	Q - MOTOR SCOO		CONTROLS, OR ADAPTIVE DEVI	OTHER	OTHER				1 - NONE 2 - BLOOD		
	- NONE USED - SHOULDER B		13 - TRAILING UNIT 14 - RIDING ON VEHICLE	NON-M	SECHANICA	IL MEANS	R - THREE-WHEEL MOTORCYCLE		14 - MILITARY VEHIC 15 - MOTOR VEHICL	CLES ONLY	3 - EN	iysical impairmi Iotional (e.g.,		3 - URIN 4 - OTH			
	USED - LAP BELT ON		EXTERIOR (NON-TRAILING UNIT)				S - SCHOOL BUS T - DOUBLE & TRI	PLE	WITHOUT AIR B	OR	DIS	RESSED, ANGRY, TURBED)		DRUG	TEST R	ESULT(S)	
	SHOULDER 8		15 - NON-MOTORIST 99 - OTHER / UNKNOWN				TRAILERS X - TANKER / HAZ	MAT	17 - PROSTHETIC AI 18 - OTHER	,		LL ASLEEP, FAINTE	D,	2 - BAR8	HETAMINES BITURATES		
1	- FORWARD						2010				FATIGUED, ETC. 6 - UNDER THE INFLU			4 - CAN	ZODIAZEPIN NABINOIDS		
	- REAR FACIN - BOOSTER SE						GENDE F - FEMALE	<b>K</b>			AU	DICATIONS / DRU COHOL	į,		TES / OPIO	IDS	
8 -	HELMET USE PROTECTIVE	Ð					M - MALE	nom.			9 - OTHER / UNKNOW			7 - OTHI 8 - NEG/	ER ATIVE RESUI	LTS	
	(ELBOWS, KI - REFLECTIVE	NEES, ETC)					U - OTHER / UNK	NOWN									
		PEDESTRIAN															
99	- OTHER / UN				genjaritik								and the same	anguva			

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER 24-52239						
	UNIT #	· · · · · · · · · · · · · · · · · · ·	NST, FIRST, MIDDLE					D/	ATE OF BIRTH	32239	AGE	GENDER		
ANT	ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
dnood								CONTACT FILES	r - average Ar	EA CODE				
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (P.	łame, Cety)	SAFETY EQUIPMENT	MC HELMET	SEATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED		
I	UNIT #	NAME: LA	AST, FIRST, MIDDLE						DATE OF BIRTH					
CCUPANT	ADDRESS:	STREET, CIT	Y, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE							
Ö	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (N	NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT POSITION AIR BAG U			SE EJECTION	TRAPPED		
	UNIT #							D/	ATE OF BIRTH		AGE	GENDER		
OCCUPANT	ADDRESS:	RESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
ő	INJURIES	INJURED TAKEN BY	EMS AGENCY NAME	7. · · · · · · · · · · · · · · · · · · ·	INJURED TAKEN TO: MEDICAL FACILITY (N	IAVE GTY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION			TRAPPED		
	UNIT #	NAME: LA	JI ST, FIRST, MIDDLE						TE OF BIRTH		AGE	GENDER		
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHON	E - INCLUDE ARI	EA CODE				
ö	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (N	SAFETY EQUIPMENT		DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
			JURIES	SAFET	Y EQUIPMENT USED	]	SEATING POS			AIR BAG	ISAGE			
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY  INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN  GENDER F - FEMALE M - MALE U - OTHER / UNKNOWN			MINOR INJURY URY IT INJURY D TAKEN BY ORTED / SCENE INOWN	2 - SHOULI 3 - LAP BEL 4 - SHOULI 5 - CHILD F FORWA 6 - CHILD F REAR F. 7 - BOOSTE 8 - HELMET 9 - PROTEC (ELBOW 10 - REFLEC 11 - LIGHTI / BICYC	R SEAT	2 - FRON 3 - FRON 4 - SECO (MOT 5 - SECO 7 - THIRL (MOT 8 - THIRL 10 - SLEE 11 - PASS CARR SUC 12 - PASS CARR 13 - TRAI 14 - RIDII (NON 15 - NON	FORCYCLE DRIVE IT - MIDDLE IT - RIGHT SIDE ND - LEFT SIDE ORCYCLE PASSE ND - MIDDLE ND - RIGHT SIDE ORCYCLE SIDE O ORCYCLE SID	AR)  FIRE  TRUCK CAB ER ENCLOSED  WIGHER  FIRE  1 - NOT EJECTED  2 - PARTIALLY EJECTED  3 - TOTALLY EJECTED  4 - NOT APPLICATE  4 - NOT APPLICATE  AUTHORY  NCLOSED  TRA  1 - NOT TRAPPED  2 - EXTRICATED B  MECHANICAL  3 - FREED BY			i E NKNOWI ON EED D EED			
WITNESS		ST, FIRST, MI	DDLE Y, STATE, ZIP	- <b></b>		<del></del>		DA CONTACT PHONE	TE OF BIRTH	A CODE	AGE	GENDER		
Ş,	NAME: LAS	ST, FIRST, MI	DDLE					DA	TE OF BIRTH		AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
NAME: LAST, FIRST, MIDDLE								DA	AGE	GENDER				
ADDRESS: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE					