<u>~ 702 12-3-19</u>

OHO DEPA	THURST	'n a r	rra C	D A CII	. Dr	DODT				n. aa			LOCAL REPO		<u> </u>
		X OH				PORT INFORMATION	DENOTE	S MANDATORY	FIELD FOR SUP	PLEME	NT REPORT			RI NUMBE D2035	K P
PHOTOS TA		Пон-			REPORT	TING AGENCY NAME	•			N	ICIC *	НТ/ЅКІР	NUMBER OF	UNITS	UNIT IN ERROR
X SECONDARY CRASH PRIVATE PROPERTY Millersburg						burg				03	3801	1 - SOLVED 2 - UNSOLVED	2_	_ L	98 - ANIMAL 1 99 - UNKNOWN
COUNTY* LOCALITY* 1 - CITY LOCATION: CITY. VILLAGE. TOWNSHIP*							_	CRASH DATE	/TIME*		ASH SEVERITY - FATAL				
38 2 2-VILLAGE Millersburg								11/30/201	9 14:36	L 5 .	- SERIOUS INJURY				
ROUTE TYPE	ROUTE NU	JMBER I		SOUTH	LOCATI	ION ROAD NAME					ROAD TYPE	l '	ECIMAL DEGREES] 3	SUSPECTED - MINOR INJURY
Госат				EAST WEST	Jacks	son					ST	40.554	220		SUSPECTED
ROUTE TYPE	ROUTE NU	JMBER	PREFIX 1 -	NORTH SOUTH	REFERE	NCE ROAD NAME (F	OAD, N	IILEPOST, HO	USE #)		ROAD TYPE	LONGITUDE	DECIMAL DEGREES		- INJURY POSSIBLE - PROPERTY DAMAGE
REFER				EAST WEST	Wash	hington					ST	-81.918	3447	_	ONLY
REFERENCE P		DI FROM	RECTION A REFERENCE			OUTE TYPE	7		ROAD TYPE		: ,		INTERSECT		
1 - INTERS		١,	1 - NORT 2 - SOUT	н	, .	TATE ROUTE (TP)		ALLEY AVENUE	HW - HIGHWA LA - LANE		RD - ROAD SO - SOUARE	X WITHIN INTE	RSECTION OR (ON APPROA	сн 4
3 - HOUSE	#		3 - EAST 4 - WEST	.	STATE F	AL US ROUTE ROUTE		BOULEVARD ,	MP - MILEPOS		ST - STREET TE - TERRACE	WITHIN INTE	RCHANGE ARE	A NUI	MBER OF APPROACHES
DISTANO FROM REFERE	E NCE	DI UNIT	ISTANCE OF MEASURE	CR-		ERED COUNTY ROUTE	. ст -	COURT	PK - PARKWA	Y T	TL - TRAIL		ROA	DWAY	
	1		1 - MILE 2 - FEET	TR -		ERED TOWNSHIP	4.0	DRIVE HEIGHTS	PI - PIKE PL - PLACE	. v	WA - WAY.	ROADWAY	DIVIDED		
	LOCATIO	N OF FIR	3 - YARE		route T	· · · · · · · · · · · · · · · · · · ·	MAN	NED OF CDAS	H COLLISION/	лмра	<u> </u>	DIRECTION OF TRA	VEL	MEDIA	AN TYPE
. 1-ON	ROADW	AY	9 - CRO	OSSOVER RIVEWAY/		1 7		COLLISION 4	- REAR-TO-REA			1 - NORTH	1	- DIVIDED FI	LUSH MEDIAN
3 - IN	MEDIAN			VILWAY GE			TWO	MOTOR 6	- BACKING - ANGLE			4 2 - SOUTH 3 - EAST		(<4 FEET) DIVIDED FI	LUSH MEDIAN
	I ROADSIE I GORE	DE		IARED USI AILS	E PATHS	S OR		31 0101	- SIDESWIPE, S			4 - WEST	3	(≥4 FEET) - DIVIDED, F	DEPRESSED MEDIAN
	TSIDE TRA	AFFIC WA	AY 13 - BI	KE LANE OLL BOOTH			2 - REAR 3 - HEAD	-END	- SIDESWIPE, C - OTHER / UNI					- DIVIDED, R	RAISED MEDIAN
	F RAMP			THER / UN				, (1,)	- OTTERY OF				9	(ANY TYPE) OTHER / U	
WORK ZON	RELATED)			WOR	RK ZONE TYPE		LOCATIO	N OF CRASH	IN W	ORK ZONE	CONTOUR	CONDI	TIONS	SURFACE
WORKERS F	RESENT				_	CLOSURE		1	- BEFORE THE 1		ORK ZONE	_1_	1	·	2
LAW ENFOR	CEMENT F	PRESENT				SHIFT/ CROSSOVER ON SHOULDER			- ADVANCE WA	ARNIN		1 - STRAIGHT LEVEL	1 - DRY		1 - CONCRETE
		_			OR MEI	DIAN			- TRANSITION - ACTIVITY ARE		•	2 - STRAIGHT	2 - WET 3 - 5NOW		2 - BLACKTOP, BITUMINOUS,
ACTIVE SCH	OOL ZON	IE			- INTERN - OTHER	MITTENT OR MOVING R	WORK		- TERMINATION		A	GRADE 3 - CURVE LEVEL	4 - ICE 5 - SAND, M	UD. DIRT.	ASPHALT 3 - BRICK/BLOCK
	LIGHT	CONDITI	ION					WEATHER				4 - CURVE GRADE	OIL, GRA		4 - SLAG , GRAVEL, STONE
]	YLIGHT WN/DUSI					1 - CLEAR 2 - CLOUDY		6 - SNOW 7 - SEVERE CROSSWINDS				9 - OTHER /UNKNOWN	MOVING		5 - DIRT
	RK - LIGH		ADWAY		Ľ		SMOKE	E 8 - BLOWING SAND, SOIL, DIRT, SNOW					7 - SLUSH 9 - OTHER /	UNKNOWN	9 - OTHER / UNKNOWN
l			IOT LIGHTE ROADWAY		3	4 - RAIN S - SLEET, HAIL			S RAIN OR FREE UNKNOWN	EZING	DRIZZLE				
l	HER / UNI					J JEEL, IIME		33 Official	o di ili						
NARRATIVE					•							•			
						n St. and Washing n St Unit one wh							Î		
Westbound	on Ja c ks	on St.	at an est	imated s	speed o	of ten miles per h	our ap	proached				,	Ñ	l	
the intersect	ion and	rear en	ided Unit	two cau	using n	minor damage to	Unit tw	<i>1</i> 0.					Jackson S	•	
												丿。 '。└	Jackson S		_
													<u> 2</u> 2,		
											U <u>nit T</u> wo	_ (2)			Unit One
												<u> </u>	110	= • One	
												、 ! !	Uni	t One	_
											<u>بر</u>				
											Washington	,			
											ashl				
											3				
CRASH REF	ORTED D	ATE / TI	ME		DISPAT	TCH DATE / TIME		AR	RIVAL DATE /	TIME	:	SCENE CLEARED	DATE / TIME		REPORT TAKEN BY
11/3	0/2019	14:36			11/3	0/2019 14:39		11	/30/2019 1	4:43		11/30/20	19 15:31	X	POLICE AGENCY
TOTAL TIME		OTHE		TOTA	AL T	OFFICER'S NAME*				Снес	CKED BY OFFICE	R'S NAME*			MOTORIST
ROADWAY CLO	ED INVE	STIGATI	ON TIME	MINUT		Mast, Andrea				igsqcup					SUPPLEMENT
0		0		52		OFFICE		GE NUMBER	•		CHECKED B	ED BY OFFICER'S BADGE NUMBER* (CORRECTION OR ADDITION OR ADDITION OF ADDITION OR ADDITION OF ADDITION			
0 0 52 111							٠								



LOCAL REPORT NUMBER

							WFD2033
UNIT#	OWNER NAME: LAST, FIRST, F	MIDDLE (SAME AS DRIVER)		DWNER PHONEINCLUDE AS	EA CODE (SAME AS DRIVER)		DAMAGE
1	MILLER, BENITA, L.			330-43	2-9041		MAGE SCALE
2	DDRESS: STREET, CITY, STATE, ZI					1 - NONE 1 - 2 - MINOR DAMA	3 - FUNCTIONAL DAMAGE
7	VER RD NE, SUGARCR						
COMMERC	IAL CARRIER: NAME, ADDRES	S, CITY, STATE, ZIP		COMMERCIAL CARRIER PH	ONE: INCLUDE AREA CODE		UNKNOWN
							MAGED AREA(S)
LP STATE	LICENSE PLATE #	AEHICTE 1	DENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE	INDICA	TE ALL THAT APPLY
OH	HUM8568	KMHCT4	1AE8HU307891	2017	HYUNDAI		12
INSURA	NCE INSURANCE COMPA	NY INS	SURANCE POLICY #	COLOR	VEHICLE MODEL		7 2
VERIFIE	P ERIE INSURANCE	Q10	8101548	WHI	ACCENT	10 11 2	10 11 7 2
	TYPE OF USE	-tu stassestum	US DOT#	TOWED BY: COMPANY	IAME	- 10 2 -	
СОММЕ	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE				9 9 3	9 9 3
INTERL		# OCCUPANTS VEHICL	E WEIGHT GVWR/GCWR 1 - ≤10K LBS.	MATERIAL CLA	S MATERIAL SS # PLACARD ID #	7	7 11 7
DEVICE EQUIPP	HIT/SKIP UNIT		2 - 10.001 - 26K LBS.	RELEASED			
equ.,			3 - > 26K LBS.	L_PLACARD L_		5 31	12 1 5
				•	PEDESTRIAN/SKATER	Ž	19
1			A CINICIE IGNIT	•	WHEELCHAIR (ANY TYPE) OTHER NON-MOTORIST	10/ `	
UNIT TYP	1/51/2007	TOCYCLE	TRUCK		BICYCLE		10 2 -
	10 - 10				TRAIN		
			7 - MOTORHOME	VIMAL-DRAWN VEHICLE 99.	UNKNOWN OR HIT/SKIP	8	可問 4
1 0	(ATV)	(UTV)					
						11	6 11 12
3 1	WAS VEHICLE OPERATING IN AN MODE WHEN CRASH OCCURRE	'	0 - NO AUTOMATION 3 -	CONDITIONAL AUTOMATION	9 - UNKNOWN	10 / 12	10 12 2
, 2		0	1 - DRIVER ASSISTANCE 4 -	HIGH AUTOMATION			
	1-YES 2-NO 9-OTHER/L		2 - PARTIAL AUTOMATION 5 -	FULL AUTOMATION			و النازاة الوالية
	1 1015	MODE LEVEL			24 1147 6170160		\- \[\bar{\bar{\bar{\bar{\bar{\bar{\bar{
	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FARM 17 - MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 7 1 0 1	8 7 5 4
1	3 - ELECTRONIC RIDE	8 - BUS - SHUTTLE	13 - POLICE	18 - SNOW REMOVAL	33 Official conditions	,	7
SPECIAL	SHARING	9 - BUS - OTHER	14 - PUBLIC UTILITY	19 - TOWING		6	6
FUNCTIO	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 ~ CONSTRUCTION EQUIP.	20 - SAFETY SERVICE 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 6 A	
CARGO	2 - 8US	CONTAINER CHASSIS	8 - POLE 9 - CARGO TANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER		R AAR	
BODY	3 - VEHICLE TOWING	6 - CARGOVAN	10 - FLAT BED	14 - GARBAGE/REFUSE			
TYPE	ANOTHER MOTOR VEHICLE	VENCTORED BOX				9	
1	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6	
VEHICLE	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOF ACCIDENT	l		6 6 6
DEFECTS	3 - IAC DIMI 3	0 - TINE BEOWOOT				- NO DAMAGE	0)
	1 - INTERSECTION -	4 - MIDBLOCK -	7 - SHOULDER/ROADSIDE	10 - DRIVEWAY ACCESS	99 - OTHER / UNKNOWN		
	MARKED CROSSWALK	MARKED CROSSWALK	8 - SIDEWALK	11 - SHARED USE PATHS		TOP[13]	- ALL AREAS [15]
MON- MOTORIST	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION	9 - MEDIAN/CROSSING	OR TRAILS 12 - FIRST RESPONDER		П.,,,	NIT NOT AT SCENE [16]
LOCATION	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	ISLAND	AT INCIDENT SCENE		<u> </u>	THE NOTE OF THE LEGISLE
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	9 - LEAVING TRAFFIC	15 - WALKING, RUNNING,	21 - STANDING OUTSIDE	INITIAL	POINT OF CONTACT
	2 - NON-COLLISION	2 - BACKING 3 - CHANGING LANES	LANE 10 - PARKED	JOGGING, PLAYING 16 - WORKING	DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DAMA	GE 14 - UNDERCARRIAGE
3	3-STRIXING 1	4 - OVERTAKING/PASSING	11 - SLOWING OR STOPPED	17 - PUSHING VEHICLE	33 - OTHER / DIRRIGONA	12 1-12 - REFER	TO UNIT 15 - VEHICLE NOT AT SCENE
ACTION		5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	IN TRAFFIC	18 - APPROACHING OR LEAVING VEHICLE		└── DIAGRA	.M 99 - UNKNOWN
	5 - BOTH STRIKING	7 - MAKING U-TURN	12 - DRIVERLESS 13 - NEGOTIATING A CURVE			13 - TOP	33 0111010111
	& STRUCK	8 - ENTERING TRAFFIC	14 - ENTERING OR CROSSING		ī		
	9 - OTHER / UNKNOWN 1 - NONE	LANE	SPECIFIED LOCATION 13 - IMPROPER START FROM	18 OBERATRIC OFFICE	22 ODENING COOK WITE		TRAFFIC
	2 - FAILURE TO YIELD	ACDA /ACDA	13 - IMPROPER START FROM A PARKED POSITION	18 - OPERATING DEFECTIVE EQUIPMENT	23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL
	3 - RAN RED LIGHT	9 - IMPROPER LANE	14 - STOPPED OR PARKED	19 - LOAD SHIFTING	99 - OTHER IMPROPER	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN
8	4 - RAN STOP SIGN 5 - UNSAFE SPEED	CHANGE 10 - IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	/FALLING/SPILLING 20 - IMPROPER CROSSING	ACTION	2 1	2 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
CONTRIBUT	NG C PURPOSER TURN	11 - DROVE OFF ROAD	16 - WRONG WAY	21 - LYING IN ROADWAY			
2 GROUMSIAI	ICES 7 - LEFT OF CENTER	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION	22 - NOT DISCERNIBLE		# of THROUGH LANES	RAIL GRADE CROSSING
SECTIONS	E OF EVENTS					ON ROAD	1 - NOT INVLOYED
3 2200 2140	E OF EVERYO		EVENTS	• 1	* ,	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
₁ 20	1 - OVERTURN/ROLLOVER	7 - SEPARATION OF UNITS	12 - DOWNHILL RUNAWAY	19 - ANIMAL -OTHER	23 - STRUCK BY FALLING,		
	☐ 2 - FIRE/EXPLOSION 3 - IMMERSION	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	SHIFTING CARGO OR ANYTHING SET IN	UNIT / NON	I-MOTORIST DIRECTION
21	4 - JACKKNIFE	10 - CROSS MEDIAN	15 - PEDALCYCLE	21 - PARKED MOTOR	MOTION BY A MOTOR VEHICLE		1 - NORTH 5 - NORTHEAST
	— S - CARGO / EQUIPMENT LOSS OR SHIFT	11 - CROSS CENTERLINE - OPPOSITE DIRECTION	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM	VEHICLE 22 - WORK ZONE	24 - OTHER MOVABLE		2 - SOUTH 6 - NORTHWEST
	6 - EQUIPMENT FAILURE	OF TRAVEL	18 - ANIMAL - PARM	MAINTENANCE	OBJECT	FROM 4 TO 3	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
3		201 IV		EQUIPMENT		/KOM 10	9 - OTHER / UNKNOWN
	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	N WITH FIXED OBJECT - 5 38 - OVERHEAD SIGN POST	STRUCK 45 - EMBANKMENT	52 - BUILDING		
4	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	39 - LIGHT / LUMINARIES	46 - FENCE 47 - MAILBOX	S3 - TUNNEL	UNIT SPEED	DETECTED SPEED
- 1	STRUCTURE	34 - MEDIAN GUARDRAIL	40 - UTILITY POLE	48 - TREE	54 - OTHER FIXED OBJECT		
٠	27 - BRIDGE PIER OR ABUTMENT	BARRIER 35 - MEDIAN CONCRETE	41 - OTHER POST, POLE OR SUPPORT	49 - FIRE HYDRANT SO - WORK ZONE	99 - OTHER / UNKNOWN	10	1 - STATED / ESTIMATED SPEED
	28 - BRIDGE PARAPET	BARRIER	42 - CULVERT	MAINTENANCE			1 12-CALCULATED / EDR
6	29 - 8RIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST	43 - CURB 44 - DITCH	EQUIPMENT 51 - WALL		POSTED SPEED	
. 4						25	3 - UNDETERMINED
	FIRST HARMFUL EVEN	IT 1 MOST	HARMFUL EVENT			4.5	1



LOCAL DEPORT NUMBER								
LO	CAL REPORT NUMBER							
	19MPD2035							
	DAMAGE SCALE							
1 - NONE	3 - FUNCTIONAL DAMAGE							
2 - MINOR D	AMAGE 4 - DISABLING DAMAGE							
	9 - UNKNOWN							
	DAMAGED AREA(S) DICATE ALL THAT APPLY							
	TOTAL CITAL OF A							
12 11 10 9 8 7 6 5 5	2 3 9 10 11 12 11 12 13 14 7 6 5 5 4							
12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 9 11 12 1 1 2 1 1 2 1 1 2 1 1 1 1 1 1 1							
12 3 6	12 12 12 9 3 9 6 3 9 © 0							
- NO DAMA	GE[0] - UNDERCARRIAGE[14]							
TOP[13]	- ALL AREAS [15]							
_	-							
<u></u>	- UNIT NOT AT SCENE[16]							
0 - NO DA 1-12 - RE	FER TO UNIT 15 - VEHICLE NOT AT SCENE GRAM 99 - UNKNOWN							
	TRAFFIC							
1 - ONE-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN							

	0 110 01 11111101		•
6	1-12 - REFER TO UNIT	15 -	٧

THROUGH LANES

2 - SIGNAL 3 - FLASHER

S - YIELD SIGN 6 - NO CONTROL RAIL GRADE CROSSING

ON ROAD 2

2 - TWO-WAY

1 - NOT INVLOVED

2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING

UNIT	/ NON-MOTORIST	DIRECTION

		1 - NORTH	S - NORTHEAST
		2 - SOUTH	6 - NORTHWEST
. 4		3 - EAST	7 - SOUTHEAST
FROM 4	то 3	4 - WEST	8 - SOUTHWEST
			9 - OTHER / UNKNOWN

	2 - Official of Minoral
UNIT SPEED	DETECTED SPEED
0	1 - STATED / ESTIMATED SPEED
POSTED SPEED	1 2 - CALCULATED / EDR
25	3 - UNDETERMINED

UNIT # OWNER NAME: LAST, FIRST, MIC	DDLE (SAME AS DRIVER)		OWNER	PHONE:INCLUDE AR	EA CODE (SAME AS DRIVER)					
2 JAHART, JOANNE			330-807-5619							
OWNER ADDRESS: STREET, CITY, STATE, ZIP (D SAME AS DRIVER)					_				
509 S MEDINA LINE RD, COPLEY, OH, 44321										
COMMERCIAL CARRIER: NAME, ADDRESS, (CITY, STATE, ZIP		Con	IMERCIAL CARRIER PH	ONE: INCLUDE AREA CODE					
LP STATE LICENSE PLATE #	VEHICI	LE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE					
OH EFM6283	JF2GI	PAMC0F8288974		2015	SUBARU					
INSURANCE INSURANCE COMPANY	1	INSURANCE POLICY #		COLOR	VEHICLE MODEL	"				
VERIFIED LEONARD INSURA	NCE V	VNP53500681	,	SIL	CROSSTREK	10				
	N EMERGENCY RESPONSE	US DOT #	TOW	ED BY: COMPANY N	AME	9				
		ICLE WEIGHT GVWR/GCWR	١Пм	HAZARDOU ATERIAL CLAS	S MATERIAL SS # PLACARD ID #	—				
DEVICE HIT/SKIP UNIT		1 - ≤10K LBS. 2 - 10.001 - 26K LBS.	⊢RI	LEASED	S# PLACARDID#	8 🗸				
EQUIPPED	1	3 - > 26K tBS.	РІ	ACARD L		7				
2 - PASSENGER VAN 7 - MOTE (MINIVAN) 8 - MOTE VEHICLE 10 - MOTE VEHICLE 10 - MOTE MICH VEHI	PED OR MOTORIZED /CLE TERRAIN VEHICLE	13 - SNOWMOBILE 19 - E 14 - SINGLE UNIT 20 - C TRUCK 21 - F 15 - SEMI-TRACTOR 22 - A	BUS (16+ PA OTHER VEH HEAVY EQU ANIMAL WI	ASSENGERS) 24 - ICLE 25 - IPPMENT 26 - TH RIDER OR 27 -	PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE) OTHER NON-MOTORIST BICYCLE TRAIN UNKNOWN OR HIT/SKIP					
WAS VEHICLE OPERATING IN AUTI MODE WHEN CRASH OCCURRED?	0	1 - DRIVER ASSISTANCE 4	- HIGH AU	ONAL AUTOMATION TOMATION	9 - UNKNOWN	10				
1 - YES 2 - NO 9 - OTHER/UNI	KNOWN AUTONOMO MODE LEVE	U\$ 2 - PARTIAL AUTOMATION S	- FULL AUT	romation .		9				
1 - NONE	6 - BUS - CHARTER/TOU	·	16 - FA	.RM	21 - MAIL CARRIER	-				
	7 - BUS - INTERCITY	12 - MILITARY		OWING	99 - OTHER / UNKNOWN	8				
THE THE PARTY OF T	8 - BUS - SHUTTLE	13 - POLICE		IOW REMOVAL		7				
TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19 - TC							
S - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIP		FETY SERVICE TROL						
a 1 - NO CARGO BODY TYPE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - DI	IMP	99 - OTHER / UNKNOWN					
/ NOT APPLICABLE	S - INTERMODAL	8 - POLE		ONCRETE MIXER						
CARGO 2 - BUS RODY 3 - VEHICLE TOWING	CONTAINER CHASSIS 6 - CARGOVAN	9 - CARGO TANK	13 - AL	JTO TRANSPORTER		€ ا				
TYPE ANOTHER MOTOR VEHICLE	/ENCLOSED BOX	10 - FLAT BED	14 - G	ARBAGE/REFUSE		1				
	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MO	TOR TROUBLE	99 - OTHER / UNKNOWN					
2 - HEAD LAMPS	S - STEERING	8 - TRAILER EQUIPMENT		SABLED FROM PRIOR						
VEHICLE 3 - TAIL LAMPS DEFECTS	6 - TIRE BLOWOUT	DEFECTIVE		CIDENT						
Derecis										
	4 - MIDBLOCK -	7 - SHOULDER/ROADSIDE		RIVEWAY ACCESS	99 - OTHER / UNKNOWN					
MARKED CROSSWALK 2 - INTERSECTION -	MARKED CROSSWAI 5 - TRAVEL LANE -	B - SIDEWALK		IARED USE PATHS LTRAILS						
MOTORIST UNMARKED CROSSWALK	OTHER LOCATION	9 - MEDIAN/CROSSING ISLAND	12 - FII	RST RESPONDER						
3 - HATERSECTION - OTHER	6 - BICYCLE LANE			INCIDENT SCENE	21 27110112 2117					
	1 - STRAIGHT AHEAD 2 - BACKING	9 - LEAVING TRAFFIC LANE		ALKING, RUNNING, GGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE					
2 - NON-COLLISION 11	3 - CHANGING LANES	10 - PARKED	16 - W	ORKING	99 - OTHER / UNKNOWN	_				
3 - STRIKING	4 - OVERTAKING/PASSIN 5 - MAKING RIGHT TURN			JSHING VEHICLE PPROACHING OR		6				
ACTION 4 - STRUCK ACTIONS	6 - MAKING LEFT TURN	12 - ORIVERLESS		AVING VEHICLE						
S - BOTH STRIKING & STRUCK	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	19 - ST	ANDING						
9 - OTHER / UNKNOWN	B - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSIN SPECIFIED LOCATION	IG 20 - O	THER NON-MOTORIS	7					
		OSE 13 - IMPROPER START FROM	1 18 - OP	ERATING DEFECTIVE	23 - OPENING DOOR INTO	TRAFFI				
2 - FAILURE TO YIELD	/ACDA	A PARKED POSITION	EQ	UIPMENT	ROADWAY	IKAFF				
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	_				
S - UNSAFE SPEED	10 - IMPROPER PASSING			PROPER CROSSING	*********	2				
CONTRIBUTING 6 - IMPROPER TURN CIRCUMSTANCES 7 - LEFT OF CENTER	11 - DROVE OFF ROAD	16 - WRONG WAY		ING IN ROADWAY		# == ====				
/ - LEFT OF CENTER	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION	22 - NC	OT DISCERNIBLE		# OF THR				
SEQUENCE OF EVENTS						1				
1	10 M 10 M	EVENTS			e de la companya de l	L				
1 1 2 0 1	? - SEPARATION OF UNIT: B - RAN OFF ROAD RIGHT			NIMAL -OTHER OTOR VEHICLE IN	23 - STRUCK BY FALLING, SHIFTING CARGO OR	<u> </u>				
	- RAN OFF ROAD LEFT	14 - PEDESTRIAN		ANSPORT	ANYTHING SET IN					
1 5 1 1	0 - CROSS MEDIAN	15 - PEDALCYCLE		RKED MOTOR HICLE	MOTION BY A MOTOR VEHICLE					
5 - CARGO / EQUIPMENT 1 LOSS OR SHIFT	11 - CROSS CENTERLINE - OPPOSITE DIRECTION			ORK ZONE	24 - OTHER MOVABLE OBJECT					

45 - EMBANKMENT 46 - FENCE 47 - MAILBOX

4B - TREE 49 - FIRE HYDRANT SO - WORK ZONE MAINTENANCE

EQUIPMENT

S1 - WALL

52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED

OBJECT 99 - OTHER / UNKNOWN

MAINTENANCE EQUIPMENT

18 - ANIMAL - DEER

40 - UTILITY POLE

42 - CULVERT

41 - OTHER POST, POLE OR SUPPORT

 COLLISION WITH FIXED OBJECT - STRUCK

 31 - GUARDRAIL END
 38 - OVERHEAD SIGN POST
 45 - EMB

 32 - PORTABLE BARRIER
 39 - LIGHT / LUMINARIES
 46 - FEN

 33 - MEDIAN CABLE BARRIER
 SUPPORT
 47 - MA

MOST HARMFUL EVENT

OF TRAVEL

34 - MEDIAN GUARDRAIL BARRIER

35 - MEDIAN CONCRETE

6 - EQUIPMENT FAILURE

25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD

STRUCTURE

27 - BRIDGE PIER OR ABUTMENT

28 - BRIDGE PARAPET

FIRST HARMFUL EVENT

29 - BRIDGE RAIL 30 - GUARDRAIL FACE

	_											,			
E	Motorist / Non-Motorist							LOCAL REPORT NUMBER 19MPD2035							
	,	~~~~~~~~~~							 		L9IV	IPD203	35	4	·
UNIT #	l	ST, FIRST, MIDDLE												AGE	GENDER
1		CAITLIN, FAITH	•••••											F	
2	dress; street, city, state, zip 5 DOVER RD NE, SUGARCREEK, OH, 44681								1		ONE - INCLUDE A	REA CODE			
315 DOV INJURIES 5	,	EMS AGENCY (NAME)	21	Trailinen:	TAKEN TO: N	TEDICAL FACILITY (NAME.	crav)	SAFETY EQUIPMENT	330-	330-432-6902 SEATING AIR BAG USAGE EJECTION TRAPP					
NOORES	TAKEN	EIVIS AGENCY (NAME)		I TOOKED	IARLIE IO. II	rentent Present (IMME)	witty	USED		T-COMPLE HELME	ANT POSITION				
	8Y 1						LOCAL	2		1166,016	' 1	1		1	1
OL STATE		LICENSE NUMBER			SE CHARG	ED	CODE	OFFENSE DESCRI	PIION			CITATI	ION NU	IMREK	
<u> </u>	UX58512			333.0				ACDA		LCOLL	AL TECT		WNJZTP DRUG TEST(S)		
OL CLASS	ENDORSEM	RESTRICTION SELECT UP TO	DIST	TRACTED		HOL MARU		CONDITION	STATUS	TYPE	OL TEST VALUE	STATUS	TYPE	_	SELECT UP TO 4
4			ВУ	8	I H	R DRUG		1	1	1		1	1.		
UNIT #	NAME: LA	ST, FIRST, MIDDLE						•			DATE OF BIRTH			AGE	GENDER
2	JOJANT,	JO, ANNE									06/23/1950			69	F
	STREET, CITY	, STATE, ZIP							CONT	ACT PH	ONE - INCLUDE A	REA CODE			·
509 S M	EDINA LIN	IE RD, COPLEY, OH, 4432	1						330-	807-56	519	•			
	INJURED TAKEN	EMS AGENCY (NAME)		INJURED '	TAKEN TO: N	REDICAL FACILITY (NAME	CITY)	SAFETY EQUIPMENT USED	p0	Т-Сомри	SEATING ANT POSITION	AIR BAG	USAGE	EJECTIO	TRAPPED
INJURIES 5	BY 1		*					2	Шмс	HELME	^T 1	1	1 1 1		
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	E CHARG	ED	LOCAL	OFFENSE DESCRI	PTION			CITAT	ION NU	JMBER	
OL STATE	RJ72174	5													
OL CLASS	ENDORSEM	ENT RESTRICTION SELECT UP TO				IOL / DRUG SUSPI		CONDITION			OL TEST			TEST(
4			BY	TRACTED	\equiv	HOL MARUI R DRUG	JANA	1	STATUS	TYPE	VALUE	status 1	TYPE (RESULTS	SELECT UP TO 4
UNIT #	NAME: LA	ST, FIRST, MIDDLE	i		LIOIHE	R DRUG			-	1	DATE OF BIRTH			AGE	GENDER
3.227														,,,	CENTER
ADDRESS:	STREET, CITY	, STATE, ZIP							CONT	ACT PH	ONE - INCLUDE A	REA CODE			<u> </u>
TORI															
NON-WOLLOW INJURIES		EMS AGENCY (NAME)		INJURED	TAKEN TO: N	MEDICAL FACILITY (NAME,	aiv)	SAFETY EQUIPMENT		Т-Сомры	SEATING ANT POSITION	AIR BAG	USAGE	EJECTIO	N TRAPPED
NON	TAKEN BY							USED	MC HELMET						
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	SE CHARG	ED	LOCAL	OFFENSE DESCR	PTION		•	CITAT	ION NL	JMBER	
010															
OL CLASS	ENDORSEM	ENT RESTRICTION SELECT UP TO			I	IOL / DRUG SUSPI		CONDITION			OL TEST			TEST(
			BY	TRACTED	=	HOL MARUI R DRUG	JANA		STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4
INII	I URIES	SEATING POSITION		AIR BAG		l olcia	s s	OL RESTRIC	TIONS	i Ing	IVER DISTRA	CTION	Ti	EST ST/	ATUS
1 - FATAL	i i	1 - FRONT - LEFT SIDE	1 - NOT D 2 - DEPLO	EPLOYED-		1 - CLASS A	Section 1	1 - ALCOHOL INTER		1.1	OT DISTRACTED			IE GIVEN	era jega Kadala jera
2 - SUSPECTED INJURY	SERIOUS	2 - FRONT - MIDDLE	3 - DEPLO	YED SIDE		2 - CLASS B		DEVICE 2 - CDL INTRASTAT		* El	MANUALLY OPERAT ECTRONIC		2 - TEST 3 - TEST	REFUSED GIVEN,	
3 - SUSPĚCTED INJURY	MINOR	3 - FRONT - RIGHT SIDE	4 - DEPLO FRONT,	/SIDE	20	3 - CLASS C 3.		3 - CORRECTIVE LE		{	OMMUNICATION TEXTING, TYPING,	DEVICE		TAMINATI USABLE	ED SAMPLE
4 - POSSIBLE IN	ف بهای	(MOTORCYCLE PASSENGER S - SECOND - MIDDLE		PPLICABLE YMENT UN		4 - REGULAR CLA (OHIO = D)	77	S - EXCEPT CLASS A 6 - EXCEPT CLASS A		3-1	IALING TALKING ON HAND			' GIVEN, ILTS KNO\	νN
5 - NO APPARE	NT INJURY	6 - SECOND - RIGHT SIDE		JECTIO	os*;≛ N	5 - M/C MOPED (ONLY	& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER	₹ • (4)- T	OMMUNICATION	-HELD	S - TEST RESU	GIVEN, ILTS UNKN	NOWN
INJURIES	TAKEN B	(MOTORCYCLE SIDE CAR)	1 - NOTE	ECTED 🦂		6 - NO VALID OL		8 - INTERMEDIATE RESTRICTIONS	1	5 0	OMMUNICATION I THER ACTIVITY W LECTRONIC DEVICE	TH AN			STTYPE
1 - NOT TRAN	H %	9 THIRD - RIGHT SIDE 4	2 - PARTIA			OL ENDORS	EMENT	9 - LEARNER'S PERM RESTRICTIONS		6 - P	ASSENGER OTHER DISTRACTIO		1:- NON 2 - BLOC		A. S.
2 - EMS		OF TRUCK CAB	4 - NOT A		2111	H - HAZMAT M - MOTORCYCL	F	ONLY		- 1	NSIDE THE VEHICLE OTHER DISTRACTION		3 - URIN 4 - BREA	E .	4
3 - POLICE	<i>(</i>)	OTHER ENCLOSED CARGO	1 - NOT TE	RAPPE	D	P - PASSENGER		11 - LIMITED TO EM	ER	``	OUTSIDE THE VEHIC	LE 🎉	S - OTH		
9 - OTHER/U	1	AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - EXTRIC		ANS	N - TANKER	TEP	(SPECIAL BRAK	S, HAND	3 -,0	CONDITIO	M	DRI 1 - NON	UG TES	T TYPE
SAFETY E	\$2.000	UNENCLOSED CARGO ARE	A 3 - FREED			R - THREE-WHEE	Sin A vive A	CONTROLS, OF ADAPTIVE DEV	CES)		PPARENTLY NORM	IAL	2 - BLOC 3 - URIN	DD	The second of
2 - SHOULDER USED		14 RIDING ON VEHICLE EXTERIOR	14014-14	IECHANICI	ML IVICAINS	MOTORCYCLI S - SCHOOL BUS	E .	14 - MILITARY VEHI 15 - MOTOR VEHIC	LES	3 - E	MOTIONAL (E.G., EPRESSED, ANGRY,		4 - OTH		18 × 5
3 - LAP BELT O		(NON-TRAILING UNIT)		, , , , , , , , , , , , , , , , , , ,		T - DOUBLE & TR	IPLE	WITHOUT AIR I 16 - OUTSIDE MIRR 17 - PROSTHETIC A	OR ·	(D	(STURBED)				RESULT(S
4 - SHOULDER USED	\$4.	99'-OTHER/UNKNOWN		. ,		TRAILERS X - TANKER / HA	ZMAT	18 - OTHER	٠.	5 - F	LLNESS ELL ASLEEP, FAINTI	ED.	2 BARB	HETAMINI ITURATES	х ,
S - CHILD REST - FORWARD	FACING.	一直の無限・・・・ル森			about Make	1 183	(°.		Tue .	- 16 ° L	ATIGUED, ETC. INDER THE INFLUE	NCE OF 2	- CANN	ODIAZEPI VABINOÎD	
6 - CHILD REST - REAR FACT	NG	1		5		GENDE	R			* - 16 £A	MÉDICATIONS / DRI LCOHOL .		COCA OPIAT	TES / OPIC	parte a coll.
7 - BOOSTER S 8 - HELMET US					4	M - MALE				- [9 - C	THER / UNKNOW!	۱ <u>ا</u>	- OTHE		
9 - PROTECTIÝI (ELBOWS, K					New's	U - OTHER / UNK	NOWN		,		s *				, ,
10 - REFLECTIV 11 - LIGHTING	E CLOTHING	A Company							·.				,		*
/ BICYCLE		AN									10.11 统二		ē . 1	** 1	Mark of

Come Day	OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER 19MPD2035						
UNIT #	JNIT # NAME: LAST, FIRST, MIDDLE						DA	AGE	GENDER				
. 2	JOHART, CHRISTINE, M						05.	1	38	F			
ADDRESS:	STREET, CITY	/, STATE, ZIP				,	CONTACT PHONE - INCLUDE AREA CODE						
Address:	E ST, WAD	SWORTH, OH, 44281					330-807-5691						
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CI	(YIE	AFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
5	BY 1	·				2	MC HELMET	3	1	1	1		
' UNIT #	NAME: LA	ST, FIRST, MIDDLE					DA	TE OF BIRTH		AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP CO						CONTACT PHONE - INCLUDE AREA CODE							
INJURIES	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT TAKEN BY				DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED				
UNIT #	NAME: LA	ST, FIRST, MIDDLE			1		DA	TE OF BIRTH	, 	AGE	GENDER		
ADDRESS:	STREET, CITY	y, STATE, ZIP				•	CONTACT PHONI	- INCLUDE ARE	A CODE				
	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CI	(31Y) S	AFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
UNIT #	NAME: LA	ST, FIRST, MIDDLE			I		DA	TE OF BIRTH		AGE	GENDER		
ADDRESS:	STREET, CITY	, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CI	city) 5	AFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
- (<u> </u>	URIES	CAEET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG I	ISAGE			
3 - SUS 4 - POS 5 - NO 1 - NOT TREA 2 - EMS 3 - POL 9 - OTH	1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN 9 - PROTECTIVE PADS USED 1 - REFT SIDE (MOTORCYCLE PRINT SIDE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN 1 - NOT REFT SIDE (MOTORCYCLE PRINT SIDE 2 - EMS 3 - POLICE 10 - SECOND - RIGHT SIDE (MOTORCYCLE SIDE 8 - THIRD - LEFT SIDE (MOTORCYCLE SIDE 8 - THIRD - LEFT SIDE (MOTORCYCLE SIDE 8 - THIRD - MIDDLE 9 - PROTECTIVE PADS USED 11 - PASSENGER IN OTH (ELBOWS, KNEES, ETC) SUCH AS A BUS, PICK-					- MIDDLÉ - RIGHT SIDE ID - LEFT SIDE RCYCLE PASSE ID - RIGHT SIDE - LEFT SIDE RCYCLE SIDE C - MIDDLE - RIGHT SIDE RIGHT SIDE RIGHT SIDE ER SECTION OF	3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN CAR) EJECTION 1 - NOT EJECTED OF TRUCK CAB HER ENCLOSED TRAILING UNIT UP WITH CAP) 3 - TOTALLY EJECTED 4 - NOT APPLICABLE						
M - MA U - OT	ALE HER / UNI		7.5	LEONLY 1 7 UNKNOWN 1 1	3 - TRAIL 4 - RIDIN (NON-1 5 - NON-	ING UNIT IG ON VEHICLE FRAILING UNIT MOTORIST R / UNKNOWN		2 - EXTRI MECH 3 - FREEL NON-	TRAPPED CATED BY IANICAL M D BY MECHANIC	ANS	***************************************		
NESS	NAME: LAST, FIRST, MIDDLE							TE OF BIRTH		, AGE	GENDER		
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHON	- INCLUDE ARI	EA CODE	1			
NESS	AST, FIRST, MI						DA	TE OF BIRTH		AGE	GENDER		
ADDRESS	: STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE ARI	EA CODE				
NAME: LA	AST, FIRST, MI	DDLE					DATE OF BIRTH AG				GENDER		
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE						