

**TRAFFIC CRASH REPORT**

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN	<input type="checkbox"/> OH-2	<input type="checkbox"/> OH-3
<input type="checkbox"/> SECONDARY CRASH	<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER
	<input type="checkbox"/> PRIVATE PROPERTY	

LOCAL INFORMATION

SOLON

REPORTING AGENCY NAME\*

SOLON P.D.

NCIC\*

01849

HIT/SKIP

1 - SOLVED

2 - UNSOLVED

LOCAL REPORT NUMBER\*

20210659

NUMBER OF UNITS

3

UNIT IN ERROR

0 1 98 - ANIMAL

1 99 - UNKNOWN

COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*
18	1 2 - VILLAGE 3 - TOWNSHIP	SOLON

CRASH DATE / TIME\*

12/03/2021 14:40

CRASH SEVERITY

- 1 - FATAL
- 2 - SERIOUS INJURY SUSPECTED
- 3 - MINOR INJURY SUSPECTED
- 4 - INJURY POSSIBLE
- 5 - PROPERTY DAMAGE ONLY

ROUTE TYPE	ROUTE NUMBER	PREFIX N - NORTH S - SOUTH E - EAST W - WEST	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES
		SOLON		RD	41.393683
ROUTE TYPE	ROUTE NUMBER	PREFIX N - NORTH S - SOUTH E - EAST W - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES
		ERICO		DR	81.433484

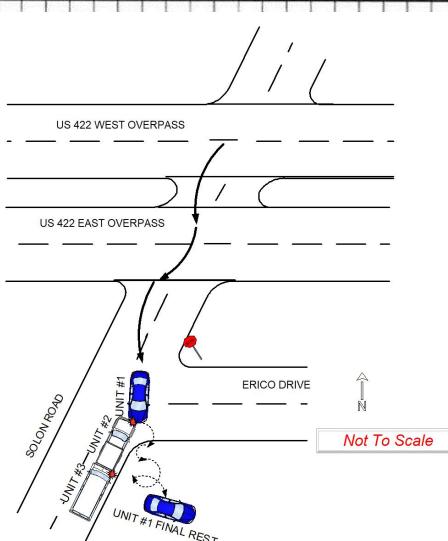
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	DIRECTION FROM REFERENCE N - NORTH S - SOUTH E - EAST W - WEST	ROUTE TYPE IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS	ROAD TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE	RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY	INTERSECTION RELATED <input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA
DISTANCE FROM REFERENCE 3	DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS					NUMBER OF APPROACHES 2

LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP	MANNER OF CRASH COLLISION/IMPACT 9 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED USE PATHS OR TRAILS 13 - BIKE LANE 14 - TOLL BOOTH 99 - OTHER / UNKNOWN	DIRECTION OF TRAVEL N - NORTH S - SOUTH E - EAST W - WEST	MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN (< 4 FEET) 2 - DIVIDED FLUSH MEDIAN (≥ 4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER/UNKNOWN
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WORK ZONE RELATED <input type="checkbox"/>	WORK ZONE TYPE 1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER	LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	CONTOUR 1	CONDITIONS 2	SURFACE 2
WORKERS PRESENT <input type="checkbox"/>			1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/UNKNOWN	1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN
LAW ENFORCEMENT PRESENT <input type="checkbox"/>					
ACTIVE SCHOOL ZONE <input type="checkbox"/>					

LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	WEATHER 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL	1 - SNOW 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN	1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/UNKNOWN	1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN
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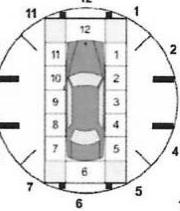
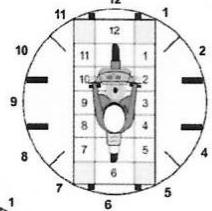
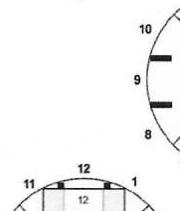
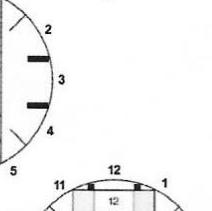
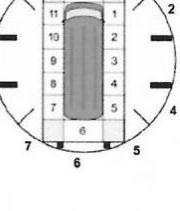
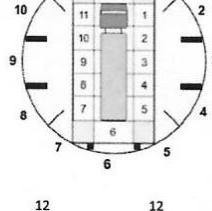
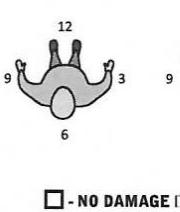
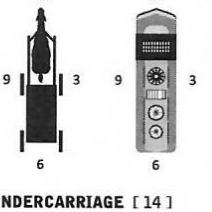
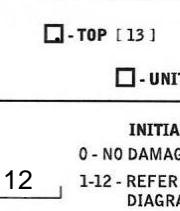
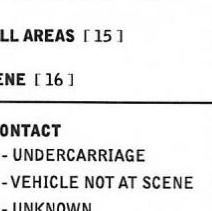
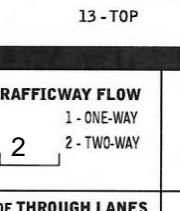
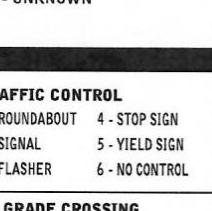
Unit #1 was actively fleeing from Bentleyville Police and traveling west on Solon Road at Erico Drive. Units #2 and #3 were traveling east on Solon Road at Erico Drive and came to a stop. Unit #1 lost control of the vehicle and crossed into the east bound lane of travel. The front of unit #1 struck the front of unit #2. Unit #2 then spun approximately 300 degrees clockwise before the rear of unit #2 struck the front of unit #3.



Indicate the north direction with an "N" on the compass diagram.

CRASH REPORTED DATE / TIME 12/03/2021 14:40	DISPATCH DATE / TIME 12/03/2021 14:40	ARRIVAL DATE / TIME 12/03/2021 14:40	SCENE CLEARED DATE / TIME 12/03/2021 16:34	REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST
TOTAL TIME ROADWAY CLOSED 114	OTHER INVESTIGATION TIME 114	TOTAL MINUTES 114	OFFICER'S NAME* ANTHONY HORVATH OFFICER'S BADGE NUMBER* 7108	CHECKED BY OFFICER'S NAME* THOMAS LESNER CHECKED BY OFFICER'S BADGE NUMBER* 0765
				<input type="checkbox"/> SUPPLEMENT (CORRECTION or ADDITION TO AN EXISTING REPORT SENT TO COPS)

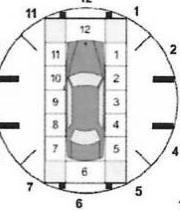
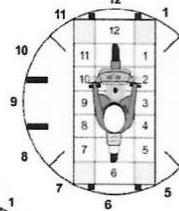
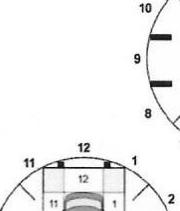
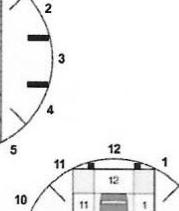
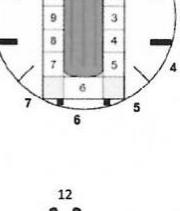
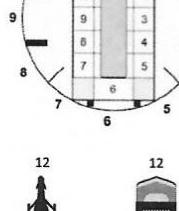
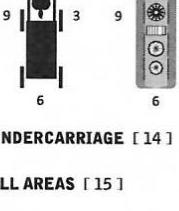
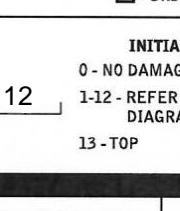
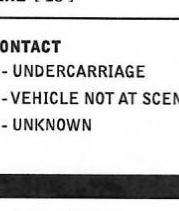
OWNER # <b>01</b>	OWNER NAME: LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER) <b>CLEMONS NAZIR SEVEN</b>		OWNER PHONE: INCLUDE AREA CODE ( <input type="checkbox"/> SAME AS DRIVER)																																				
OWNER ADDRESS: STREET, CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER) <b>5632 CARLTON DR BEDFORD HTS OH 44146</b>																																							
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE																																					
LP STATE <b>OH</b>	LICENSE PLATE # <b>JIB5813</b>	VEHICLE IDENTIFICATION # <b>3FAHP0HAXCR341881</b>	VEHICLE YEAR <b>2012</b>																																				
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	VEHICLE MAKE <b>FORD</b>																																				
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME <b>H &amp; H TOWING</b>																																				
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT		#OCCUPANTS <b>2</b>	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.																																				
HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD																																							
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WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? <b>2</b> 1 - YES 2 - NO 9 - OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL <b>0</b>	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN																																				
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DAMAGE		
DAMAGE SCALE		
4	1 - NONE 2 - MINOR DAMAGE 9 - UNKNOWN	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE
DAMAGED AREA(S) INDICATE ALL THAT APPLY		
           		
<input type="checkbox"/> - NO DAMAGE [ 0 ] <input type="checkbox"/> - UNDERCARRIAGE [ 14 ]		
<input type="checkbox"/> - TOP [ 13 ] <input checked="" type="checkbox"/> - ALL AREAS [ 15 ]		
<input type="checkbox"/> - UNIT NOT AT SCENE [ 16 ]		
INITIAL POINT OF CONTACT		
12	0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP	14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
TRAFFIC		
TRAFFICWAY FLOW <b>2</b>	TRAFFIC CONTROL <b>6</b>	RAIL GRADE CROSSING
1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 6 - NO CONTROL	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
# OF THROUGH LANES ON ROAD <b>02</b>		
UNIT / NON-MOTORIST DIRECTION		
FROM <b>3</b> TO <b>4</b>	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
UNIT SPEED <b>80</b>		
DETECTED SPEED <b>1</b>		
POSTED SPEED <b>35</b>		

OWNER UNIT # 02	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER SCHULTZ NORMAN JAMES		OWNER PHONE: INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER
OWNER ADDRESS: STREET, CITY, STATE, ZIP <input type="checkbox"/> SAME AS DRIVER 7444 CHAGRIN RD CHAGRIN FALLS OH 44023			
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	
LP STATE OH	LICENSE PLATE # EFP3018	VEHICLE IDENTIFICATION # 3GCNYAEF2KG269603	VEHICLE YEAR 2019
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	VEHICLE MAKE CHEV
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME H & H TOWING
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT		# OCCUPANTS 2	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.
UNIT TYPE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	
# OF TRAILING UNITS		# OCCUPANTS 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 - YES 1 - NO 0 - OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	
SPECIAL FUNCTION 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - LOGGING	
CARGO BODY TYPE 1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS		6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	
VEHICLE DEFECTS 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	
NON-MOTORIST LOCATION AT IMPACT 1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL	
ACTION 5 - BOTH STRIKING & STRUCK ACTIONS 9 - OTHER / UNKNOWN		21 - MAIL CARRIER 22 - OTHER / UNKNOWN 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	
CONTRIBUTING CIRCUMSTANCES 1 - FAILURE TO YIELD 2 - RAN RED LIGHT 3 - RAN STOP SIGN 4 - UNSAFE SPEED 5 - IMPROPER TURN		1 - NO AUTOMATION 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	
SEQUENCE OF EVENTS 20 - OVERTURN/ROLLOVER 1 - FIRE/EXPLOSION 3 - IMMERSION 21 - JACKKNIFE 5 - CARGO/EQUIPMENT LOSS OR SHIFT		1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	
25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 51 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 61 - BRIDGE RAIL 30 - GUARDRAIL FACE		4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	
1 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN		7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	
11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE		9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	
31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER		16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE	
37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT		22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVEABLE OBJECT	
43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT		50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	
1 - FIRST HARMFUL EVENT 1 - MOST HARMFUL EVENT			

DAMAGE SCALE 4 - NONE 2 - MINOR DAMAGE 1 - UNKNOWN		3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
DAMAGED AREA(S) INDICATE ALL THAT APPLY 1 12			
<input type="checkbox"/> - NO DAMAGE [ 0 ]		<input type="checkbox"/> - UNDERCARRIAGE [ 14 ]	
<input type="checkbox"/> - TOP [ 13 ]		<input type="checkbox"/> - ALL AREAS [ 15 ]	
<input type="checkbox"/> - UNIT NOT AT SCENE [ 16 ]			
INITIAL POINT OF CONTACT 12 - NO DAMAGE 1 - REFER TO UNIT DIAGRAM 13 - TOP			
14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN			
TRAFFIC WAY FLOW 2 - ONE-WAY		TRAFFIC CONTROL 6 - TWO-WAY	
# OF THROUGH LANES ON ROAD 02		RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING	
TRAFFIC 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL			
# OF THROUGH LANES ON ROAD 02		RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING	
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UNIT / NON-MOTORIST DIRECTION FROM 3 TO 4		UNIT / NON-MOTORIST DIRECTION 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
UNIT SPEED 0		DETECTED SPEED 1	
POSTED SPEED 25		3 - UNDETERMINED	

OWNER UNIT # 03	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER LILLEY PAUL JAMES		OWNER PHONE: INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER
OWNER ADDRESS: STREET, CITY, STATE, ZIP <input type="checkbox"/> SAME AS DRIVER 2277 NORTON LN N BLOOMFIELD OH 44450			
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	
LP STATE OH	LICENSE PLATE # JGN2703	VEHICLE IDENTIFICATION # 1FBSS31L93HB49157	VEHICLE YEAR 2003
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY GENERAL	INSURANCE POLICY # OH5734502	VEHICLE MAKE FORD
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME H & H TOWING
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT		# OCCUPANTS 1	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.
UNIT TYPE 5 - 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	
# OF TRAILING UNITS		# OCCUPANTS 1	
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 - 1 - YES 2 - NO 9 - OTHER/ UNKNOWN		AUTONOMOUS MODE LEVEL 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN	
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CARGO BODY TYPE 1 - 1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - 2 - BUS		1 - FIRE 2 - MILITARY 3 - POLICE 4 - PUBLIC UTILITY 5 - CONSTRUCTION EQUIPMENT 6 - FARM 7 - MOWING 8 - SNOW REMOVAL 9 - TOWING 10 - MAIL CARRIER 11 - FLAT BED 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/ REFUSE 15 - SAFETY SERVICE PATROL 16 - DUMP 17 - PEDESTRIAN/ SKATER 18 - WHEELCHAIR (ANY TYPE) 19 - OTHER NON-MOTORIST 20 - TRAIN 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 23 - UNKNOWN OR HIT/ SKIP	
VEHICLE DEFECTS 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS 4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 99 - OTHER/ UNKNOWN	
NON-MOTORIST LOCATION AT IMPACT 1 - 1 - INTERSECTION - MARKED CROSSWALK 2 - 2 - INTERSECTION - UNMARKED CROSSWALK		1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - OTHER 3 - MIDBLOCK - MARKED CROSSWALK 4 - MIDBLOCK - UNMARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION 6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK 9 - MEDIAN/ CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER AT INCIDENT SCENE 13 - STANDING 14 - WALKING, RUNNING, JOGGING, PLAYING 15 - WORKING 16 - PUSHING VEHICLE 17 - APPROACHING OR LEAVING VEHICLE 18 - OPERATING DEFECTIVE EQUIPMENT 19 - OPENING DOOR INTO ROADWAY 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - NOT DISCERNIBLE 23 - SWERVING TO AVOID IN TRAFFIC 24 - OTHER MOVABLE OBJECT 25 - IMPROPER START FROM A PARKED POSITION 26 - SWERVING TO AVOID IN TRAFFIC 27 - SWERVING TO AVOID IN TRAFFIC 28 - SWERVING TO AVOID IN TRAFFIC 29 - SWERVING TO AVOID IN TRAFFIC 30 - SWERVING TO AVOID IN TRAFFIC 31 - SWERVING TO AVOID IN TRAFFIC 32 - SWERVING TO AVOID IN TRAFFIC 33 - SWERVING TO AVOID IN TRAFFIC 34 - SWERVING TO AVOID IN TRAFFIC 35 - SWERVING TO AVOID IN TRAFFIC 36 - SWERVING TO AVOID IN TRAFFIC 37 - SWERVING TO AVOID IN TRAFFIC 38 - SWERVING TO AVOID IN TRAFFIC 39 - SWERVING TO AVOID IN TRAFFIC 40 - SWERVING TO AVOID IN TRAFFIC 41 - SWERVING TO AVOID IN TRAFFIC 42 - SWERVING TO AVOID IN TRAFFIC 43 - SWERVING TO AVOID IN TRAFFIC 44 - SWERVING TO AVOID IN TRAFFIC 45 - SWERVING TO AVOID IN TRAFFIC 46 - SWERVING TO AVOID IN TRAFFIC 47 - SWERVING TO AVOID IN TRAFFIC 48 - SWERVING TO AVOID IN TRAFFIC 49 - SWERVING TO AVOID IN TRAFFIC 50 - SWERVING TO AVOID IN TRAFFIC 51 - SWERVING TO AVOID IN TRAFFIC 52 - SWERVING TO AVOID IN TRAFFIC 53 - SWERVING TO AVOID IN TRAFFIC 54 - SWERVING TO AVOID IN TRAFFIC 55 - SWERVING TO AVOID IN TRAFFIC 56 - SWERVING TO AVOID IN TRAFFIC 57 - SWERVING TO AVOID IN TRAFFIC 58 - SWERVING TO AVOID IN TRAFFIC 59 - SWERVING TO AVOID IN TRAFFIC 60 - SWERVING TO AVOID IN TRAFFIC 61 - SWERVING TO AVOID IN TRAFFIC 62 - SWERVING TO AVOID IN TRAFFIC 63 - SWERVING TO AVOID IN TRAFFIC 64 - SWERVING TO AVOID IN TRAFFIC 65 - SWERVING TO AVOID IN TRAFFIC 66 - SWERVING TO AVOID IN TRAFFIC 67 - SWERVING TO AVOID IN TRAFFIC 68 - SWERVING TO AVOID IN TRAFFIC 69 - SWERVING TO AVOID IN TRAFFIC 70 - SWERVING TO AVOID IN TRAFFIC 71 - SWERVING TO AVOID IN TRAFFIC 72 - SWERVING TO AVOID IN TRAFFIC 73 - SWERVING TO AVOID IN TRAFFIC 74 - SWERVING TO AVOID IN TRAFFIC 75 - SWERVING TO AVOID IN TRAFFIC 76 - SWERVING TO AVOID IN TRAFFIC 77 - SWERVING TO AVOID IN TRAFFIC 78 - SWERVING TO AVOID IN TRAFFIC 79 - SWERVING TO AVOID IN TRAFFIC 80 - SWERVING TO AVOID IN TRAFFIC 81 - SWERVING TO AVOID IN TRAFFIC 82 - SWERVING TO AVOID IN TRAFFIC 83 - SWERVING TO AVOID IN TRAFFIC 84 - SWERVING TO AVOID IN TRAFFIC 85 - SWERVING TO AVOID IN TRAFFIC 86 - SWERVING TO AVOID IN TRAFFIC 87 - SWERVING TO AVOID IN TRAFFIC 88 - SWERVING TO AVOID IN TRAFFIC 89 - SWERVING TO AVOID IN TRAFFIC 90 - SWERVING TO AVOID IN TRAFFIC 91 - SWERVING TO AVOID IN TRAFFIC 92 - SWERVING TO AVOID IN TRAFFIC 93 - SWERVING TO AVOID IN TRAFFIC 94 - SWERVING TO AVOID IN TRAFFIC 95 - SWERVING TO AVOID IN TRAFFIC 96 - SWERVING TO AVOID IN TRAFFIC 97 - SWERVING TO AVOID IN TRAFFIC 98 - SWERVING TO AVOID IN TRAFFIC 99 - SWERVING TO AVOID IN TRAFFIC	
CONTRIBUTING CIRCUMSTANCES 1 - 1 - FAILURE TO YIELD 2 - 2 - RAN RED LIGHT 3 - 3 - RAN STOP SIGN 4 - 4 - UNSAFE SPEED 5 - 5 - IMPROPER TURN		1 - 1 - OVERTURN/ ROLLOVER 2 - 2 - FIRE/ EXPLOSION 3 - 3 - IMMERSION 4 - 4 - JACKKNIFE 5 - 5 - CARGO/ EQUIPMENT LOSS OR SHIFT 6 - 6 - IMPROPER BACKING 7 - 7 - LEFT OF CENTER 8 - 8 - FOLLOWING TOO CLOSE/ ACDA 9 - 9 - IMPROPER LANE CHANGE 10 - 10 - IMPROPER PASSING 11 - 11 - DROVE OFF ROAD 12 - 12 - IMPROPER BACKING 13 - 13 - SWERVING TO AVOID IN TRAFFIC 14 - 14 - SWERVING TO AVOID IN TRAFFIC 15 - 15 - SWERVING TO AVOID IN TRAFFIC 16 - 16 - SWERVING TO AVOID IN TRAFFIC 17 - 17 - SWERVING TO AVOID IN TRAFFIC 18 - 18 - SWERVING TO AVOID IN TRAFFIC 19 - 19 - SWERVING TO AVOID IN TRAFFIC 20 - 20 - SWERVING TO AVOID IN TRAFFIC 21 - 21 - SWERVING TO AVOID IN TRAFFIC 22 - 22 - SWERVING TO AVOID IN TRAFFIC 23 - 23 - SWERVING TO AVOID IN TRAFFIC 24 - 24 - SWERVING TO AVOID IN TRAFFIC 25 - 25 - SWERVING TO AVOID IN TRAFFIC 26 - 26 - SWERVING TO AVOID IN TRAFFIC 27 - 27 - SWERVING TO AVOID IN TRAFFIC 28 - 28 - SWERVING TO AVOID IN TRAFFIC 29 - 29 - SWERVING TO AVOID IN TRAFFIC 30 - 30 - SWERVING TO AVOID IN TRAFFIC 31 - 31 - SWERVING TO AVOID IN TRAFFIC 32 - 32 - SWERVING TO AVOID IN TRAFFIC 33 - 33 - SWERVING TO AVOID IN TRAFFIC 34 - 34 - SWERVING TO AVOID IN TRAFFIC 35 - 35 - SWERVING TO AVOID IN TRAFFIC 36 - 36 - SWERVING TO AVOID IN TRAFFIC 37 - 37 - SWERVING TO AVOID IN TRAFFIC 38 - 38 - SWERVING TO AVOID IN TRAFFIC 39 - 39 - SWERVING TO AVOID IN TRAFFIC 40 - 40 - SWERVING TO AVOID IN TRAFFIC 41 - 41 - SWERVING TO AVOID IN TRAFFIC 42 - 42 - SWERVING TO AVOID IN TRAFFIC 43 - 43 - SWERVING TO AVOID IN TRAFFIC 44 - 44 - SWERVING TO AVOID IN TRAFFIC 45 - 45 - SWERVING TO AVOID IN TRAFFIC 46 - 46 - SWERVING TO AVOID IN TRAFFIC 47 - 47 - SWERVING TO AVOID IN TRAFFIC 48 - 48 - SWERVING TO AVOID IN TRAFFIC 49 - 49 - SWERVING TO AVOID IN TRAFFIC 50 - 50 - SWERVING TO AVOID IN TRAFFIC 51 - 51 - SWERVING TO AVOID IN TRAFFIC 52 - 52 - SWERVING TO AVOID IN TRAFFIC 53 - 53 - SWERVING TO AVOID IN TRAFFIC 54 - 54 - SWERVING TO AVOID IN TRAFFIC 55 - 55 - SWERVING TO AVOID IN TRAFFIC 56 - 56 - SWERVING TO AVOID IN TRAFFIC 57 - 57 - SWERVING TO AVOID IN TRAFFIC 58 - 58 - SWERVING TO AVOID IN TRAFFIC 59 - 59 - SWERVING TO AVOID IN TRAFFIC 60 - 60 - SWERVING TO AVOID IN TRAFFIC 61 - 61 - SWERVING TO AVOID IN TRAFFIC 62 - 62 - SWERVING TO AVOID IN TRAFFIC 63 - 63 - SWERVING TO AVOID IN TRAFFIC 64 - 64 - SWERVING TO AVOID IN TRAFFIC 65 - 65 - SWERVING TO AVOID IN TRAFFIC 66 - 66 - SWERVING TO AVOID IN TRAFFIC 67 - 67 - SWERVING TO AVOID IN TRAFFIC 68 - 68 - SWERVING TO AVOID IN TRAFFIC 69 - 69 - SWERVING TO AVOID IN TRAFFIC 70 - 70 - SWERVING TO AVOID IN TRAFFIC 71 - 71 - SWERVING TO AVOID IN TRAFFIC 72 - 72 - SWERVING TO AVOID IN TRAFFIC 73 - 73 - SWERVING TO AVOID IN TRAFFIC 74 - 74 - SWERVING TO AVOID IN TRAFFIC 75 - 75 - SWERVING TO AVOID IN TRAFFIC 76 - 76 - SWERVING TO AVOID IN TRAFFIC 77 - 77 - SWERVING TO AVOID IN TRAFFIC 78 - 78 - SWERVING TO AVOID IN TRAFFIC 79 - 79 - SWERVING TO AVOID IN TRAFFIC 80 - 80 - SWERVING TO AVOID IN TRAFFIC 81 - 81 - SWERVING TO AVOID IN TRAFFIC 82 - 82 - SWERVING TO AVOID IN TRAFFIC 83 - 83 - SWERVING TO AVOID IN TRAFFIC 84 - 84 - SWERVING TO AVOID IN TRAFFIC 85 - 85 - SWERVING TO AVOID IN TRAFFIC 86 - 86 - SWERVING TO AVOID IN TRAFFIC 87 - 87 - SWERVING TO AVOID IN TRAFFIC 88 - 88 - SWERVING TO AVOID IN TRAFFIC 89 - 89 - SWERVING TO AVOID IN TRAFFIC 90 - 90 - SWERVING TO AVOID IN TRAFFIC 91 - 91 - SWERVING TO AVOID IN TRAFFIC 92 - 92 - SWERVING TO AVOID IN TRAFFIC 93 - 93 - SWERVING TO AVOID IN TRAFFIC 94 - 94 - SWERVING TO AVOID IN TRAFFIC 95 - 95 - SWERVING TO AVOID IN TRAFFIC 96 - 96 - SWERVING TO AVOID IN TRAFFIC 97 - 97 - SWERVING TO AVOID IN TRAFFIC 98 - 98 - SWERVING TO AVOID IN TRAFFIC 99 - 99 - SWERVING TO AVOID IN TRAFFIC	
SEQUENCE OF EVENTS		NON-COLLISION 1 - 1 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 2 - 2 - DOWNHILL RUNAWAY 3 - 3 - OTHER NON-COLLISION 4 - 4 - PEDESTRIAN 5 - 5 - PEDALCYCLE 6 - 6 - RAILWAY VEHICLE 7 - 7 - ANIMAL - FARM 8 - 8 - ANIMAL - DEER 9 - 9 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 10 - 10 - MOTOR VEHICLE IN TRANSPORT 11 - 11 - PARKED MOTOR VEHICLE 12 - 12 - WORK ZONE MAINTENANCE EQUIPMENT 13 - 13 - WORK ZONE MAINTENANCE EQUIPMENT 14 - 14 - WORK ZONE MAINTENANCE EQUIPMENT 15 - 15 - WORK ZONE MAINTENANCE EQUIPMENT 16 - 16 - WORK ZONE MAINTENANCE EQUIPMENT 17 - 17 - WORK ZONE MAINTENANCE EQUIPMENT 18 - 18 - WORK ZONE MAINTENANCE EQUIPMENT 19 - 19 - WORK ZONE MAINTENANCE EQUIPMENT 20 - 20 - WORK ZONE MAINTENANCE EQUIPMENT 21 - 21 - WORK ZONE MAINTENANCE EQUIPMENT 22 - 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - 23 - WORK ZONE MAINTENANCE EQUIPMENT 24 - 24 - WORK ZONE MAINTENANCE EQUIPMENT 25 - 25 - WORK ZONE MAINTENANCE EQUIPMENT 26 - 26 - WORK ZONE MAINTENANCE EQUIPMENT 27 - 27 - WORK ZONE MAINTENANCE EQUIPMENT 28 - 28 - WORK ZONE MAINTENANCE EQUIPMENT 29 - 29 - WORK ZONE MAINTENANCE EQUIPMENT 30 - 30 - WORK ZONE MAINTENANCE EQUIPMENT 31 - 31 - WORK ZONE MAINTENANCE EQUIPMENT 32 - 32 - WORK ZONE MAINTENANCE EQUIPMENT 33 - 33 - WORK ZONE MAINTENANCE EQUIPMENT 34 - 34 - WORK ZONE MAINTENANCE EQUIPMENT 35 - 35 - WORK ZONE MAINTENANCE EQUIPMENT 36 - 36 - WORK ZONE MAINTENANCE EQUIPMENT 37 - 37 - WORK ZONE MAINTENANCE EQUIPMENT 38 - 38 - WORK ZONE MAINTENANCE EQUIPMENT 39 - 39 - WORK ZONE MAINTENANCE EQUIPMENT 40 - 40 - WORK ZONE MAINTENANCE EQUIPMENT 41 - 41 - WORK ZONE MAINTENANCE EQUIPMENT 42 - 42 - WORK ZONE MAINTENANCE EQUIPMENT 43 - 43 - WORK ZONE MAINTENANCE EQUIPMENT 44 - 44 - WORK ZONE MAINTENANCE EQUIPMENT 45 - 45 - WORK ZONE MAINTENANCE EQUIPMENT 46 - 46 - WORK ZONE MAINTENANCE EQUIPMENT 47 - 47 - WORK ZONE MAINTENANCE EQUIPMENT 48 - 48 - WORK ZONE MAINTENANCE EQUIPMENT 49 - 49 - WORK ZONE MAINTENANCE EQUIPMENT 50 - 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - 51 - WORK ZONE MAINTENANCE EQUIPMENT 52 - 52 - WORK ZONE MAINTENANCE EQUIPMENT 53 - 53 - WORK ZONE MAINTENANCE EQUIPMENT 54 - 54 - WORK ZONE MAINTENANCE EQUIPMENT 55 - 55 - WORK ZONE MAINTENANCE EQUIPMENT 56 - 56 - WORK ZONE MAINTENANCE EQUIPMENT 57 - 57 - WORK ZONE MAINTENANCE EQUIPMENT 58 - 58 - WORK ZONE MAINTENANCE EQUIPMENT 59 - 59 - WORK ZONE MAINTENANCE EQUIPMENT 60 - 60 - WORK ZONE MAINTENANCE EQUIPMENT 61 - 61 - WORK ZONE MAINTENANCE EQUIPMENT 62 - 62 - WORK ZONE MAINTENANCE EQUIPMENT 63 - 63 - WORK ZONE MAINTENANCE EQUIPMENT 64 - 64 - WORK ZONE MAINTENANCE EQUIPMENT 65 - 65 - WORK ZONE MAINTENANCE EQUIPMENT 66 - 66 - WORK ZONE MAINTENANCE EQUIPMENT 67 - 67 - WORK ZONE MAINTENANCE EQUIPMENT 68 - 68 - WORK ZONE MAINTENANCE EQUIPMENT 69 - 69 - WORK ZONE MAINTENANCE EQUIPMENT 70 - 70 - WORK ZONE MAINTENANCE EQUIPMENT 71 - 71 - WORK ZONE MAINTENANCE EQUIPMENT 72 - 72 - WORK ZONE MAINTENANCE EQUIPMENT 73 - 73 - WORK ZONE MAINTENANCE EQUIPMENT 74 - 74 - WORK ZONE MAINTENANCE EQUIPMENT 75 - 75 - WORK ZONE MAINTENANCE EQUIPMENT 76 - 76 - WORK ZONE MAINTENANCE EQUIPMENT 77 - 77 - WORK ZONE MAINTENANCE EQUIPMENT 78 - 78 - WORK ZONE MAINTENANCE EQUIPMENT 79 - 79 - WORK ZONE MAINTENANCE EQUIPMENT 80 - 80 - WORK ZONE MAINTENANCE EQUIPMENT 81 - 81 - WORK ZONE MAINTENANCE EQUIPMENT 82 - 82 - WORK ZONE MAINTENANCE EQUIPMENT 83 - 83 - WORK ZONE MAINTENANCE EQUIPMENT 84 - 84 - WORK ZONE MAINTENANCE EQUIPMENT 85 - 85 - WORK ZONE MAINTENANCE EQUIPMENT 86 - 86 - WORK ZONE MAINTENANCE EQUIPMENT 87 - 87 - WORK ZONE MAINTENANCE EQUIPMENT 88 - 88 - WORK ZONE MAINTENANCE EQUIPMENT 89 - 89 - WORK ZONE MAINTENANCE EQUIPMENT 90 - 90 - WORK ZONE MAINTENANCE EQUIPMENT 91 - 91 - WORK ZONE MAINTENANCE EQUIPMENT 92 - 92 - WORK ZONE MAINTENANCE EQUIPMENT 93 - 93 - WORK ZONE MAINTENANCE EQUIPMENT 94 - 94 - WORK ZONE MAINTENANCE EQUIPMENT 95 - 95 - WORK ZONE MAINTENANCE EQUIPMENT 96 - 96 - WORK ZONE MAINTENANCE EQUIPMENT 97 - 97 - WORK ZONE MAINTENANCE EQUIPMENT 98 - 98 - WORK ZONE MAINTENANCE EQUIPMENT 99 - 99 - WORK ZONE MAINTENANCE EQUIPMENT	
COLLISION WITH FIXED OBJECT - STRUCK		NON-COLLISION 1 - 1 - CURB 2 - 2 - DITCH 3 - 3 - WALL 4 - 4 - BUILDING 5 - 5 - FENCE 6 - 6 - MAILBOX 7 - 7 - TREE 8 - 8 - HYDRANT 9 - 9 - OTHER FIXED OBJECT 10 - 10 - UNKNOWN OR HIT/ SKIP	
FIRST HARMFUL EVENT		MOST HARMFUL EVENT	

DAMAGE	
DAMAGE SCALE	
4	1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN
DAMAGED AREA(S) INDICATE ALL THAT APPLY 12	
         	
<input type="checkbox"/> - NO DAMAGE <input type="checkbox"/> - UNDERCARRIAGE [ 14 ]	
<input type="checkbox"/> - TOP [ 13 ] <input type="checkbox"/> - ALL AREAS [ 15 ]	
<input type="checkbox"/> - UNIT NOT AT SCENE [ 16 ]	
INITIAL POINT OF CONTACT	
0 - NO DAMAGE <input type="checkbox"/> - UNDERCARRIAGE [ 14 ] 1-12 - REFER TO UNIT DIAGRAM <input type="checkbox"/> - VEHICLE NOT AT SCENE [ 15 ] 13 - TOP <input type="checkbox"/> - UNKNOWN	
TRAFFIC	
TRAFFICWAY FLOW 2	TRAFFIC CONTROL 6
# OF THROUGH LANES ON ROAD 02	RAIL GRADE CROSSING 1
UNIT / NON-MOTORIST DIRECTION	
1 - NORTH <input type="checkbox"/> - NORTHEAST 2 - SOUTH <input type="checkbox"/> - NORTHWEST 3 - EAST <input type="checkbox"/> - SOUTHEAST 4 - WEST <input type="checkbox"/> - SOUTHWEST 9 - OTHER/ UNKNOWN	
UNIT SPEED 0	DETECTED SPEED 1
POSTED SPEED 25	

**MOTORIST / Non-MOTORIST**

LOCAL REPORT NUMBER

20210659

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH				AGE	GENDER
	01	HAYES JAYMARLON ROMEL					09/26/2002				19	M
ADDRESS: STREET, CITY, STATE, ZIP 879 ARDEN AVE 307 BEREA OH 44017						CONTACT PHONE - INCLUDE AREA CODE						
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
2	2	SOLON FD	HILLCREST HOSPITAL			3		1	4	1	2	
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER		
OH	VF912075			2903.04A			INVOLUNTARY MANSLAUGHTER			WARRANT		
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST		DRUG TEST(S)			
4				9	<input type="checkbox"/> ALCOHOL <input checked="" type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	6	1   1	STATUS TYPE VALUE	1   1	RESULT SELECT UP TO 4		
UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH				AGE	GENDER
02	SCHULTZ NORMAN JAMES						01/19/1932				89	M
ADDRESS: STREET, CITY, STATE, ZIP 7444 CHAGRIN RD CHAGRIN FALLS OH 44023						CONTACT PHONE - INCLUDE AREA CODE						
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
2	2	SOLON FD	HILLCREST HOSPITAL			2		1	4	1	1	
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER		
OH	RL172384											
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST		DRUG TEST(S)			
4				1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	1	1   1	STATUS TYPE VALUE	1   1	RESULT SELECT UP TO 4		
UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH				AGE	GENDER
03	LILLEY PAUL JAMES						10/19/1984				37	M
ADDRESS: STREET, CITY, STATE, ZIP 2277 NORTON LN N BLOOMFIELD OH 44450						CONTACT PHONE - INCLUDE AREA CODE						
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
4	2	SOLON FD	HILLCREST HOSPITAL			4		1	1	1	1	
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER		
OH	SJ901222											
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST		DRUG TEST(S)			
4	M			1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	1	1   1	STATUS TYPE VALUE	1   1	RESULT SELECT UP TO 4		
INJURIES		SEATING POSITION	AIR BAG		OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION		TEST STATUS			
1-FATAL	1-FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1-NOT DEPLOYED	1-CLASS A		1-ALCOHOL INTERLOCK DEVICE	1-NOT DISTRACTED		1-NONE GIVEN				
2-SUSPECTED SERIOUS INJURY	2-DEPLOYED FRONT	2-CLASS B	2-CDL INTRASTATE ONLY		2-MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2-TEST REFUSED		2-TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE				
3-SUSPECTED MINOR INJURY	3-DEPLOYED SIDE	3-CLASS C	3-CORRECTIVE LENSES		3-EXCEPT CLASS A BUS	3-TALKING ON HANDS-FREE COMMUNICATION DEVICE		3-TEST GIVEN, RESULTS KNOWN				
4-Possible INJURY	4-DEPLOYED BOTH FRONT / SIDE	4-REGULAR CLASS (OHIO = D)	4-FARM WAIVER		4-EXCEPT CLASS A & CLASS B BUS	4-TALKING ON HAND-HELD COMMUNICATION DEVICE		4-TEST GIVEN, RESULTS UNKNOWN				
5-NO APPARENT INJURY	5-NOT APPLICABLE	5-M/C MOVED ONLY	5-EXCEPT TRACTOR-TRAILER		5-OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5-OTHER / UNKNOWN		5-TEST GIVEN, RESULTS UNKNOWN				
INJURED TAKEN BY	5-SECOND - MIDDLE	6-NO VALID OL	6-INTERMEDIATE LICENSE RESTRICTIONS		6-PASSINGER	6-BLOOD		ALCOHOL TEST TYPE				
1-NOT TRANSPORTED /TREATED AT SCENE	6-SECOND - RIGHT SIDE	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	7-LEARNER'S PERMIT RESTRICTIONS		7-OTHER DISTRACTION INSIDE THE VEHICLE	7-URINE		1-NONE				
2-EMS	7-THIRD - MIDDLE	8-THIRD - RIGHT SIDE	8-OTHER DISTRACTION OUTSIDE THE VEHICLE		8-OTHER DISTRACTION OUTSIDE THE VEHICLE	8-BREATH		2-BLOOD				
3-POLICE	9-THIRD - RIGHT SIDE	10-SLEEPER SECTION OF TRUCK CAB	9-OTHER / UNKNOWN		9-OTHER / UNKNOWN	9-OTHER / UNKNOWN		3-URINE				
9-OTHER / UNKNOWN	11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	12-PASSENGER IN UNENCLOSED CARGO AREA	10-LIMITED TO DAYLIGHT ONLY		10-LIMITED TO DAYLIGHT ONLY	10-OTHER		4-OTHER				
SAFETY EQUIPMENT		13-TRAILING UNIT	11-LIMITED TO EMPLOYMENT		11-LIMITED - OTHER	11-LIMITED - OTHER		4-TEST				
1-NONE USED	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	15-NON-MOTORIST	12-LIMITED - OTHER		12-LIMITED - OTHER	12-LIMITED - OTHER		5-DRUG TEST				
2-SHOULDER BELT ONLY USED	15-NON-MOTORIST	99-OTHER / UNKNOWN	13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		1-NONE				
3-LAP BELT ONLY USED	99-OTHER / UNKNOWN		14-MILITARY VEHICLES ONLY		14-MILITARY VEHICLES ONLY	14-MILITARY VEHICLES ONLY		2-BLOOD				
4-SHOULDER & LAP BELT USED			15-MOTOR VEHICLES WITHOUT AIR BRAKES		15-MOTOR VEHICLES WITHOUT AIR BRAKES	15-MOTOR VEHICLES WITHOUT AIR BRAKES		3-URINE				
5-CHILD RESTRAINT SYSTEM - FORWARD FACING			16-OUTSIDE MIRROR		16-OUTSIDE MIRROR	16-OUTSIDE MIRROR		4-OTHER				
6-CHILD RESTRAINT SYSTEM - REAR FACING			17-PROSTHETIC AID		17-PROSTHETIC AID	17-PROSTHETIC AID		4-TEST				
7-BOOSTER SEAT			18-OTHER		18-OTHER	18-OTHER		5-DRUG TEST				
8-HELMET USED								1-AMPHETAMINES				
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)								2-BARBITURATES				
10-REFLECTIVE CLOTHING								3-BENZODIAZEPINES				
11-LIGHTING - PEDESTRIAN / BICYCLE ONLY								4-CANNABINOID				
99-OTHER / UNKNOWN								5-COCAIN				
								6-OPIATES / OPIOIDS				
								7-OTHER				
								8-Negative results				

**OCCUPANT / WITNESS ADDENDUM**

LOCAL REPORT NUMBER

20210659

OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE 01 PARKS RONTELL DUNTEZ				DATE OF BIRTH 10/21/2001	AGE 20	GENDER M		
	ADDRESS: STREET, CITY, STATE, ZIP 6156 SCOVILL AVE APT 3 CLEVELAND OH 44104				CONTACT PHONE - INCLUDE AREA CODE [REDACTED]					
OCCUPANT	INJURIES	INJURED TAKEN BY 2	EMS AGENCY (NAME) ORANGE VILL. FD	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) UH MAIN CAMPUS	SAFETY EQUIPMENT USED 1	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 3	AIR BAG USAGE 4	EJECTION 1	TRAPPED 2
	UNIT #	NAME: LAST, FIRST, MIDDLE 02 SCHULTZ SALLY B				DATE OF BIRTH 05/24/1936	AGE 85	GENDER F		
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP 7444 CHAGRIN RD CHAGRIN FALLS OH 44023				CONTACT PHONE - INCLUDE AREA CODE [REDACTED]					
	INJURIES	INJURED TAKEN BY 2	EMS AGENCY (NAME) SOLON FD	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) HILLCREST	SAFETY EQUIPMENT USED 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 3	AIR BAG USAGE 4	EJECTION 1	TRAPPED 1
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER		
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE [REDACTED]					
OCCUPANT	INJURIES	INJURED TAKEN BY [REDACTED]	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER		
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE [REDACTED]					
	INJURIES	INJURED TAKEN BY [REDACTED]	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
INJURIES			SAFETY EQUIPMENT USED		SEATING POSITION			AIR BAG USAGE		
1 - FATAL			1 - NONE USED - VEHICLE OCCUPANT		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)			1 - NOT DEPLOYED		
2 - SUSPECTED SERIOUS INJURY			2 - SHOULDER BELT ONLY USED		2 - FRONT - MIDDLE			2 - DEPLOYED FRONT		
3 - SUSPECTED MINOR INJURY			3 - LAP BELT ONLY USED		3 - FRONT - RIGHT SIDE			3 - DEPLOYED SIDE		
4 - POSSIBLE INJURY			4 - SHOULDER & LAP BELT USED		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)			4 - DEPLOYED BOTH FRONT/SIDE		
5 - NO APPARENT INJURY			5 - CHILD RESTRAINT SYSTEM - FORWARD FACING		5 - SECOND - MIDDLE			5 - NOT APPLICABLE		
INJURED TAKEN BY			6 - CHILD RESTRAINT SYSTEM - REAR FACING		6 - SECOND - RIGHT SIDE			9 - DEPLOYMENT UNKNOWN		
1 - NOT TRANSPORTED /TREATED AT SCENE			7 - BOOSTER SEAT		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			EJECTION		
2 - EMS			8 - HELMET USED		8 - THIRD - MIDDLE			1 - NOT EJECTED		
3 - POLICE			9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)		9 - THIRD - RIGHT SIDE			2 - PARTIALLY EJECTED		
9 - OTHER / UNKNOWN			10 - REFLECTIVE CLOTHING		10 - SLEEPER SECTION OF TRUCK CAB			3 - TOTALLY EJECTED		
			11 - LIGHTING - PEDESTRIAN /BICYCLE ONLY		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)			4 - NOT APPLICABLE		
			99 - OTHER / UNKNOWN		12 - PASSENGER IN UNENCLOSED CARGO AREA			TRAPPED		
					13 - TRAILING UNIT			1 - NOT TRAPPED		
					14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			2 - EXTRICATED BY MECHANICAL MEANS		
					15 - NON-MOTORIST			3 - FREED BY NON-MECHANICAL MEANS		
					99 - OTHER / UNKNOWN					
WITNESS	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH	AGE	GENDER		
	ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE [REDACTED]				
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