TRAFFIC CRASH REPORT \*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT 19MPD1878 OH-2 OH-3 X PHOTOS TAKEN UNIT IN ERROR REPORTING AGENCY NAME 4 OH-1P OTHER NCIC \* HIT/SKIP NUMBER OF UNITS SECONDARY CRASH 99 | 98 - ANIMAL | 199 | 199 - UNKNOWN 1 - SOLVED PRIVATE PROPERTY Millersburg 03801 2 - UNSOLVED COUNTY\* LOCALITY\* LOCATION: CITY, VILLAGE, TOWNSHIP\* CRASH SEVERITY CRASH DATE / TIME\* 1 - FATAL 2 - VILLAGE 2 | 38 Millersburg 10/31/2019 20:00 3 - TOWNSHIP 2 - SERIOUS INJURY ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH SUSPECTED **LOCATION ROAD NAME ROAD TYPE** LATITUDE DECIMAL DEGREES SOUTH 3 - MINOR INJURY 40.556331 3 - FAST RD Massillon SUSPECTED 4 - WEST ROUTE TYPE ROUTE NUMBER 4 - INJURY POSSIBLE PREFIX 1 - NORTH REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) ROAD TYPE LONGITUDE DECIMAL DEGREES SOUTH 5 - PROPERTY DAMAGE 3 - EAST -81.913285 325 Massillon ONLY 4 - WEST DIRECTION POM REFERENCE INTERSECTION RELATED REFERENCE POINT ROUTE TYPE ROAD TYPE 1 - INTERSECTION AL - ALLEY HW - HIGHWAY RD - ROAD 1 - NORTH IR - INTERSTATE ROUTE (TP) WITHIN INTERSECTION OR ON APPROACH 2 - MILE POST 2 - SOUTH AV - AVENUE -LA - LANE SO - SQUARE US - FEDERAL US ROUTE - EAST 3 - HOUSE# BL - BOULEVARD MP. - MILEPOST ST - STREET WITHIN INTERCHANGE AREA NUMBER OF APPROACHES 4 - WEST SR - STATE ROUTE CR - CIRCLE OV - OVAL TE - TERRACE DISTANCE UNIT OF MEASURE DISTANCE FROM REFERENCE ROADWAY CT - COURT PK - PARKWAY TL - TRAIL CR - NUMBERED COUNTY ROUTE 1 - MILES DR - DRIVE PI - PIKE WA - WAY TR - NUMBERED TOWNSHIP 2 - FEET ROADWAY DIVIDED HE - HEIGHTS PL - PLACE July 4 - YARDS ROUTE LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT DIRECTION OF TRAVEL MEDIAN TYPE 1 - ON ROADWAY 9 - CROSSOVER 1 - NOT COLLISION 4 - REAR-TO-REAR 1 - NORTH 9 1 - DIVIDED FLUSH MEDIAN 6 12-ON SHOULDER 10 - DRIVEWAY/ALLEY ACCESS BETWEEN 5 - BACKING 2 - SOUTH ( <4 FEET ) 3 - IN MEDIAN TWO MOTOR 11 - RAILWAY GRADE CROSSING 6 - ANGLE 3 - EAST 2 - DIVIDED FLUSH MEDIAN VEHICLES IN 4 - ON ROADSIDE 12 - SHARED USE PATHS OR 4 - WEST (≥4 FEET) 7 - SIDESWIPE, SAME DIRECTION TRANSPORT 5 - ON GORE TRAILS 3 - DIVIDED, DEPRESSED MEDIAN 8 - SIDESWIPE, OPPOSITE DIRECTION 2 - REAR-END 6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE 4 - DIVIDED, RAISED MEDIAN 7 - ON RAMP 14 - TOLL BOOTH 3 - HEAD-ON 9 - OTHER / UNKNOWN (ANY TYPE) 8 - OFF RAMP 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN CONDITIONS SURFACE CONTOUR WORK ZONE TYPE LOCATION OF CRASH IN WORK ZONE WORK ZONE RELATED 1 - LANE CLOSURE 5 1 - BEFORE THE 1ST WORK ZONE 4 1 WORKERS PRESENT WARNING SIGN 2 - LANE SHIFT/ CROSSOVER - STRAIGHT - CONCRETE 1 - DRY 2 - ADVANCE WARNING AREA LAW ENFORCEMENT PRESENT 3 - WORK ON SHOULDER LEVEL 2 - WET BLACKTOP, 3 - TRANSITION AREA OR MEDIAN - STRAIGHT BITUMINOUS, 3 - SNOW 4 - ACTIVITY AREA 4 - INTERMITTENT OR MOVING WORK GRADE ASPHALT 4 - ICE ACTIVE SCHOOL ZONE 5 - TERMINATION AREA BRICK/BLOCK 5 - OTHER 3 - CURVE LEVEL 5 - SAND, MUD, DIRT, SLAG . GRAVEL. 4 - CURVE GRADE OIL, GRAVEL LIGHT CONDITION WEATHER STONE 6 - WATER (STANDING, 9 - OTHER 1 - DAYLIGHT 1 - CLEAR 6 - SNOW DIRT MOVING) **JUNKNOWN** 2 - DAWN/DUSK 2 - CLOUDY 7 - SEVERE CROSSWINDS OTHER 7 - SHISH 3 - DARK - LIGHTED ROADWAY / UNKNOWN 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - OTHER / UNKNOWN 4 - DARK - ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZING RAIN OR FREEZING DRIZZLE 5 - DARK - UNKNOWN ROADWAY LIGHTING S - SLEET, HAIL 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN NARRATIVE Unit 1 was parked off the roadway and was struck in the rear right portion of the vehicle by a falling branch. SCENE CLEARED DATE / TIME REPORT TAKEN BY CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME POLICE AGENCY 10/31/2019 20:14 10/31/2019 20:14 10/31/2019 20:16 10/31/2019 20:28 MOTORIST TOTAL TIME OTHER OFFICER'S NAME\* CHECKED BY OFFICER'S NAME\* TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUTES Newman, Jordan SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OFFICER'S BADGE NUMBER\* CHECKED BY OFFICER'S BADGE NUMBER\* 60 74 129

OHOO DEPARTMENT OF PUBLIC BAFETT	U	NI	T
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## LOCAL REPORT NUMBER

19MPD1878	

1	OWNER NAME: LAST, FIRST, N	MIDDLE ( C SAME AS DR	R(VER)	OWNER	R PHONE: NOLUDE ARE	EA CODE ( SAME AS DRIVER)	D A M A G E			
1	YERIAN, DERRIK, T		***************************************		330-473	3-9836	DAMAGE SCALE			
3	DDRESS: STREET, CITY, STATE, ZI						1 - NONE 3 - FUNCTIONAL DAMAGE 3 - 2 - MINOR DAMAGE 4 - DISABLING DAMAGE			
	EVIEW DR. APT A2, M		OH, 44654	·			2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN			
COMMERC	IAL CARRIER: NAME, ADDRESS	S, CITY, STATE, ZIP		Co	MMERCIAL CARRIER PHO	ONE: INCLUDE AREA CODE				
								MAGEO AREA(S) ATE ALL THAT APPLY		
LP STATE	LICENSE PLATE #	Vi	EHICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	MDIC	are one trial arrest		
OH	HNC5710		G2ZH18N574179620		2007	PONTIAC	111			
X INSURA	INSURANCE COMPAN	ΝY	INSURANCE POLICY #		COLOR	VEHICLE MODEL	77 72	7 7 2		
VERIFIE			4544354790	T	BLU	G6	10/ 11/2	10 11 2		
	TYPE OF USE	IN EMERGENCY	US DOT #	TOW	ED BY: COMPANY N	AME				
СОММЕ	RCIAL GOVERNMENT	RESPONSE	VEHICLE WEIGHT GVWR/GCW	R -	HAZARDOU	S MATERIAL				
DEVICE	OCK HIT/SKIP UNIT	# OCCUPANTS	1 - ≤10K LBS.		MATERIAL CLAS		7 5			
EQUIPP			2 - 10,001 - 26K LBS. 3 -> 26K LBS.		ELEASED LACARD	- [		6		
	1 - PASSENGER CAR 6 - VA	M/G.15 SEATO				PEDESTRIAN/SKATER		1 5		
. 1	2 - PASSENGER VAN 7 - MC	N (9-15 SEATS) DTORCYCLE 2-WHEEL				WHEELCHAIR (ANY TYPE)	10	1 12 2		
	(MINIVAN) B - MC	OTORCYCLE 3-WHEEL	LED 14 - SINGLE UNIT 20 -	OTHER VEH	· · · · · · · · · · · · · · · · · · ·	OTHER NON-MOTORIST		11 2 2		
UNIT TYP	W SELECT	TOCYCLE IOPED OR MOTORIZE	TRUCK 21 -	HEAVY EQU	UIPMENT 26 -	BICYCLE	9	9 3 3		
	10 - M	CYCLE	16 - FARM FOLLIPMENT 22 -			TRAIN	<b></b>			
		LL TERRAIN VEHICLE	17 - MOTORHOME		99 -	UNKNOWN OR HIT/SKIP	в	/   11回 15		
لــــا	# of TRAILING UNITS	U1 <b>V</b> }					12	5 12		
	WAS VEHICLE OPERATING IN AL	JTONOMOUS	A - NA ALITALIANIANI	2 COL-0-	TONAL AUTOMATIC:	G - LINIVNIONAINI	11 12	6 11 12 1		
>	MODE WHEN CRASH OCCURRE		Λ .		TONAL AUTOMATION	3 - UNKNOWN	10 11 2	10 11 2		
2	1. VEC 2. NO 0 OTHER 111	L	1 - DRIVER ASSISTANCE NOMOUS 2 - PARTIAL AUTOMATION		UTOMATION		10 2			
	1 1-1ES Z-NO 9-OIMER/U		NOMOUS 2 - PARTIAL AUTOMATION :	o - rull AU	I CMAHON		9 9 3	3 9 9 3		
	1 - NONE	6 - BUS - CHARTE	ER/TOUR 11 - FIRE	16 - F	ARM	21 - MAIL CARRIER				
, 1	2 - TAXI	7 - BUS - INTERCIT			NOWING	99 - OTHER / UNKNOWN				
SPECIAL	3 - ELECTRONIC RIDE SHABING	8 - BUS - SHUTTLE			NOW REMOVAL	l	7 5	7		
FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER 10 - AMBULANCE	14 - PUBLIC UTILITY  15 - CONSTRUCTION EQU		OWING AFETY SERVICE	l	ď	ů		
	5 - BUS - TRANSIT/COMMUTER		Lette invested Equ		ATROL			12 12 12		
4	1 - NO CARGO BODY TYPE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - D	DUMP	99 - OTHER / UNKNOWN	12			
1	/ NOT APPLICABLE	S - INTERMODAL	8 - POLE		ONCRETE MIXER		~ RA ~			
CARGO BODY	2 - BUS 3 - VEHICLE TOWING	CONTAINER CH 6 - CARGOVAN	3 - CARGO TANK		UTO TRANSPORTER		و د (گریک) و	G 3 9 T 3 9 🗯 3		
TYPE	ANOTHER MOTOR VEHICLE	/ENCLOSED BC	OX 10 - FLAT BED	14 - G	ARBAGE/REFUSE			•		
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MC	OTOR TROUBLE	99 - OTHER / UNKNOWN	6	$\Theta$		
VEHICLE	2 - HEAD LAMPS	S - STEERING	8 - TRAILER EQUIPMENT	10 - D	ISABLED FROM PRIOR			6 6 6		
DEFECTS		6 - TIRE BLOWOUT	T DEFECTIVE	A	CCIDENT					
						40 000	□- NO DAMAGI	[0] UNDERCARRIAGE [14]		
I i	1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - MARKED CRO	7 - SHOULDER/ROADSIDE		RIVEWAY ACCESS HARED USE PATHS	99 - OTHER / UNKNOWN		- ALL AREAS [ 15 ]		
NON-	2 - INTERSECTION -	S - TRAVEL LANE -	a Pathian Choccing	0	R TRAILS					
MOTORIST LOCATION	UNMARKED CROSSWALK  3 - INTERSECTION - OTHER	OTHER LOCAT 6 - BICYCLE LANE	171 AND		IRST RESPONDER T INCIDENT SCENE		∐-1	INIT NOT AT SCENE [ 16 ]		
	1 - NON-CONTACT	1 - STRAIGHT AHE			VALKING, RUNNING,	21 - STANDING OUTSIDE	INITIA	. POINT OF CONTACT		
	2 - NON-COLLISION	2 - BACKING	LANE	K	OGGING, PLAYING	DISABLED VEHICLE	0 - NO DAM			
1 2	3 - STRIKING 10	3 - CHANGING LAI 4 - OVERTAKING/F	-		VORKING PUSHING VEHICLE	99 - OTHER / UNKNOWN		TO UNIT 15 - VEHICLE NOT AT SCENE		
1	PRE-CRASH	S - MAKING RIGHT	IT TURN IN TRAFFIC	1B - A	APPROACHING OR		DIAGR	AM		
	5 - BOTH STRIKING	6 - MAKING LEFT T			EAVING VEHICLE		13 - TOP	99 - NNKNOMN		
	& STRUCK	7 - MAKING U-TUF 8 - ENTERING TRA			TANDING OTHER NON-MOTORIS	r i				
	9 - OTHER / UNKNOWN	LANE	SPECIFIED LOCATION					TRAFFIC		
	1 - NONE 2 - FAILURE TO YIELD	8 - FOLLOWING TO /ACDA	OO CLOSE 13 - IMPROPER START FROM A PARKED POSITION		PERATING DEFECTIVE	23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL		
	3 - RAN RED LIGHT	9 - IMPROPER LAN	NE 14 - STOPPED OR PARKED	19 - LC	DAD SHIFTING	99 - OTHER IMPROPER	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN		
1 1	4 - RAN STOP SIGN	CHANGE	ILLEGALLY		ALLING/SPILLING	ACTION	2 - TWO-WAY	6 2-SIGNAL 5-YIELD SIGN		
CONTRIBUT	J 5 - UNSAFE SPEED ING 6 - IMPROPER TURN	10 - IMPROPER PA 11 - DROVE OFF R			APROPER CROSSING YING IN ROADWAY			3 - FLASHER 6 - NO CONTROL		
CIRCUMSTAI	ING 6 - IMPROPER TURN NCES 7 - LEFT OF CENTER	12 - IMPROPER BA			OT DISCERNIBLE		# OF THROUGH LANES	RAIL GRADE CROSSING		
	T TAPPATE						ON ROAD	1 - NOT INVLOVED		
SEOUENC	E OF EVENTS		EVENTS		the second of the	, na ari a nagrisia i .u se ari a nagrisia i	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING		
. ⊢ 48	1 - OVERTURN/ROLLOVER	7 - SEPARATION OF	F UNITS 12 - DOWNHILL RUNAWAY	Y 19 - A		23 - STRUCK BY FALLING,	<u> </u>	3 - HAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA		
	2 - FIRE/EXPLOSION 3 - IMMERSION	8 - RAN OFF ROAD 9 - RAN OFF ROAD			MOTOR VEHICLE IN RANSPORT	SHIFTING CARGO OR ANYTHING SET IN	UNIT / NO	N-MOTORIST DIRECTION		
2	4 - JACKKNIFE	10 - CROSS MEDIAN		21 - P.	ARKED MOTOR	MOTION BY A MOTOR		1 - NORTH 5 - NORTHEAST		
2	5 - CARGO / EQUIPMENT LOSS OR SHIFT	11 - CROSS CENTER OPPOSITE DIRE			EHICLE VORK ZONE	VEHICLE 24 - OTHER MOVABLE		2 - SOUTH 6 - NORTHWEST		
	6 - EQUIPMENT FAILURE	OF TRAVEL	ECTION 17 - ANIMAL - FARM 18 - ANIMAL - DEER	M	IAINTENANCE	OBJECT	FROM   3   TO	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST		
3		N= 400 . = 4			QUIPMENT		FROM TO	4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN		
4	25 - IMPACT ATTENUATOR	31 - GUARDRAIL EN		T 45 - E	MBANKMENT	52 - BUILDING				
4	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BAR 33 - MEDIAN CABLE	RRIER 39 - LIGHT / LUMINARIES	46 - FI	ENCE	53 - TUNNEL 54 - OTHER FIXED	UNIT SPEED	DETECTED SPEED		
e 1	STRUCTURE	34 - MEDIAN GUAR	RDRAIL 40 - UTILITY POLE	48 - Ti	REE	OBJECT				
٠	27 - BRIDGE PIER OR ABUTMENT	BARRIER 35 - MEDIAN CONC	41 - OTHER POST, POLE CRETE OR SUPPORT		IRE HYDRANT VORK ZONE	99 - OTHER / UNKNOWN	0	1 - STATED / ESTIMATED SPEED		
	28 - BRIDGE PARAPET	BARRIER	42 - CULVERT	M	AINTENANCE			1  2-CALCULATED / EDR		
б	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHE 37 - TRAFFIC SIGN I		51 - V	QUIPMENT VALL		POSTED SPEED	\		
, 1	FIRST HARMFUL EVEN			•			₁ 35 ⊦	3 - UNDETERMINED		
	FIRST MARKETUL EVEN		MOST HARMFUL EVENT							

Motorist / Non-Motorist  Motorist / Non-Motorist								Γ				EPORT NUI								
UNIT #	T		RST, MIDDLE					-		+		C	ATE OF BIRTH	//PD187	Ť	AGE GENDER				
ADDRESS:	STREET, CITY	r, STA	FATE, ZIP								CONTA	ACT PHO	NE - INCLUDE	AREA CODE						
INJURIES OL STATE	INJURED TAKEN BY	EMS	AGENCY (NAME)		INJURED '	TAKEN TO: ME	DICAL FACILITY (NAME	; CITY)	SAFETY EQUIPMI USED	ENT		T-COMPLIAN HELMET		AIR BAC	USAGE	EJECTION	TRAPPED			
OL STATE	OPERATOR	LICE	NSE NUMBER		OFFENS	SE CHARGE	D	LOCAL	OFFENSE DES	CRIPT	ION	•		CITAT	ION NU	IMBER				
OL CLASS	ENDORSEM	ENT	RESTRICTION SELECT UP TO 3	DRIV	/FD	ALCOHO	DL / DRUG SUSS	ECTED	CONDITION		ΑL	СОНС	L TEST		DRUG	TEST(	S)			
					RACTED	1	OL MARI				ATUS	TYPE	VALUE	STATUS	TYPE		SELECT UP TO 4			
UNIT #	NAME: LA	ST, FI	RST, MIDDLE								·	D	ATE OF BIRTH	! 	AGE GENDER					
ADDRESS:	STREET, CITY	, STA	TE, ZIP							+	CONTA	ACT PHO	NE - INCLUDE	AREA CODE			L			
INJURIES	INJURED TAKEN	EMS	AGENCY (NAME)		INJURED	TAKEN TO: ME	DICAL FACILITY (NAM	E, CITY)	SAFETY EQUIPMI	INT I	רססך	Г-Сомрыа	SEATING NT POSITION	AIR BAG	SUSAGE	EJECTION	N TRAPPED			
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OL CLASS	ENDORSEM	ENT	RESTRICTION SELECT UP TO 3	DRIV	VER FRACTED	i ,	OL / DRUG SUSP		CONDITION		AL ATUS	COHO	VALUE	STATUS	DRUG TYPE	RESULTS	S)			
				ВҰ		OTHER				3.,	AIGS	17.2	1	50,000	,,,,	1.500,0	and or to			
UNIT #	NAME: LA	ST, FI	RST, MIDDLE									C	OATE OF BIRTH			AGE	GENDER			
ADDRESS:	STREET, CITY	, STA	TE, ZIP								CONT	ACT PHO	NE - INCLUDE	AREA CODE	L		L			
ADDRESS:	INJURED TAKEN BY	EMS	AGENCY (NAME)		INJURED	TAKEN TO: ME	DICAL FACILITY (NAMI	E, COTY)	SAFETY EQUIPMI USED	INT [		T-COMPLIA HELMET			G USAGE	EJECTION	N TRAPPED			
	OPERATOR	LICE	NSE NUMBER		OFFEN:	SE CHARGE	Đ	LOCAL	OFFENSE DES	CRIPT	ION			CITAT	ION NU	JMBER				
OL CLASS	ENDORSEM	ENT	RESTRICTION SELECT UP TO 3	DRI	VER	ALCOHO	OL / DRUG SUSI	ECTED	CONDITION	:	Αl	СОНО	L TEST		DRUG	TEST(	S)			
				DIST	FRACTED	ALCOH	_	JUANA		ST	ATUS	ТҮРЕ	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4			
LNI	URIES		SEATING POSITION	As a	AIR BAG	27.	OL CL	ASS	OL RESTE	RICTIO	ON(S)	DRI	VER DISTR	стіон	ī	EST ST	ATUS			
- FATAL  - SUSPECTED INJURY - SUSPECTED INJURY - POSSIBLE IN - NO APPARE	MINOR UURY	design of the second	(MOTORCYCLE DRIVER)  2 - FRONT - MIDDLE  3 - FRONT - RIGHT SIDE  4 - SECOND - LEFT SIDE  (MOTORCYCLE PASSENGER)  55	DEPLOY DEPLOY FRONT NOT AF	EPLOYED YED FROM YED SIDE YED BOTH /SIDE PPLICABLE YMENT UN	T NKNOWN	1 - CLASS B 2 - CLASS B 3 - CLASS C 4 - REGULAR CL (OHIO = D) 5 - M/C MOPED	ONLY	1 - ALCOHOLIN DEVICE 2 - COL INTRAS 3 - CORRECTIVE 4 - FARM WAIV 5 - EXCEPT CLA 6 - EXCEPT CLA & CLASS'81 7 - EXCEPT TRA 8 - INTERMEDIA	TATE OF LENSE ER SS A BU SS A OUS CTOR-T	NLY S S RAILER	22- M ELE CO (T n) 3 - T/ 4 - T/	OT DISTRACTED INJURY OPER CTRONIC DOMMUNICATION EXTING, TYRING, ALLING ON HAN DIMINUNICATION DIMINUNICATION DOMMUNICATION DAMMUNICATION DIMMUNICATION DIMUNICATION DIMUNICA	DS-FREE DEVICE D-HELD	2 - TEST 3 - TEST CON / UN 4 - TEST RESU S - TEST	GIVEN,	ED SAMPLE			
	TAKEN B		TO THE THEOLOGICAL TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE TO	NOT E	ECTED	温度が一	6 - NO VALID O		RESTRICTIO	NS	2	5 - 0	THER ACTIVITY V	VITH AN		, A	EST TYPE			
- NOT TRAM - TREATED - EMS		<del></del> - <del>-</del> <del>-</del> - <del>-</del> <del>-</del> - <del>-</del> <del>-</del> - <del>-</del> <del>-</del>	ID - SLEEPER SECTION 3	- TOTALL - NOT AF	LLY EJECTI LY EJECTÉD PPLICABLE		OL ENDORS  H - HAZMAT  M - MOTORCYC		RESTRICTION 10 - LIMITED TO ONLY 11 - LIMITED TO	IS DAYLI	<b>G</b> НТ	7 O	ASSENGER THER DISTRACTI ISIDE THE VEHIC THER DISTRACTI	ON .	1 NON 2 - BLOO 3 - URIN 4 - BREA	OD				
- POLICE  - OTHER / L	INKNOWN	, ]		· NOT TR			P - PASSENGER		12 - UMITED - 0	THER		. 0	UTSIDE THE VEH THER / UNKNOV		5 - OTH					
SAFETY E	QUIPMEN		12 PASSENGER IN		NICAL ME	十分理 新门门门	N - TANKER Q - MOTOR SCO	OCTER	(SPECIAL BI	OR OT	iher 🤏	.13.73	CONDITIO	, 一个股份理量	1 - NON		IMPE			
- NONE USE - SHOULDER	Ď .	# 10	UNENCLOSED CARGO AREA 3 13 - TRAILING UNIT 14 - RIDING ON VEHICLE			AL WEARS	R - THREE-WHE MOTORCYC S - SCHOOL BU	LE	ADAPTIVE I 14 - MILITARY V 15 - MOTOR VE	EHICLES	S ONLY	2 - P) 3 - EN	PPARENTLY NOR HYSICAL IMPAIRI MOTIONAL (E.G.,	MENT	2 - BLOG 3 - URIN 4 - OTH	NE .				
- FORWARD - CHILD REST - REAR FAC - BOOSTER'S	RAINT SYSTEI FACING FRAINT SYSTEI ING EAT	vi i	EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN				T - DOUBLE & T TRAILERS X - TANKER / H/ GEND F - FEMALE	RIPLE AZMAT	WITHOUT 16 - OUTSIDE N 17 - PROSTHET 18 - OTHER	IRROR		DIII 4 - IU 5 - FE FA 6 - UI M	Pressed, Angry, Sturbed) Lness Lness, Ltiasleep, Fain Tigued, Etc. Noer The Influ Edications / Di Cohol Ther / Unknov	TED, ENCE OF RUGS / /N	1 - AMP 2 - BARE 3 - BENZ 4 - CANI 5 - COCA 6 - OPIA 7 - OTHE	HETAMINE BITURATES CODIAZEPI NABINOID AINE TES / OPIC ER	NES S DIDS			
3 HELMET US 9 - PROTECTIV (ELBOWS, 10 - REFLECTIV 11 - LIGHTING / BICYCLE	E PADS USED KNEES, ETC) /E CLOTHING - PEDESTRIAN ONLY						M - MALE U - OTHER / UN	KNOWN							8 - NEGA	ATIVE RESÛ	ILTS*			

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER						
UNIT # NAME: LAST, FIRST, MIDDLE									PD1878	T AGE				
- ONII #	MANUE: LA	SI, PIKSI, MIDDLE	, D	ATE OF BIRTH		AGE	GENDER							
ADDRESS:	STREET, CITY	/, STATE, ZIP					CONTACT PHON	E - INCLUDE AR	EA CODE					
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MED	ical Fàcility (name city)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
UNIT #	NAME: LA	ST, FIRST, MIDDLE				•	DA	ATE OF BIRTH		AGE	GENDER			
ADDRESS:	STREET, CIT	/, STATE, ZIP					CONTACT PHON	E - INCLUDE AR	EA CODE					
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	E EJECTION	TRAPPED					
UNIT #	NAME: LA	ST, FIRST, MIDDLE					DA	ATE OF BIRTH		AGE	GENDER			
ADDRESS:	STREET, CITY	/, STATE, ZIP					CONTACT PHON	E - INCLUDE AR	EA CODE					
	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDI	ICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	E EJECTION	TRAPPEC			
UNIT #	NAME: LA	ST, FIRST, MIDDLE					D/	ATE OF BIRTH		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: MED	SICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	SE EJECTION	TRAPPED			
J.	IN	JURIES	SAFETY	EQUIPMENT U	ISED	SEATING POS	ITION		AIR BAG	ISAGE				
4 - POS 5 - NO 1 - NO TRE 2 - EMS 3 - POL 9 - OTH	APPAREN INJURE THANSP ATED AT ICE HER / UNK GI TALE	(NOWN ENDER	3 - LAP BEL 4 - SHOULD 5 - CHILD R FORWA 6 - CHILD R REAR FA 7 - BOOSTE 8 - HELMET 9 - PROTEC (ELBOW 10 - REFLEC 11 - LIGHTII / BICYC	R SEAT USED TIVE PADS USEI S, KNEES, ETC) TIVE CLOTHING NG - PEDESTRIA	3 FROI 4 SECO (MOT 5 SECO 6 SECO 7 THIR (MOT 8 THIR 10 SLE D 11 PAS CAR 12 PAS N CAR 14 RID (NOI 15 NO	NT - MIDDLE NT - RIGHT SIDE ND - LEFT SIDE FORCYCLE PASSE ND - MIDDLE D - LEFT SIDE FORCYCLE SIDE FORCYCLE SIDE D - MIDDLE D - MIDDLE D - MIDDLE D - MIDDLE EPER SECTION O SSENGER IN OTH RIGO AREA NON-T CH AS A BUS, PICK-U SSENGER IN UNIT WING ON VEHICLE N-TEAILING UNIT N-MOTORIST HER / UNKNOWN	E F TRUCK CAB ER ENCLOSED RAILING UNIT P WITH CAP ENCLOSED	4 - DEPLIFRON 5 - NOT 9 - DEPLIF 1 - NOT 2 - PART 3 - TOTA 4 - NOT 1 - NOT 2 - EXTR MECL 3 - FREE	OYED SIDE OYED, BOTH T/SIDE APPLICABL OYMENT U EJECTE EJECTED IALLY EJECTE APPLICABL TRAPP TRAPPED, ICATED BY HANICAL M D'BY MECHANIC	E NKNOWI ON TED D E PED				
NAME: LA	ST, FIRST, M	IDDL€					D	ATE OF BIRTH		AGE	GENDER			
ADDRESS	: STREET, CIT	Y, STATE, ZIP			***************************************	,	CONTACT PHON	IE ~ INCLUDE AR	EA CODE					
NAME: LA	ST, FIRST, M	IDDLE	•				D	ATE OF BIRTH		AGE	GENDER			
ADDRESS	: STREET, CIT	Y, STATE, ZIP					CONTACT PHON	VE - INCLUDE AR	EA CODE					
NAME: LA	AST, FIRST, M	IDDLE					D	ATE OF BIRTH		AGE	GENDER			
ADDRESS	i: STREET, CIT	Y, STATE, ZIP		W.W.			CONTACT PHON	IE - INCLUDE AF	REA CODE					