OF PUBLIC BAPET	TRAFFIC C		MENT REPORT	LOCAL REPORT NUMBER *							
X PHOTOS TAKEN	OH -2	OH -3 LOCAL		24-67176							
SECONDARY CR	ASH OH-1P	O THER	TING AGENCY NAME *			NCIC *	HIT/SKIP 1 - SOLVED	NUMBER OF UNIT	S UNIT IN ERROR		
COUNTY* LOCALI	PRIVATE PROP		ille Police Department			05213	2 - UNSOLVED	(7)MF2	99 - UNKNOWN		
1 52 1 3	1 - CITY	ation: city. villad ntville (Towns					CRASH DATE / TIME* CRASH SEVERITY 1 - FATAL 12/05/2024 09:50 5 6 6 6 6 6 6 6 6 6				
	3 - TOWNSHIP	•	ION ROAD NAME			ROAD TYPE	12/05/2024	U3.50	2 - SERIOUS INJURY SUSPECTED		
ROUTE TYPE ROU	57	- SOUTH - EAST	IOH ROAD NAME			ROAD TYPE	41.066		3 - MINOR INJURY SUSPECTED		
U ROUTE TYPE ROU	31 4.	- WEST	ENCE ROAD NAME (ROAD, N	MILEPOST. HOUSF #	#)	ROAD TYPE	LONGITUDE D		4 - INJURY POSSIBLE		
REFEREN	2 -	SOUTH EAST 761				NOAD THE	-81.803		5 - PROPERTY DAMAGE ONLY		
REFERENCE POIN	4.	- WEST 701.	ROUTE TYPE	nod	AD TYPE		01.003	INTERSECTION			
1 - INTERSECTI	FROM REFERENCE		TATE ROUTE (TP) AL	- ALLEY HW -	- HIGHWAY		WITHIN INTE	RSECTION OR ON A			
3 - HOUSE #	1 2 - SOUT 3 - EAST	US - FEDER	AL LIC POLITE		- MILEPOST	SQ - SQUARE ST - STREET	— — — MITHIN INTE	RCHANGE AREA			
DISTANCE	4 - WEST DISTANCE UNIT OF MEASUR	SK - SIAIE			- OVAL PARKWAY	TE - TERRACE	☐ WITHIN INTE	ROADW	NUMBER OF APPROACHES		
FROM REFERENCE	1 - MILE	S	TL - TRAIL WA - WAY			AY					
90.00 1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE PI - PIKE WA - WAY ROUTE ROADWAY DIVIDED											
1 - ON RO.	ATION OF FIRST HARM	FUL EVENT OSSOVER		INER OF CRASH COI		PACT	DIRECTION OF TRAV		MEDIAN TYPE		
4 2-ON SH	HOULDER 10 - D	RIVEWAY/ALLEY	ACCESS 1 BETV	WEEN 5 - BAC			1 - NORTH 2 - SOUTH		'IDED FLUSH MEDIAN I FEET)		
3 - IN MED 4 - ON RO		AILWAY GRADE C HARED USE PATH	S OR VEHI	O MOTOR ICLES IN 6 - ANO	GLE ESWIPE, SAM	E DIRECTION	3 - EAST 4 - WEST	2 - DIV	IDED FLUSH MEDIAN		
5 - ON GO	ORE TRAFFIC WAY 13 - B	RAILS	TRAN 2 - REAR	NOPOKI O CIDI		OSITE DIRECTION		3 - DI\	IDED, DEPRESSED MEDIAN		
7 - ON RA	MP 14 - To	OLL BOOTH	3 - HEA		HER / UNKNO	OWN		(AN	'IDED, RAISED MEDIAN IY TYPE)		
8 - OFF RA	MP 99 - O	THER / UNKNOW	N						HER / UNKNOWN		
WORK ZONE REI	LATED		RK ZONE TYPE	LOCATION OF			CONTOUR CONDITIONS SURFACE				
WORKERS PRESI	ENT		CLOSURE SHIFT/ CROSSOVER	WAR	ORE THE 1ST RNING SIGN	2					
LAW ENFORCEM	MENT PRESENT		ON SHOULDER		VANCE WARN INSITION AR		1 - STRAIGHT LEVEL	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,		
			EDIAN MITTENT OR MOVING WORK	4 - ACTI	IVITY AREA		2 - STRAIGHT GRADE	3 - SNOW 4 - ICE	BITUMINOUS, ASPHALT		
ACTIVE SCHOOL	L ZONE	5 - OTHE	R	5 - TERN	MINATION A	REA	3 - CURVE LEVEL	5 - SAND, MUD,	2 2016/1/01/06/1		
March 1000	GHT CONDITION			WEATHER			9 - OTHER 6 - WATER (STANDING, STONE				
1 - DAYLIG			1 - CLEAR 6 , 2 - CLOUDY	6 - SNOW 7 - SEVERE CROSSI	SWINDS		JUNKNOWN	MOVING) 7 - SLUSH	5 - DIRT 9 - OTHER		
3 - DARK -	LIGHTED ROADWAY	L	3 - FOG, SMOG, SMOKE					9 - OTHER / UNK	OWN / UNKNOWN		
1965 1360 2360	ROADWAY NOT LIGHT UNKNOWN ROADWAY		4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN 99 - OTHER / UNK		NG DRIZZLE					
	/ UNKNOWN										
NARRATIVE	.hd	4h D 1 1					\				
			n it approached stopped me, so instead of hitting		/	Â\\	'		1.		
vehicle, it drove	off the right side of	the road. Uni	t 1 struck a tree, where it	t came to	(\ \ \	, , ,				
final rest. There scene.	were no injuries and	a Bear's Towin	g removed the vehicle fr	rom the	Not	To Scale	/ /	1	Unit 1		
							/ /		31111		
							/ /	\ \	1		
								1 1/			
								1			
								10			
						7615 Wadsw	Nadawouth (Skirl) Road				
								1	(Sport R		
									1 / 1/1/18		
									',		
								/	` '		
CRASH REPORT	TED DATE / TIME	DISO	ATCH DATE / TIME	ARRIVAI	L DATE / TI	ME I	SCENE CI FARED	DATE / TIME	REPORT TAKEN BY		
1000 14400400	2024 09:51	175 0	05/2024 09:53	820000000000000000000000000000000000000	/2024 09:				POLICE AGENCY		
			2	12,03/		HECKED BY OFFICE		-7 10.51	MOTORIST		
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME* Harrison, Brett			aFond, Christo	(////				
			OFFICER'S BAI	DGE NUMBER*		CHECKED B	Y OFFICER'S BADGE	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO			
58 1606							1602 ODFS)				

O+50 DEPARTMENT OF PUBLIC BATETY	U	NIT	•
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LOCAL REPORT NUMBER

24-67176

			DAMAGE									
UNIT#	OWNER NAME: LAST, FIRST, N		EK)	OWNER	PHONE: NOLUDE ARE	EA CODE (SAVE AS DRIVER)	D A M A G E DAMAGE SCALE					
OWNERA	KATAFIASZ, THOMAS DDRESS: STREET, CITY, STATE, ZI			<u> </u>			1 - NONE 3 - FUNCTIONAL DAMAGE					
2	JFFMAN ROAD, MEDI						1 4 1 2 - MINOR DA		ING DAMAGE			
	CIAL CARRIER: NAME ADDRESS			Cos	AMERCIAL CARRIER PHO	DNE: INCLUDE AREA CODE	9 - UNKNOWN					
		-, -, , , , , , , , , , , , , , , , , ,					D	AMAGED AREA(S)				
LP STATE	LICENSE PLATE #	VEH	IICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	INDI	CATE ALL THAT APPLY				
ОН	JZN3358		MDU88C68BJ37635		2008	LINCOLN			12			
	NEE INSURANCE COMPA		INSURANCE POLICY #		COLOR	VEHICLE MODEL		11				
VERIFIE	PROGRESSIVE		971789897		SIL	MKX	10	10	11 1 2			
	TYPE OF USE	IN EMERGENCY	US DOT #		ED BY: COMPANY N R'S TOWING	AME	/- 13 2 -	\ <u></u>				
Сомм	RCIAL GOVERNMENT	RESPONSE	/EHICLE WEIGHT GVWR/GCW		HAZARDOU	S MATERIAL	9 9 3]3				
INTERL		# OCCUPANTS	1 - ≤10K LBS.	⊣г⊓м	IATERIAL CLAS		7 5	$\sqrt{}$	7 7 3 74			
EQUIP			2 - 10.001 - 26K LBS. 3 -> 26K LBS.		LACARO		7 6	12 7				
	1 - PASSENGER CAR 6 - VA	N (9-15 SEATS)		LIMO (LIVE	RY VEHICLE) 23 -	PEDESTRIAN/SKATÉR	6	" 2	6			
i 3	1	OTORCYCLE 2-WHEELER		BUS (16+ P		WHEELCHAIR (ANY TYPE)	10/	1 2				
	•	OTORCYCLE 3-WHEELEI FIOCYCLE	TRUCK 20.	OTHER VEH HEAVY EQU		OTHER NON-MOTORIST BICYCLE	<i>├</i> -	10 2 -				
	10 - N	MOPEÐ OR MOTORIZEÐ KCYCLE	15 - SEMI-TRACTUR			TRAIN						
		ILL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME	ANIMAL-DI	RAWN VEHICLE 99.	UNKNOWN OR HIT/SKIP	$\nearrow_{\mathfrak{a}}$	7 3 74				
1 0	# of TRAILING UNITS						42		12			
		UTONOMONE					" "	6 11	1 1 1			
	WAS VEHICLE OPERATING IN A MODE WHEN CRASH OCCURRE		i		IONAL AUTOMATION	9 - UNXNOWN	10	10 /	11 1 2			
, 2	1 vec 2 No 6 00/20 "	L	1 - DRIVER ASSISTANCE DMOUS 2 - PARTIAL AUTOMATION		JOMATION TOMATION		/- 13 2 -\	\ _	10 2 -			
	1 1-165 2-NO 9-01HER/	JNKNOWN AUTONO		s-rull AU	OMATION		9 9 3	3 9	3 3			
	1 - NONE	6 - BUS - CHARTERA		16 - FA		21 - MAIL CARRIER	T.	. 7.	計劃計, 7.			
1 1	2 - TAXI 3 - ELECTRONIC RIDE	7 - BUS - INTERCITY 8 - BUS - SHUTTLE	12 - MILITARY 13 - POLICE		fowing Now Removal	99 - OTHER / UNKNOWN		, , <u>,</u> , ,				
SPECIAL	SHARING	9 - BUS - OTHER	14 - PUBLIC UTILITY		OWING		7 6 5	7	5			
FUNCTIO	N 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQU		AFETY SERVICE ATROL			12 12	12			
							12	Ä Ä				
1 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	4 - LOGGING 5 - INTERMODAL	7 - GRAIN/CHIPS/GRAVEL 8 - POLE		ONCRETE MIXER	99 - OTHER / UNKNOWN	A A					
CARGO	2 - BUS	CONTAINER CHA			UTO TRANSPORTER		9 \		3 9 🍪 3			
BODY TYPE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	6 - CARGOVAN ÆNCLOSED BOX	(10 - FLAT BED	14 - G	ARBAGE/REFUSE			* B	ıΦl			
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MC	OTOR TROUBLE	99 - OTHER / UNKNOWN	6		(0)			
VEHICL	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT		SABLED FROM PRIOR	Į.		6 6	6			
DEFECT		6 - TIRE BLOWOUT	DEFECTIVE	A	CCIDENT		□- NO DAMA	eroi 🗖 impe	RCARRIAGE [14]			
	1 - INTERSECTION -	4 - MIDBLOCK -	7 - SHOULDER/ROADSIDE	10 - D	RIVEWAY ACCESS	99 - OTHER / UNKNOWN	_		KCARKIAGE [14]			
	MARKED CROSSWALK	MARKED CROSS		11 - 5	HARED USE PATHS	23 071111, 01111101111	TOP [13]	□- ALL A	REAS [15]			
NON-	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION	ON 9 - MEDIAN/CROSSING		r trails Irst responder		П	UNIT NOT AT SCENE	[16]			
LOCATION	3 Attended of the	6 - BICYCLE LANE	ISLAND	A	T INCIDENT SCENE			•				
	1 - NON-CONTACT	1 - STRAŁGHY AHEAI 2 - BACKING	D 9 - LEAVING TRAFFIC LANE		VALKING, RUNNING, OGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE		AL POINT OF CONTACT				
. 3	2 - NON-COLLISION	3 - CHANGING LAN			VORKING	99 - OTHER / UNKNOWN	0 - NO ĐA		RCARRIAGE			
ACTION		→ 4 - OVERTAKING/PA H 5 - MAKING RIGHT 1 OUTPILE H 1 - MAKING RIGHT 1 OUTPILE H 2 - MAKING RIGHT 1 OUTPILE H 3 - MAKING RIGHT 1 OUTPILE H 4 - MAKING RIGHT 1 OUTPILE H 5 -	TURN IN TRAFFIC	18 - A	USHING VEHICLE PPROACHING OR		1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE DIAGRAM					
,,,,,,,,,,	4 - STRUCK ACTIONS 5 - BOTH STRIKING	5 6 - MAKING LEFT TU 7 - MAKING U-TURN			EAVING VEHICLE TANDING	99 - UNKNOWN 13 - TOP						
	& STRUCK	8 - ENTERING TRAF	FIC 14 - ENTERING OR CROSSI		TANDING OTHER NON-MOTORIS	iT .		***************************************				
	9 - OTHER / UNKNOWN	LANE D. COLLOUTUS TO	SPECIFIED LOCATION	N	OCOATING OFFICERS -	23 - OPENING DOOR INTO		TRAFFIC				
	1 - NONE 2 - FAILURE TO YIELD	ACDA	O CŁOSE 13 - IMPROPER START FRO A PARKED POSITION	EC	PERATING DEFECTIVE QUIPMENT	ROADWAY	TRAFFICWAY FLOW	TRAFFIC C	ONTROL OUT 4 - STOP SIGN			
_	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY		DAD SHIFTING ALLING/SPILLING	99 - OTHER IMPROPER ACTION	2 - TWO-WAY	- 2 - SIGNAL	5 - YIELD SIGN			
8	_ S - UNSAFE SPEED	10 - IMPROPER PAS	SING 15 - SWERVING TO AVOID	20 - 11-	APROPER CROSSING	**=*	2	6 3 - FLASHER	6 - NO CONTROL			
CONTRIBUTE	TING 6 - IMPROPER TURN NCES 7 - LEFT OF CENTER	11 - DROVE OFF RO 12 - IMPROPER BAC			YING IN ROADWAY OT DISCERNIBLE		# of THROUGH LANES	RAIL GRADE	CROSSING			
	F - LEFF OF CHITER	The anamoren bac	+13tOts OBJIROCHO!				ON ROAD	1 - NOT INVLOV				
SEQUEN	CE OF EVENTS				***********		121	1	CTIVE CROSSING			
8	1 - OVERTURN/ROLLOVER	7 - SEPARATION OF L	EVENTS UNITS 12 - DOWNHILL RUNAWA			23 - STRUCK BY FALLING,		3 - INVOLVED-P	ASSIVE CROSSING			
1	2 - FIRE/EXPLOSION 3 - EMMERSION	8 - RAN OFF ROAD R 9 - RAN OFF ROAD LI			NOTOR VEHICLE IN	SHIFTING CARGO OR ANYTHING SET IN	UNIT / N	ON-MOTORIST DIRECT	rion			
a 1 48	4 - JACKKNIFE	10 - CROSS MEDIAN	15 - PEDALCYCLE	21 - P.	ARKED MOTOR	MOTION BY A MOTOR VEHICLE		1 - NORTH	5 - NORTHEAST			
2 40	5 - CARGO / EQUIPMENT LOSS OR SHIFT	11 - CROSS CENTERU OPPOSITE DIREC			EHICLE VORK ZONE	24 - OTHER MOVABLE		2 - SOUTH	6 - NORTHWEST			
3	6 - EQUIPMENT FAILURE	OF TRAVEL	18 - ANIMAL - DEER	M	IAINTENANCE QUIPMENT	OBJECT	FROM 2 TO	1 3 - EAST 4 - WEST	7 - SOUTHEAST 8 - SOUTHWEST			
3 .		· c	OLLISION WITH FIXED OBJECT					. —	9 - OTHER / UNKNOWN			
4	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARR	38 - OVERHEAD SIGN POS		MBANKMENT	52 - BUILDING 53 - TUNNEL	LINUT COCCO	NET CO	IED SOFED			
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE	BARRIER SUPPORT	47 - h	AAILBOX	54 - OTHER FIXED	UNIT SPEED	DEIEC	TED SPEED			
5	STRUCTURE 27 - BRIDGE PIER OR	34 - MEDIAN GUARD BARRIER	41 - OTHER POST, POLE		IRE HYDRANT	OBJECT 99 - OTHER / UNKNOWN	, 25 _I	t - STATE	ED / ESTIMATED SPEED			
	ABUTMENT	35 - MEDIAN CONCR BARRIER			VORK ZONE IAINTENANCE		<u> </u>	1 12-CALCI	IN ATED / EDP			
6 L	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	36 - MEDIAN OTHER	BARRIER 43 - CURB	E	QUIPMENT		POSTED SPEED	- 12-0ALC	ULATED / EDR			
Ĭ.	30 - GUARDRAIL FACE	37 - TRAFFIC SIGN PO		51 - V	AVIT		1 55 1	3 - UND£	TERMINED			
1	FIRST HARMFUL EVE	NT 2	MOST HARMFUL EVENT									

CHANGE DEPT	Motorist / Non-Motorist									LOCAL REPORT NUMBER 24-67176					
UNIT #										DA	DATE OF BIRTH AGE GENDER				
1		KATAFIASZ, MARGARET, ELIZABETH									11/21/2006 18 F				
ADDRESS:	STREET, CITY,	STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE												
<u> </u>		DAD, MEDINA, OH, 44256													
	TAKEN	EMS AGENCY (NAME)		INJURED '	TAKEN TO: N	SEDICAL FACILITY (NAVE, C	TTY)	SAFETY EQUIPMENT USED		F-COMPLEANT	SEATING POSITION	AIR BAG	USAGE	EJECTION	TRAPPED
NON 5	BY 4 E OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL OFFENSE DES									HELMET	1	1		1	1
ë	E OPERATOR LICENSE NUMBER OFFENSE CHARGED LG							OFFENSE DESCRI				CITATI	ON NU	MBER	
Σ———	4511.21A							NO PERSON		OPERAT	-	Y437		TEST(C/
OL CLASS	ENDORSEME	DISTRACTED			IOL / DRUG SUSPE HOL MARIJU		CONDITION	STATUS	TYPE	VALUE	STATUS	ΤΥΡΈ		SELECT UP TO 4	
4		BY 1 OTHER				R DRUG		1	1	1	•	1	1		
UNIT #	NAME: LAS	T, FIRST, MIDDLE								D#	TE OF BIRTH			AGE	GENDER
조 ADDRESS:	STREET, CITY,	STATE, ZIP		7					CONT	ACT PHON	IE - INCLUDE A	AREA CODE			
TO.															
INJURIES ON	INJURED TAKEN BY	EMS AGENCY (NAME)		ENJURED	TAKEN TO: N	TEOKAL FACILITY (NAME, C	STV)	SAFETY EQUIPMENT USED		DOT-COMPLIANT POSITION AIR BAG (EJECTIO	TRAPPED
S	OPERATOR	LICENSE NUMBER		OFFEN	SE CHARG	ED	LOCAL	OFFENSE DESCR	PTION			CITAT	ON NU	MBER	
OL CLASS	ENDORSEMI	RESTRICTION SELECT UP TO 3	DRE	 VER	ALCOH	IOL / DRUG SUSPE	CTED	CONDITION	А	LCOHOL	. TEST		RUG	TEST(S)
				FRACTED	ALCO				STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4
UNIT #	NAME: LAS	T, FIRST, MIDDLE						<u> </u>		1 I	ATE OF BIRTH	<u> </u>		AGE	GENDER
ADDRESS:	STREET, CITY	, STATE, ZIP							CONT	ACT PHON	VE - INCLUDE A	AREA CODE			
INJURIES	INJURED TAKEN BY	TAKEN			TAKEN TO: R	AEDICAL FACILITY (NAVE, O	CITY)	SAFETY EQUIPMENT USED	L_00	DOT-COMPLIANT POSITION AIR BAG USAGE EJECTION T				N TRAPPED	
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	SE CHARG	ED	LOCAL	OFFENSE DESCR	RIPTION CITATION NUMBER				•		
OL CLASS	ENDORSEM	RESTRICTION SELECT UP TO 3		RIVER ALCOHOL / DRUG SUSPECTED ISTRACTED ALCOHOL MARIJUANA			CONDITION	ALCOHOL TEST STATUS TYPE VALUE			DRUG STATUS TYPE		JG TEST(S) E RESULTS SELECT UP TO		
			BY		ОТНЕ	R DRUG									
100000000000000000000000000000000000000	URIES	SEATING POSITION	موروميد وورث إرواك	AIR BA	G	OL CLAS	SS	OL RESTRIC	TION(S		ER DISTRA			ST ST	ATUS
1 - FATAL 2 - SUSPECTED	SERIOUS	(MOTORCYCLE DRIVER)	1 - NOT D 2 - DEPLO 3 - DEPLO	YED FRON	T	1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER DEVICE		2 - MA	T DISTRACTED NUALLY OPERA	ITING AN		REFUSED	
INJURY 3 - SUSPECTED	MINOR		4 - DEPLO FRONT	YED BOTH		3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LEI 4 - FARM WAIVER		co	TRONIC MMUNICATION KTING, TYPING,				ED SAMPLE
INJURY 4 - POSSIBLE IN	VJURY	(MOTORCYCLE PASSENGER)	S - NOT A 9 - DEPLO	PPLICABLE		4 - REGULAR CLA (OHIO = D)	SS	5 - EXCEPT CLASS / 6 - EXCEPT CLASS /		D)A	LING KING ON HAN	DS-FREE	4 - TEST		wn
5 - NO APPARE	ENT INJURY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE		JECTIO	NI	5 - M/C MOPED C	DNLY	& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER	4-TA	MMUNICATION LKING ON HANI	D-HELD	5 - TEST		
INJURIES	TAKEN B	(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE	1 - NOT E	ECTED		6 - NO VALID OL		8 - INTERMEDIATE RESTRICTIONS		5 - OT	MMUNICATION HER ACTIVITY Y CTRONIC DEVIC	/TH AN			EST TYPE
1 - NOT TRAM	NSPORTED AT SCENE	10 - SLEEPER SECTION	2 - PARTIA 3 - TOTAL	LY EJECTEI)	OL ENDORSI	EMENT	RESTRICTIONS		6 - PA	SSENGER HER DISTRACTION		1 - NON 2 - BLOC		
2 - EMS		OF TRUCK CAB 11 - PASSENGER IN	4 - NOT A	PPLICABLE		H - HAZMAT 10 - LIMITED TO DAYLIGHT 7 - OTHER DISTRACTION M - MOTORCYCLE 11 - LIMITED TO EMPLOYMENT 8 - OTHER DISTRACTION				E	3 - URINE 4 - BREATH				
3 - POLICE 9 - OTHER/U	UNKNOWN		1 - NOT T	RAPPED		P - PASSENGER		12 - LIMITED - OTH 13 - MECHANICAL	ER	OU	TSIDE THE VEHI HER/UNKNOW		5 - OTHE	(000) (000)	T TVOF
SAFETY E	QUIPMEN	12 - PASSENGER IN		NICAL M	ANS	N - TANKER Q - MOTOR SCO	OTER	(SPECIAL BRAK CONTROLS, OF	OTHER	4 AN	CONDITIO		1 - NON 2 - BLOC	E	T TYPE
1 - NONE USE 2 - SHOULDER	D	UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE			AL MEANS	R - THREE-WHEEL MOTORCYCLI		ADAPTIVE DEV 14 - MILITARY VEH 15 - MOTOR VEHIC	ICLES ONL	γ 2-PH	PARENTLY NORI YSICAL IMPAIRN OTIONAL (E.G.,	AENT	2 - BLOC 3 - URIN 4 - OTHE	E	
USED 3 - LAP BELT C		EXTERIOR (NON-TRAILING UNIT)				S - SCHOOL BUS T - DOUBLE & TR		WITHOUT AIR 16 - OUTSIDE MIRE	BRAKES	DEP	RESSED, ANGRY, (URBED)		A (12 (A) (12 (A)	Appendix and the second	RESULT(S
4 - SHOULDER USED		15 - NON-MOTORIST 99 - OTHER / UNKNOWN				TRAILERS		17 - PROSTHETIC A 18 - OTHER		4 - ILU 5 - FEL	NESS L'ASLEEP, FAINT			HETAMIN HTURATE!	
	TRAINT SYSTEN D FACING					X - TANKER / HAZ	ζ M A I			FAT	IGUED, ETC. DER THE INFLU		3 - BENZ	ODIAZEP NABINOII	INES
1,000,000,000,000,000,000	TRAINT SYSTEM	(GENDE	R			ME ALC	DICATIONS / DE OHOL	iugs /	s - COCA		
7 - BOOSTER S 8 - HELMET US	EAT					F - FEMALE M - MALE				9 - 01	HER / UNKNOW	IN .	7 - OTHE		
9 - PROTECTIV	그 사람들이 아니는 사람이 하나를 보다고 하는 것이					U - OTHER / UNK	NOWN								
10 - REFLECTIN 11 - LIGHTING	/E CLOTHING - PEDESTRIAN														
/ BICYCLE	ONLY														

CCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER 24-67176					
UNIT #		ST, FIRST, MIDDLE	····				DA	TE OF BIRTH	,, ,, ,,	AGE	GENDER		
ADDRESS:	STREET, CITY	, STATE, ZIP					CONTACT PHONE	- INCLUDE ARE	A CODE				
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	(NAME CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
UNIT #	NAME: LA	ST, FIRST, MIDDLE				1	DA	TE OF BIRTH	E.	AGE	GENDER		
ADDRESS:	STREET, CETY	/, STATE, ZIP		***************************************			CONTACT PHON	E - INCLUDE ARE	A CODE				
INJURIES	IURIES INJURED EMS AGENCY (NAME) TAKEN BY			INJURED TAKEN TO: MEDICAL FAGUITY	(NAVE CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	I TRAPPED		
UNIT #		ST, FIRST, MIDDLE						TE OF BIRTH	1	AGE	GENDER		
ADDRESS:	STREET, CITY	y, STATE, ZIP					CONTACT PHON	E - INCLUDE ARI	EA CODE				
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT POSITION AIR BAG L			E EJECTION	I TRAPPED		
UNIT #	NAME: LA	ST, FIRST, MIDDLE					D#		AGE	GENDER			
ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE AR	EA CODE				
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACULTY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLANT POSITION AIR BAG		AIR BAG USAG	E EJECTIOI	TRAPPED		
	IN.	JURIES	SAFET	Y EQUIPMENT USED		SEATING POS	SITION		AIR BAG	JSAGE			
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		3 - LAP BEL 4 - SHOULI 5 - CHILD I FORW/ 6 - CHILD I REAR F 7 - BOOST 8 - HELME 9 - PROTEC (ELBOV 10 - REFLE 11 - LIGHT / BICY	ER SEAT	3 - FROI 4 - SECC (MOI 5 - SECC 7 - THIR (MO 8 - THIR 10 - SLE 11 - PAS CAR 12 - PAS CAI 13 - TRJ (NO 15 - NO	NT - MIDDLE NT - RIGHT SIDE DND - LEFT SIDE FORCYCLE PASSE DND - MIDDLE DND - RIGHT SIDE FORCYCLE FOR	DE CAR) DE TRUCK CAB BIER ENCLOSED TRAILING UNIT JP WITH CAP) ENCLOSED E EXTERIOR	5 - NOT APPLICAB 9 - DEPLOYMENT 1 - NOT EJECTED 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED ALILING UNIT WITH CAP) NCLOSED TRAI 1 - NOT TRAPPED EXTERIOR 2 - EXTRICATED B' MECHANICAL I						
NAME: L	AST, FIRST, ₩	IIDDLE					D	ATE OF BIRTH		AGE	GENDER		
ADDRESS	S: STREET, CI	TY, STATE, ZIP					CONTACT PHON	IE - INCLUDE AF	REA CODE				
NAME: LAST, FIRST, MIDDLE								OATE OF BIRTH AGE GI					
ADDRESS	S: STREET, CI	TY, STATE, ZIP					CONTACT PHON		REA CODE				
NAME: L	AST, FIRST, M	MIDDLE					D	ATE OF BIRTH		AGE	GENDER		
ADDRESS	S: STREET, CI	TY, STATE, ZIP					CONTACT PHON	NE - INCLUDE A	REA CODE				