OHIO DEPARTME	TRAFFI	c Cr		REPOR		ENOTES MANDATOR	Y FIELD FOR SUP	PLEMENT REPORT		LOCAL REPO		R *			
PHOTOS TAKEN OH -2 OH -3 LOCAL INFORMATION 4600 PARADISE									24-58516						
SECONDARY CE	ASH OH-1P	LI OTTIER						NCIC *	HIT/SKIP 1 - SOLVED	NUMBER OF U	OO 98 - ANIMAL				
	PRIVATI	_		Montville Polic				05213	2 - UNSOLVED			33 - ONKNOWN			
COUNTY* LOCAL	1 - CITY 2 - VILLAGE			Y. VILLAGE. TOWNS	IIP*				CRASH DATI	- FATAL					
52 3	3 - TOWNSHIP			ownship of)					10/21/202	- SERIOUS INJURY					
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST Paradise								ROAD TYP	41.078	3	SUSPECTED - MINOR INJURY				
	TE NUMBER DE	4 - \ FIX 1 - I	WEST	Paradise						DECIMAL DEGREES	4	SUSPECTED 4 - INJURY POSSIBLE			
ROUTE TYPE ROU	TE NOMBER PRE	2 - 9	SOUTH								5	- PROPERTY DAMAGE			
RE	L	4-1	WEST	4652				-81.856103 ONLY INTERSECTION RELATED							
1 - INTERSECT	FROM REF	ERENCE	. 10	ROUTE TO		AL - ALLEY	ROAD TYPE	AY RD - ROAD	D WITHIN INT						
3 2 - MILE POST	, ,2	- NORTH - SOUTH - EAST	1		AV - AVENUE			SQ - SQUARE		WITHIN INTERSECTION OR ON APPROACH					
3 - HOUSE #	4	- WEST		STATE ROUTE		BL - BOULEVARD CR - CIRCLE	MP - MILEPOS OV - OVAL	ST - STREET TE - TERRACE	WITHIN INTI	RCHANGE AREA	NUI	MBER OF APPROACHES			
DISTANCE FROM REFERENCE	UNIT OF N	MEASURE	CR -	- NUMBERED CO	JNTY ROUTE	CT - COURT	PK - PARKWA			ROAL	WAY				
	1 - MILES 2 - FIELT TR - NUMBERED TOWNSHIP ROUTE DR - DRIVE PI - PIKE WA - WAY HE - HEIGHTS PL - PLACE									ROADWAY DIVIDED					
LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT									DIRECTION OF TRA	VEL	MEDIA	AN TYPE			
1 - ON ROADWAY 9 - CROSSOVER 1 - NOT COLLISION 4 - REAR-TO-REAR									1 - NORTH	1 1-	DIVIDED F	LUSH MEDIAN			
3 - IN ME		RADE CROSSING					2 - SOUTH		(<4 FEET) 2 - DIVIDED FLUSH MEDIAN						
4 - ON ROADSIDE 12 - SHARED US 5 - ON GORE TRAILS				E PATHS OR		VEHICLES IN	6 - ANGLE 7 - SIDESWIPE, s	AME DIRECTION	4 - WEST		(≥4 FEET)				
	DE TRAFFIC WAY					KEAK-END	B - SIDESWIPE, C	PPOSITE DIRECTION				DEPRESSED MEDIAN RAISED MEDIAN			
7 - ON RAMP 14 - TOLL BOOTH 3 - HEAD-ON 9 - OTHER / UNKNOWN 8 - OFF RAMP 99 - OTHER / UNKNOWN									(ANY TYPE) 9 - OTHER / UN						
											IDITIONS SURFACE				
WORK ZONE RE			1	- LANE CLOSURE	ITPE			ST WORK ZONE	CONTOUR			121			
WORKERS PRES	ENT		2	- LANE SHIFT/ CR	OSSOVER	LJ.	WARNING SIG		1 - STRAIGHT	1 - DRY	J	1 - CONCRETE			
LAW ENFORCE	IENT PRESENT	Пı	3	- WORK ON SHO OR MEDIAN	ULDER	100	- TRANSITION		LEVEL	2 - WET		2 - BLACKTOP,			
4 - INTERMITTENT OR MOVING WORK 4 - ACTIVITY AREA								2 - STRAIGHT GRADE	3 - SNOW 4 - ICE		BITUMINOUS, ASPHALT				
ACTIVE SCHOO	ZONE		5	- OTHER		5	- TERMINATION	N AREA	3 - CURVE LEVEL	5 - SAND, MU		3 - BRICK/BLOCK			
Charles Construction (Charles	GHT CONDITION					WEATHER			4 - CURVE GRADE 9 - OTHER	OIL, GRAV	CTONE				
1 - DAYLIGHT 1 - CLEAR 6 - SNOW 1						CROSSWINDS		/UNKNOWN	MOVING)		5 - DIRT				
3 - DARK - LIGHTED ROADWAY 3 - FOG, SMOG, SMOKE 8 - BLOWING						IRT, SNOW		7 - SLUSH 9 - OTHER / U	NKNOWN	9 - OTHER / UNKNOWN					
NOTE: THE STATE OF				MARK TO THE REAL PROPERTY OF T	4 - RAIN 9 - FREEZING RAIN OR FREEZING DRIZZLE 5 - SLEET, HAIL 99 - OTHER / UNKNOWN										
222 2020000	/UNKNOWN	DWA!	LIGITIII	3	SLECT, HAIL	99 - OTHER	/ UNKNOWN								
NARRATIVE															
Unit #1 was trav	9														
hanging wires f pole was pulled												(A)			
power as a resu	lt. Unit #1 susta	ained d	damage	to its trailer (Trailer #132) near the front		Paradise Rd.		4PowerLine	$\overline{\Psi}$				
driver's side and															
and advised they are self-insured company and, as a result, do not have an insurance company or a policy # to provide.									1						
										ma-					
									/						
										500					
CRASH BEDOD	ED DATE / TIME			DISPATCH DATE / TIME ARRI			RRIVAL DATE /	TIME T	SCENE CLEADED	DATE / TIME	REPORT TAKEN BY				
200 1000 1000 1000						1	0/21/2024 14	******	SCENE CLEARED DATE / TIM 10/21/2024 16:08			POLICE AGENCY			
8 8	024 14:21	_		10/21/2024		'	1/2024			L 4 10,00		MOTORIST			
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION	TIME	TOTA		S NAME*			LaFond, Chris	1 (.27)	in	V	SUPPLEMENT			
						BADGE NUMBER	*			WOLLIGE DIS DATE OF MUNICIPAL IN					
360	0		107 1608					1602 TO ANI							

OHOO DEPARTMENT OF PUBLIC BAPTET	IT					LC		ORT NUMBER
Company Cold	1 1					***************************************	24-5	58516
	, FIRST, MIDDLE (DSAVE AS DRIVER)	C	WNER	PHONE::NCLUDE ARE	EA CODE (SAME AS DRIVER)			MAGE
1 UMBARGER AN UMBARGER AN UMBARGER AND UM						1 - NONE	DAMA	GE SCALE 3 - FUNCTIONAL DAMAGE
186 S COUNTY RD, 600						2 2 - MINOR E	DAMAGE	4 - DISABLING DAMAGE
COMMERCIAL CARRIER: NAME,			CON	MERCIAL CARRIER PHO	ONE: INCLUDE AREA CODE		9 - UNK	
ROY UMBARGER & SON	S INC., 186 S 600 E, FRA	NKLIN, IN, 4						ED AREA(S)
LP STATE LICENSE PLATE #	VEHICLE	IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	IN	DICATE AL	LL THAT APPLY
IN 3613811		49X5SD674177		2025	PETERBILT	11 12 1		12 1
INSURANCE OF STATE OF THE STATE		ISURANCE POLICY #		COLOR WHI	OTHER/UNKNOWN			
TYPE OF US		US DOT #	TOW	ED BY: COMPANY N		1 "Z ` ;	7,	12 \
XCOMMERCIAL GOVERNME		543745				9 9 3	3	9 9 3
INTERLOCK	# OCCUPANTS VEHIC	LE WEIGHT GVWR/GCWR 1 - ≤10K LBS.		HAZARDOU: ATERIAL CLAS	S MATERIAL S # PLACARD ID #		7.	
DEVICE HIT/SKIP U EQUIPPED	3 I	2 - 10.001 - 26K LBS. 3 - > 26K LBS.		ELEASED .ACARD			· 4	
1 - PASSENGER CAR	6 - VAN (9-15 SEATS)				PEDESTRIAN/SKATER	7 6 5	الم	12 1 6
15 2 - PASSENGER VAN	7 - MOTORCYCLE 2-WHEELED	13 - SNOWMOBILE 19 - BU			WHEELCHAIR (ANY TYPE)	10	人品	12 2
LINIT TYPE 3 - SPORT UTILITY	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE	TRUCK	HER VEH AVY EQU		OTHER NON-MOTORIST BICYCLE	l /	- 10	
VEHICLE 4 - PICK UP	TO THOSE OF THOSE OF THE	15 - SEMI-TRACTUR 16 - FARM FOLLIDMENT 22 - AN	IMAL WI	TH RIDER OR 27 -	TRAIN] e	_ 9	3 3
5 - CARGO VAN	11 - ALL TERRAIN VEHICLE	17 - MOTORHOME	IMAL-DR	VALVIN VEHICLE 99 - 1	UNKNOWN OR HIT/SKIP	7,	し団	B1√74
1 # OF TRAILING UN	(ATV/UTV) ITS					12	XI.	5 12
WAS VEHICLE OPERATI		0 - NO AUTOMATION 3 - 4	CONDITIO	ONAL AUTOMATION	d = HMKNAMM	1 2	i	1 12
MODE WHEN CRASH C	CCURRED? 0			TOMATION	J- OHAROMA		\ ²	10 11 2
2 1-YES 2-NO 9-0	THER / UNKNOWN AUTONOMOUS	2 - PARTIAL AUTOMATION 5 - I	FULL AUT	OMATION		10 2	٦,	10 2 -
1 - NONE	MODE LEVEL 6 - BUS - CHARTER/TOUR	11 - FIRE	16 - FA	D) é	21 - MAIL CARRIER	<u> </u>	_]	
. 1 , ^{2 - TAXI}	7 - BUS - INTERCITY	12 - MILITARY		OWING	99 - OTHER / UNKNOWN		/4	7 5 4
3 - ELECTRONIC RIDE SPECIAL SHARING	8 - BUS - SHUTTLE 9 - BUS - OTHER	13 - POLICE 14 - PUBLIC UTILITY	18 - SN 19 - TO	OW REMOVAL				, , ,
FUNCTION 4 - SCHOOL TRANSPO 5 - BUS - TRANS(T/CO)	RT 10 - AMBULANCE	15 - CONSTRUCTION EQUIP.	20 - SA	FETY SERVICE				6
				TROL			12 1	12 12
99 1 - NO CARGO BODY T	YPE 4 - LOGGING 5 - INTERMODAL	7 - GRAIN/CHIPS/GRAVEL 8 - POLE	11 - DU	JMP INCRETE MIXER	99 - OTHER / UNKNOWN	12 8 A	<u></u>	
CARGO 2 - BUS BODY 3 - VEHICLE TOWING	CONTAINER CHASSIS 6 - CARGOVAN	9 - CARGO TANK		JTO TRANSPORTER		1 P P 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9 ,6	3 9 7 3 9 8 3
BODY 3 - VEHICLE TOWING TYPE ANOTHER MOTOR V		10 - FLAT BED	14 - GA	ARBAGE/REFUSE			"	' 1
1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MO	TOR TROUBLE	99 - OTHER / UNKNOWN	6	}	
VEHICLE 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOVVOUT	8 - TRAILER EQUIPMENT DEFECTIVE		SABLED FROM PRIOR CIDENT			6	6 6
DEFECTS	v me bronos.					□- NO DAMA	GE[0]	undercarriage [14]
1 - INTERSECTION -	4 - MIDBLOCK -	7 - SHOULDER/ROADSIDE		IVEWAY ACCESS	99 - OTHER / UNKNOWN	П		П
MARKED CROSSWA NON- 2 - INTERSECTION -	5 - TRAVEL LANE -	8 - SIDEWALK	OR	ARED USE PATHS TRAILS		∐- TOP[13]	_	LI- ALL AREAS [15]
MOTORIST LINMARKED CROSS LOCATION 3 - INTERSECTION - OT		9 - MEDIAN/CROSSING ISLAND		IST RESPONDER INCIDENT SCENE			- UNIT N	IOT AT SCENE [16]
1 - NON-CONTACT	1 - STRAIGHT AHEAD	9 - LEAVING TRAFFIC			21 - STANDING OUTSIDE	INIT	IAL POIN	T of CONTACT
2 - NON-COLLISION	2 - BACKING 1 3 - CHANGING LANES	LANE 10 - PARKED		GGING, PLAYING ORKING	DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO D	MAGE	14 - UNDERCARRIAGE
3 3-STRIKING PR	4 - OVERTAKING/PASSING -CRASH 5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED IN TRAFFIC		SHING VEHICLE PROACHING OR		1 1 '* 1		NIT 15 - VEHICLE NOT AT SCENE
	TIONS 6 - MAKING LEFT TURN	12 - DRIVERLESS	LEA	AVING VEHICLE			GRAM	99 - UNKNOWN
& STRUCK	7 - MAKING U-TURN 8 - ENTERING TRAFFIC	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING		ANDING HER NON-MOTORIST		13 - TOP		
9 - OTHER / UNKNOW		SPECIFIED LOCATION				e e e e e e e e e e e e e e e e e e e	TRA	FFIC
1 - NONE 2 - FAILURE TO YIEL		E 13 - IMPROPER START FROM A PARKED POSITION		ERATING DEFECTIVE JIPMENT	23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW 1 - ONE-WAY		TRAFFIC CONTROL
3 - RAN RED LIGHT 1 4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY		AD SHIFTING LLING/SPILLING	99 - OTHER IMPROPER ACTION	2 - TWO-WAY		1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN
5 - UNSAFE SPEED	10 - IMPROPER PASSING	15 - SWERVING TO AVOID	20 - IMP	ROPER CROSSING	,,,,,,,,,,	<u> 2</u>	L_6_	3 - FLASHER 6 - NO CONTROL
CONTRIBUTING 6 - IMPROPER TURN CIRCUMSTANCES 7 - LEFT OF CENTER	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY 17 - VISION OBSTRUCTION		ng in Roadway T discernible		# of THROUGH LANES		RAIL GRADE CROSSING
						ON ROAD		1 - NOT INVLOVED
SEQUENCE OF EVENTS		EVENTS				₂	.	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
1 54 1 - OVERTURN/ROLL 2 - FIRE/EXPLOSION	OVER 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWAY		IMAL - OTHER 2 OTOR VEHICLE IN	3 – STRUCK BY FALLING, SHIFTING CARGO OR	·		2 2 - HAAOCAEO-LA22NAE CKO22NAO
3 - IMMERSION	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	TRA	INSPORT	ANYTHING SET IN MOTION BY A MOTOR	UNIT / I		TORIST DIRECTION
2 4 - JACKKNIFE 5 - CARGO / EQUIPM		15 - PEÐALCYCLE 16 - RAILWAY VEHICLE		RKED MOTOR IICLE 2.	VEHICLE 4 - OTHER MOVABLE			1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST
LOSS OR SHIFT 6 - EQUIPMENT FAIL	OPPOSITE DIRECTION OF TRAVEL	17 - ANIMAL - FARM 18 - ANIMAL - DEER		ORK ZONE INTENANCE	OBJECT OTHER MOVABLE	, , , .		3 - EAST 7 - SOUTHEAST
3 8 - EQUIPMENT FAILU			EQU	JIPMENT		FROM 4 TO	3	4 - WEST 8 - SOUTHWEST
25 - IMPACT ATTENU	ATOR 31 - GUARDRAIL END		45 - EMi		2 - BUILDING			9 - OTHER / UNKNOWN
/CRASH CUSHIC	N 32 - PORTABLE BARRIER	39 - LIGHT / LUMINARIES SUPPORT	46 - FEN 47 - MA	KCE 5.	3 - TUNNEL 4 - OTHER FIXED	UNIT SPEED		DETECTED SPEED
5 STRUCTURE 5 27 - BRIDGE PIER OR	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE	48 - TRE	E	OBJECT 9 - OTHER / UNKNOWN	, 40 ,		1 - STATED / ESTIMATED SPEED
ABUTMENT	35 - MEDIAN CONCRETE	OR SUPPORT	50 - WO	RK ZONE INTENANCE	,	_ 70		4
6 28 - BRIDGE PARAPE 29 - BRIDGE RAIL	BARRIER 36 - MEDIAN OTHER BARRIES	42 - CULVERT R 43 - CUR8		HPMENT		POSTED SPEED		1 2 - CALCULATED / EDR

51 - WALL

28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE

1 FIRST HARMFUL EVENT

1 MOST HARMFUL EVENT

3 - UNDETERMINED

50

Osoo De	PARINEMI SC BAFETTI SC	OTORIST / N	ON-	Μo	TOR	RIST					LOCAL R					
UNIT #		, FIRST, MIDDLE			·····				1	-	24 DATE OF BIRTH	-5851		AGE	GENDER	
1	GRANT, J										05/29/1962			62	M	
ADDRESS	: STREET, CITY, :	STATE, ZIP					······································		CONT		ONE - INCLUDE	AREA CODE				
9 404 N C		T., COLFAX, IN, 46035						1				****				
INJURIES	TAKEN	MS AGENCY (NAME)		INJURED	TAKEN TO: I	MEDICAE FACILITY (HAVE	CITY)	SAFETY EQUIPMENT USED		T-Complete		AIR BA	AIR BAG USAGE EJECTION		1 TRAPPED	
5	BY 1	ICENSE NUMBER			*******			4	<u> </u>	HELMET	1		1	1	1	
ADDRESS 404 N C INJURIES 5 OL STATE	OPERATOR L	ICEWZE WOWREK		OFFENS	OFFENSE CHARGED LOCAL OFFE				UPTION			CITA	CITATION NUMBER			
OL CLASS	ENDORSEMEN	T RESTRICTION SELECT UP TO 3	DRI		LALCOL	HOL / DRUG SUSPECTED	CONDITION	Δ	LCOHO	DL TEST		DRH	DRUG TEST(S)			
		RESTRICTION SEECE OF 10 3		FRACTED					STATUS	TYPE	VALUE	STATUS	ТҮРЕ		SELECT UP 70 4	
	<u> </u>			1	ОТНЕ	R DRUG		1	1	1		1	1			
UNIT #	NAME: LAST	, FIRST, MIDDLE								ı	DATE OF BIRTH			AGE	GENDER	
₽ ADDRESS	: STREET, CITY, S	STATE, ZIP		· · · · · · · · · · · · · · · · · · ·					COM	ACT DUC	NE WELFE				···	
ADDRESS INJURIES OL STATE		57776, Zii							CONI	ACT PHO	ONE - INCLUDE A	AREA CODE				
INJURIES		MS Agency (NAME)		INJURED	TAKEN TO: I	MEDICAL FACILITY (HAVE,	CITY)	SAFETY EQUIPMENT		Т-Сомрца	SEATING	AIR BA	IG USAGE	FIECTION	TRAPPED	
NON	TAKEN BY L							USED		HELMET						
OL STATE	OPERATOR L		OFFENS	SE CHARG	ED LOCAL CODE		OFFENSE DESCRI	PTION			CITA	TION N	UMBER	•		
olo	<u></u>															
OL CLASS	ENDORSEMEN	RESTRICTION SELECT UP TO 3		VER FRACTED		HOL / DRUG SUSPE		CONDITION	A STATUS	LCOHO TYPE	OL TEST VALUE	STATUS	DRUG TYPE	TEST(SELECT UP TO 4	
			ВУ		l H	R DRUG			314103	1172	• VALUE	SIAIUS	HPE	KESULIS	SEEC. 07 10 4	
UNIT #	NAME: LAST	, FIRST, MIDDLE		•						Ĺ	DATE OF BIRTH	1	-	AGE	GENDER	
14	STREET, CITY, S	STATE, ZIP							CONT	АСТ РНО	ONE - INCLUDE A	AREA CODE				
OT STATE OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE	INJURED E	MS AGENCY (NAME)		INILIBEO	TAVEN TO: B	MEDICAL FACILITY (HAVE,	cm/	SAFETY EQUIPMENT	-		SEATING	A10 E14	CUEACE	EJECTION	TRAPPED	
NO	TAKEN BY	MS AGENCY (NAME)		ENJORED	TAKEN TO. I	BIDICAC FACILITY (BAVE,	City	USED		T-COMPUA	NT POSITION	AIK BA	G USAGE	EJECTION	IRAPPED	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHARG	i£D	LOCAL	OFFENSE DESCRI	PTION			CITA	TION NU	JMBER	<u> </u>	
TOR							CODE									
OL CLASS	ENDORSEMEN	RESTRICTION SELECT UP TO 3	1		_	IOL / DRUG SUSPE		CONDITION	Α	LCOHO	L TEST		DRUG	TEST(S)	
			DIST BY	RACTED	l⊨ ¨	HOL MARUL R DRUG	JANA		SUTATE	TYPE	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4	
INI	URIES	SEATING POSITION		AIR BAG		OL CLAS	33	OL RESTRIC	TION/S	ופת	VER DISTRA	CTION	 	 EST STA	THE	
1 - FATAL		1 - FRONT - LEFT SIDE	1 - NOT DE	PLOYED		1 - CLASS A		1 - ALCOHOL INTER	standigt.	1 - N	OT DISTRACTED		1 - NON	IE GIVEN		
2 - SUSPECTED INJURY	SERIOUS	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOY	ED SIDE		2 - CLASS B		DEVICE 2 - CDL INTRASTATE		ELE	ANUALLY OPERAT		3 - TEST			
3 - SUSPECTED INJURY	MINOR	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	FRONT/ 5 - NOT AF	SIDE		3 - CLASS C 4 - REGULAR CLAS	SS	3 - CORRECTIVE LEN 4 - FARM WAIVER 5 - EXCEPT CLASS A		(Ti	OMMUNICATION EXTING, TYPING, ALING	DEVICE	/ UN	USABLE	D SAMPLE	
4 - POSSIBLE IN 5 - NO APPARE	化硫烷 经货船转 经收款债款	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	9 - DEPLO)			(OHIO = D)		6 - EXCEPT CLASS A & CLASS B BUS		3 - T/ CC	ALKING ON HAND DMMUNICATION	DEVICE	4 - TEST RESU 5 - TEST	JLTS KNOW	M	
Baltaniana		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	E	JECTIO	N	5 - M/C MOPED C 6 - NO VAUD OL	JIVLY	7 - EXCEPT TRACTOR 8 - INTERMEDIATE L		CC	LKING ON HAND OMMUNICATION	DEVICE		JLTS UNKN	OWN	
1 - NOT TRAN	TAKEN BY ISPORTED	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	1 - NOT EI 2 - PARTIA		D	OL ENDORSE	MENT	RESTRICTIONS 9 - LEARNER'S PERM	(IT	EL	THER ACTIVITY W ECTRONIC DEVICE ASSENGER		ALCO 1 - NON		ST TYPE	
/TREATED 2 - EMS	and the second second	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALL 4 - NOT AP			H - HAZMAT		RESTRICTIONS 10 - LIMITED TO DA	YUGHT	7-0	GSENGER THER DISTRACTIO SIDE THE VEHICLE	N	2 - BLOC 3 - URIN	OD		
3 - POLICE		11 - PASSENGER IN OTHER ENCLOSED CARGO	Ī	RAPPE	D	M - MOTORCYCLE P - PASSENGER		ONLY 11 - LIMITED TO EM 12 - LIMITED - OTHE		Π 8-O	THER DISTRACTION	N	4 - BREA 5 - OTHE	ATH		
9 - OTHER / L	INKNOWN	AREA (NON-TRAILING UNIT, EUS, PICK-UP WITH CAP)	1 - NOT TR 2 - EXTRICA	ATEO BY		N - TANKER		13 - MECHANICAL D (SPECIAL BRAKE	EVICES		THER / UNKNOW!	1	DRU	UG TEST	ТҮРЕ	
4.17 (4.54) 4.44, 4.74	QUIPMENT	12 - PASSENGER IN UNENCLOSED CARGO AREA	3 - FREED E			Q - MOTOR SCOC R - THREE-WHEEL		CONTROLS, OR ADAPTIVE DEVI	OTHER CES)	11.	PARENTLY NORM	IAL	1 - NON 2 - BLOC	OD		
1 - NONE USE 2 - SHOULDER		13 - TRAIUNG UNIT 14 - RIDING ON VEHICLE	NON-M	ECHANICA	AL MEANS	MOTORCYCLE S - SCHOOL BUS		14 - MILITARY VEHIC 15 - MOTOR VEHICL	ES	3 - EN	IYSICAL IMPAIRMI MOTIONAL (E.G.,		3 - URIN 4 - OTHE			
USED 3 - LAP BELT O 4 - SHOULDER		EXTERIOR RION-TRAILING UNIT) 15 - NON-MOTORIST				T - DOUBLE & TRI	PLE	WITHOUT AIR B 16 - OUTSIDE MIRRO 17 - PROSTHETIC AIR	⊃R	DIS	PRESSED, ANGRY, TURBED)		process from the		ESULT(S)	
USED	RAINT SYSTEM	99 - OTHER / UNKNOWN				TRAILERS X - TANKER / HAZ	MAT	18 - OTHER			LL ASLEEP, FAINTE	D,	2 - BARB	HETAMINES ITURATES		
- FORWARD 6 - CHILD REST	FACING					CEMPE				6 - UN	TIGUED, ETC. IDER THE INFLUEI	VCE OF	4 - CANN	ODIAZEPIN NABINOIDS		
- REAR FACI 7 - BOOSTER S	NG					GENDE F - FEMALE				AU	:DICATIONS / DRU COHOL :HER / UNKNOWN			TES / OPIO	IDS	
8 - HELMET US 9 - PROTECTIVI	ED					M - MALE U - OTHER / UNK	IOWN.			,,,,,	The state of the s	100	7 - OTHE 8 - NEGA	R KTIVE RESU	LTS	
(ELBOWS, K	NEES, ETC)					O-OTHER/ UNK	-CANIA									
11 - LIGHTING / BICYCLE (- PEDESTRIAN ONLY															
99 - OTHER / U			produktiva k				164 (174 (174)	Properties in the	gravinsk.	adalah di					namena V	

OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER 24-58516					
UNIT #	NAME: LA	ST, FIRST, MIDDLE					DA		AGE	GENDER		
ADDRESS:	L : STREET, CIT	Y, STATE, ZIP		***************************************			CONTACT PHON	E - INCLUDE AR	EA CODE			
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	***************************************	INJURED TAKEN TO: MEDICAL FACRITY (WAVE, CITY) SAFETY EQUIPMENT			DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTIO?	TRAPPEC	
UNIT #	NAME: LA	ST, FIRST, MIDDLE					ĐA		AGE	GENDER		
ADDRESS:	: STREET, CHT	Y, STATE, ZIP	X ((((((())))))				CONTACT PHONI	E - INCLUDE AR	FA CODE			
) 	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (HAVE, CITY) SAFETY EQUIPMI			DOT-COMPIUM POSITION AIR BAG USAGE EJECTION					
UNIT #	 -	ST, FIRST, MIDDLE					DATE OF BIRTH			AGE	GENDER	
ADDRESS:	: STREET, CIT	Y, STATE, ZIP		. 4,44		**************************************	CONTACT PHONE	E - INCLUDE ARI	EA CODE			
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING AIR BAG US		E EJECTION	TRAPPED	
UNIT #	NAME: LA	ST, FIRST, MIDDLE					DATE OF BIRTH			AGE	GENDER	
ADDRESS:	STREET, CIT	Y, STATE, ZIP	***************************************				CONTACT PHONE	- INCLUDE ARI	EA CODE			
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAVE, CITY)		SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED	
2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY 5 - NO APPARENT INJURY 5 - CHII INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE REA 2 - EMS 7 - BOC 3 - POLICE 8 - HELI 9 - OTHER / UNKNOWN 9 - PRO (ELE GENDER 10 - REI F - FEMALE 11 - LIG M - MALE			2 - SHOULE 3 - LAP BEL 4 - SHOULE 5 - CHILD R FORWA 6 - CHILD R REAR F/ 7 - BOOSTE 8 - HELMET 9 - PROTEC (ELBOW 10 - REFLEC 11 - LIGHTI / BICYC	E OCCUPANT DER BELT ONLY USED T ONLY USED DER & LAP BELT USED ESTRAINT SYSTEM - RD FACING ESTRAINT SYSTEM - ACING ER SEAT	IT - LEFT SIDE FORCYCLE DRIVE IT - MIDDLE IT - RIGHT SIDE ND - LEFT SIDE ORCYCLE PASSE ND - MIDDLE ND - RIGHT SIDE ORCYCLE ORCY	NGER) E AR) F TRUCK CAB ER ENCLOSED RAILING UNIT P WITH CAP) NCLOSED	2 - DEPLO 3 - DEPLO 4 - DEPLO FRON 5 - NOT / 9 - DEPLO 1 - NOT I 2 - PARTI 3 - TOTA 4 - NOT / 1 - NOT I 2 - EXTRI	ALLY EJECT LLY EJECTEL APPLICABLE TRAPPE TRAPPED CATED BY ANICAL ME	H E NKNOWN ON TED D E			
	ST, FIRST, MI	DDLE			, 95 - OIII	ER / UNKNOWN	Na (2012)	TE OF BIRTH	MECHANIC	AGE	GENDER	
	STREET, CITY				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		CONTACT PHONE		A CODE	ACE	SENDTE.	
NAME: LAS	STREET, CITY ST, FIRST, MII STREET, CITY	DDLE						TE OF BIRTH		AGE	GENDER	
NAME: LAS	ST, FIRST, MII	DDLE /, STATE, ZIP					DAT	TE OF BIRTH		AGE AGE	GENDER	