WRM 2-12-24

OF PUBLIC SA	IC CRAS	LOCAL REPORT NUMBER *												
X PHOTOS TAKE			24MPD0202											
	Пон-	=	REPORTING	3 AGENCY NAME *	70202		NCIC *	HIT/SKIP	UNIT IN ERROR					
SECONDARY		ATE PROPERTY	Millersbur	g		1	03801	1 - SOLVED	2	1 1	1 98 - ANIMAL 99 - UNKNOWN			
COUNTY* LOCA	LITY* 1 - CITY	LOCATION:	CITY. VILLAGE. TO	OWNSHIP*				CRASH DATE / TIME* CRASH SEVERITY						
38 2	2 - VILLAGE 3 - TOWNSHIP	Millersbur	g				02/09/2024 14:45 5 1 - FATAL							
ROUTE TYPE RO	OUTE NUMBER P	REFIX 1 - NORTH		ROAD NAME			ROAD TYPE		ECIMAL DEGREES		2 - SERIOUS INJURY SUSPECTED			
LOCAT	h	2 - SOUTH 4 3 - EAST	Jackson				ST	40.554	350		3 - MINOR INJURY SUSPECTED			
ROUTE TYPE RO	OUTE NUMBER P	A - WEST REFIX 1 - NORTH	REFERENC	E ROAD NAME (ROAD.	MILEPOST, HO	OUSE #)	ROAD TYPE	LONGITUDE D	4 - INJURY POSSIBLE					
FERE		2 - SOUTH 1 3 - EAST	Grant				-81.920			5 - PROPERTY DAMAGE				
REFERENCE PO	INT DIR	4 - WEST			WELLS TO THE PARTY OF		-81.920840 ONLY							
1 - INTERSEC	FROM F	REFERENCE	- INTERSTATE	ROUTE (TP) AI	L - ALLEY	ROAD TYP		WITHIN INTE	RSECTION OR C					
1 2 - MILE POS 3 - HOUSE #		2 - SOUTH	S - FEDERAL U	S ROUTE A	V - AVENUE	LA - LANE	SQ - SQUARE	1=			4			
DISTANCE		4 - WEST	R - STATE ROU		R - CIRCLE	MP - MILEPO	ST - STREET TE - TERRACE	WITHIN INTE	RCHANGE AREA	N	UMBER OF APPROACHES			
FROM REFERENC	E UNIT O	TANCE F MEASURE 1 - MILES	R - NUMBERED	COUNTY KOUTE	r - COURT	PK - PARKW	AY TL - TRAIL		ROAL	WAY				
		2 - FEET TI	R - NUMBERED	TOWNICHID	R - DRIVE E - HEIGHTS	PI - PIKE PL - PLACE	WA - WAY	ROADWAY	DIVIDED					
LC	CATION OF FIRS	3 - YARDS			NNED of CDA	III COLLICION		DIRECTION of TRAI						
	OADWAY	9 - CROSSOVE	R	6 1-NO	T COLLISION 4			DIRECTION OF TRAN	- 10		FLUSH MEDIAN			
3 - IN M		10 - DRIVEWA 11 - RAILWAY			O MOTOR	- BACKING		2 - SOUTH	1, ,	<4 FEET	1)			
4 - ON R 5 - ON G	OADSIDE	12 - SHARED I	JSE PATHS OR		HICLES IN	- ANGLE - SIDESWIPE,	SAME DIRECTION	3 - EAST 4 - WEST	Contract to the contract of	DIVIDED ≥4 FEET	FLUSH MEDIAN			
	IDE TRAFFIC WAY	TRAILS 13 - BIKE LANI			NASI OKI		OPPOSITE DIRECTION				DEPRESSED MEDIAN			
7 - ON R 8 - OFF F		14 - TOLL BOO 99 - OTHER / I		3 - HE	AD-ON 9	- OTHER / UN	IKNOWN			DIVIDED, RAISED MEDIAN (ANY TYPE)				
_		39 - OTHER/									UNKNOWN			
WORK ZONE R	ELATED		WORK Z 1 - LANE CLOS	ONE TYPE			IN WORK ZONE	CONTOUR	CONDIT	ONS	SURFACE			
WORKERS PRE	SENT	1		T/ CROSSOVER		- BEFORE THE WARNING SI		ST WORK ZONE 2 1 2						
LAW ENFORCE	MENT PRESENT	1, ,	3 - WORK ON			 ADVANCE W TRANSITION 	ARNING AREA	1 - STRAIGHT						
		-	OR MEDIAI 4 - INTERMITT	N ENT OR MOVING WORK		- ACTIVITY AR		2 - STRAIGHT	2 - STRAIGHT 3 - SNOW BITU					
ACTIVE SCHOO	DL ZONE		5 - OTHER	ENT ON MOVING WOR		- TERMINATIO	N AREA	GRADE 3 - CURVE LEVEL	4 - ICE 5 - SAND, MU	DIDT.	ASPHALT 3 - BRICK/BLOCK			
	IGHT CONDITIO	N N	T		WEATHER 4 - CURVE GRADE OIL, GRAVEL						4 - SLAG , GRAVEL,			
1 - DAYL 1 2 - DAW				1 - CLEAR	6 - SNOW			9 - OTHER /UNKNOWN	6 - WATER (ST MOVING)	ANDING	, STONE 5 - DIRT			
	- LIGHTED ROAD	WAY		2 - CLOUDY 3 - FOG, SMOG, SMOK	7 - SEVERE C		, on and	7 - SLUSH		9 - OTHER				
	- ROADWAY NO			4 - RAIN		RAIN OR FRE		9 - OTHER / U	IKNOWI	N / UNKNOWN				
100 0000000	- UNKNOWN RC R / UNKNOWN	ADWAY LIGHTI	NG	5 - SLEET, HAIL	99 - OTHER	UNKNOWN								
NARRATIVE														
Unit 01 was tur	ning onto N G	rant St from \	N Jackson S	it. Unit 02 was west	bound on									
W Jackson St. l	Jnit 01 made t	he left turn ar	nd did not s	ee any vehicles con	nina. Unit			1			(N)			
o i almost mad	e the turn whe	n Unit 02 stru	ick Unit 01 i	in the rear bumper.			1	NG						
							1	N Grant St						
								Unit 1						
							9							
								5	W Jackson	St	_			
								N. S.						
								•						
											_			
									e Grant St					
			/ /	St										
								1						
	TED DATE / TIMI		DISPATCH	DATE / TIME	ARI	RIVAL DATE /	TIME	SCENE CLEARED I	DATE / TIME	_	REPORT TAKEN BY			
02/09/2	2024 14:46		02/09/20	024 14:49	02,	/09/2024 1	4:51	02/09/202	4 15:16		POLICE AGENCY			
TOTAL TIME	OTHER	тот		CER'S NAME*			CHECKED BY OFFIC	ER'S NAME		$-$ [\Box	MOTORIST			
ROADWAY CLOSED	INVESTIGATION	TIME MINU	Ger Ger	net, Stephanie			(hiet He	id Worth			SUPPLEMENT			
0	20	4	,		DGE NUMBER*		CHECKED	BY OFFICER'S BADGE N	NUMBER*	(i	CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO			
107							/60 ODPS)							

O PUB	Unit						ro	CAL REPORT				
						24MPD0202						
سا ما	WNER NAME: LAST, FIRST, I			OWNER		EA CODE (SAME AS ORIVER)	DAMAGE					
OWNER ADD	CHAFER, RICHARD, DRESS: STREET, CITY, STATE, 2				330-231	_7700	DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAM					
-	33, MILLERSBURG, O						2_ 2-MINOR D	AMAGE	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE			
<u> </u>	AL CARRIER: NAME ADDRES			Col	ANTERIA CARRES DATE	DNE: INCLUDE AREA CODE		9 - UNKNOV				
		-, -, -, -, -, -, -, -, -, -, -, -, -, -			MAIRCAL CARRIER PITT	DIVE: INCLUDE AREA CODE		DAMAGED A				
LP STATE L	ICENSE PLATE #	VEHICLE	IDENTIFICATION #		VEHICLE YEAR	4/5/1/5/17 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		DICATE ALL TH				
	(FK9745	l	01P8RZ250059		1994	VEHICLE MAKE TOYOTA						
INSURANG			ISURANCE POLICY #		COLOR	VEHICLE MODEL	" "		11 12			
VERIFIED	STATE FARM	404	44370-SFP-35		BLU	PICK-UP	10人	\2				
I	TYPE OF USE		US DOT#	TOW	ED BY: COMPANY N	AME	1 🚄 🖟	7				
COMMERC	TAL GOVERNMENT	IN EMERGENCY RESPONSE		<u> </u>			9 9 3	3	· 1			
DEVICE	HIT/SKIP UNIT	# OCCUPANTS VEHIC	LE WEIGHT GVWR/GCWR 1 - ≤10K LBS.	'I⊟∾	HAZARDOUS IATERIAL CLAS			7.	- F 1949 7			
EQUIPPED	HITASKIA ONII	1 1 1	2 - 10,001 - 26K LBS. 3 - > 26K LBS.		eleased Lacard i	1.1		•	· XHHY			
	1 - PASSENGER CAR 6 - VA	IN (9-15 SEATS)				DEDECEMBLE AND A STATE OF THE S		11	7 6 5			
	2 - PASSENGER VAN 7 - MO	OTORCYCLE 2-WHEELED	12 (2)		-	PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE)	·	(2	$\exists \lambda$.			
LINIT TYPE		DTORCYCLE 3-WHEELED 1 TOCYCLE	TRUCK	THER VEH		OTHER NON-MOTORIST	7		1 \ \(\(\sigma \)			
	VERTICLE 10 - N	MOPED OR MOTORIZED	15 - SEMI-TRACTOR	EAVY EQU		BICYCLE	9 [9	3 3			
			A A			Train Unknown or hit/skip		- 14	⊒ /			
	(ATV)		17 - MOTORHOME				8	<u> </u>	⁴\'∕'			
<u> </u>	# OF TRAILING UNITS					·	12		12 1 12 1			
	WAS VEHICLE OPERATING IN AL MODE WHEN CRASH OCCURRE		0 - NO AUTOMATION 3	- CONDITI	ONAL AUTOMATION	9 - UNKNOWN		•	7 2			
1. 2 .					TOMATION			\ ²	10/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
ا لـــــــــا ا	-YES 2-NO 9-OTHER/L	INKNOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION 5	- FULL AU	TOMATION		9 9 3					
	1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16 - FA		21 - MAIL CARRIER	<u> </u>	-/				
	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY		OWING	99 - OTHER / UNKNOWN		/4				
SPECIAL	3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE 9 - BUS - OTHER	13 - POLICE		LAVOMER WOL		, , ,		, , , ,			
FUNCTION 4	4 - SCHOOL TRANSPORT	10 - AMBULANCE	14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIP.	19 - TO			5		6			
	5 - BUS - TRANSIT/COMMUTER				TROL			12	12 12			
. 1 . 1	- NO CARGO BODY TYPE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - DI	 JMP	99 - OTHER / UNKNOWN	12	å	1			
CARGO 2	/ NOT APPLICABLE 2 - BUŞ	5 - INTERMODAL CONTAINER CHASSIS	B - POLE		ONCRETE MIXER		~ R.R ~					
BODY 3	- VEHICLE TOWING	6 - CARGOVAN	9 - CARGO TANK 10 - FLAT BED		JTO TRANSPORTER ARBAGE/REFUSE			و علام و	9 🔼 3 9 🎕 3			
TYPE	ANOTHER MOTOR VEHICLE	/ENCLOSED BOX		14 - 07				•	(⊕			
	1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES	7 - WORN OR SLICK TIRES		TOR TROUBLE	99 - OTHER / UNKNOWN	6	3				
VEHICLE ,	3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE		SABLED FROM PRIOR CIDENT		·	6	6 6			
DEFECTS		<u> </u>					☐- NO DAMA	GE [O]	UNDERCARRIAGE [14]			
. 1	1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK -	7 - SHOULDER/ROADSIDE	10 - DR	RIVEWAY ACCESS	99 - OTHER / UNKNOWN	1		_			
	2 - INTERSECTION -	MARKED CROSSWALK 5 - TRAVEL LANE -	8 - SIDEWALK		IARED USE PATHS TRAILS		□- 70P[13]		L-ALL AREAS (15)			
LOCATION 3	UNMARKED CROSSWALK 3 - INTERSECTION - OTHER	OTHER LOCATION 6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FJF	ST RESPONDER			- UNIT NOT /	AT SCENE [16]			
1	1 - NON-CONTACT	1 - STRAIGHT AHEAD	9 - LEAVING TRAFFIC		INCIDENT SCENE ALKING, RUNNING,	21 - STANDING OUTSIDE	-					
2	2 - NON-COLLISION	2 - BACKING	LANE	10	GGING, PLAYING	DISABLED VEHICLE		IAL POINT OF				
43	3 - STRIKING L 6	3 - CHANGING LANES 4 - OVERTAKING/PASSING	10 - PARKED 11 - SLOWING OR STOPPED		ORKING ISHING VEHICLE	99 - OTHER / UNKNOWN	0 - NO DA		14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE			
ACTION 4		5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	IN TRAFFIC	18 - AP	PROACHING OR			GRAM				
	5 - BOTH STRIKING	7 - MAXING U-TURN	12 - DRIVERLESS 13 - NEGOTIATING A CURVE		AVING VEHICLE ANDING		13 - TOP	,	99 - UNKNOWN			
	& STRUCK - OTHER / UNKNOWN	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING									
	1 - NONE		SPECIFIED LOCATION 13 - IMPROPER START FROM	10 - 00	ERATING DEFECTIVE	23 - ODENING BOOK !!		TRAFFI	С			
	2 - FAILURE TO YIELD	/ACDA	A PARKED POSITION	EQU	JIPMENT	23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW 1 - ONE-WAY		RAFFIC CONTROL			
	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY		AD SHIFTING LLING/SPILLING	99 - OTHER IMPROPER ACTION	2 - TWO-WAY		ROUNDABOUT 4 - STOP SIGN SIGNAL 5 - YIELD SIGN			
COMPRISERS	5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING	15 - SWERVING TO AVOID		PROPER CROSSING	ACHON		1 n 1	FLASHER 6 - NO CONTROL			
CIRCUMSTANCES	5 - IMPROPER TURN 7 - LEFT OF CENTER	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY 17 - VISION OBSTRUCTION		ng in Roadway T discernible	ı	# -					
				22 - 140	- DISCERGIBLE		# OF THROUGH LANES ON ROAD		IL GRADE CROSSING NOT INVLOVED			
SEQUENCE O	F EVENTS		-	* # 2			_		INVOLVED-ACTIVE CROSSING			
		7 - SEPARATION OF UNITS	EVENTS	 19 - AN	IMAL-OTHER 2	- STRUCK BY FALLING.		1 1	INVOLVED-PASSIVE CROSSING			
٠.		B - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	13 - OTHER NON-COLLISION	20 - MC	TOR VEHICLE IN	SHIFTING CARGO OR	LIMIT (A	ONLUCTOR	ST DIRECTION			
al I	4 - JACKKNIFE	10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE		INSPORT RKED MOTOR	ANYTHING SET IN MOTION BY A MOTOR	UNII / N					
٠ L	S - CARGO / EQUIPMENT LOSS OR SHIFT	11 - CROSS CENTERLINE - OPPOSITE DIRECTION	16 - RAILWAY VEHICLE	VEH	IICLE 3	VEHICLE 4 - OTHER MOVABLE		1 - N				
3	6 - EQUIPMENT FAILURE	OF TRAVEL	17 - ANIMAL - FARM 18 - ANIMAL - DEER	MA	INTENANCE	OBJECT	4	1 , 3-6	AST 7 - SOUTHEAST			
,			ON WITH FIXED OBJECT - S		JIPMENT _	e	яком <u>4</u> то <u></u>	4-W	EST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
4		31 - GUARDRAIL END	38 - OVERHEAD SIGN POST	45 - EM	BANKMENT 52	Z - BUILDING			3 - OIHEK / UNXNUWN			
I	26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER		46 - FEN 47 - MA		B - TUNNEL I - OTHER FIXED	UNIT SPEED		DETECTED SPEED			
5	STRUCTURE 27 - BRIDGE PIER OR	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE	48 - TRE	Ę	OBJECT OTHER / UNKNOWN	4.5		1 STATED I SERVICE			
	ABUTMENT	35 - MEDIAN CONCRETE	OR SUPPORT	50 - WO	RK ZONE	- SHIES/ ONKNOWN	15		1 - STATED / ESTIMATED SPEED			
6	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 36 - MEDIAN OTHER BARRIER	42 - CULVERT 43 - CURB		INTENANCE IPMENT		POSTED SPEED	 ₁ 1	2 - CALCULATED / EDR			
	30 - GUARDRAIL FACE	37 - TRAFFIC SIGN POST	44 - DITCH	51 - WA			LOSIED ZEED		_			

1 MOST HARMFUL EVENT

1 FIRST HARMFUL EVENT

3 - UNDETERMINED

25

0460 D	EPARTHONI I NIT						Loc	AL REPORT NUMBER					
A STATE	UNIT						24MPD0202						
UNIT# 0	WNER NAME: LAST, FIRST,	MIDDLE (SAME AS DRIVER)		OWNER	R PHONESNELISM AL	REA CODE (SAME AS DRIVER)	DAMAGE						
_	UPIEC, SIERRA, N				234-24		DAMAGE SCALE						
-	DRESS: STREET, CITY, STATE, Z					·	1 - NONE	3 - FUNCTIONAL DAMAGE					
•	D ROSE DR, WADSV						2 - MINOR DA						
COMMERCE	AL CARRIER: NAME, ADDRES	S, CITY, STATE, ZIP		Co	MMERCIAL CAURIER PH	ONE: INCLUDE AREA CODE		9 - UNKNOWN AMAGED AREA(S)					
LP SYATE I	ICENSE PLATE #	VEHICLE	IDENTIFICATION #		ME1415151515	1	1	CATE ALL THAT APPLY					
	HBP8527		7AJ1FM278654		VEHICLE YEAR 2015	VEHICLE MAKE VOLKSWAGEN							
INSURAN-			SURANCE POLICY #		COLOR	VEHICLE MODEL		" "					
LAIVERIFIED		Y INS CIC	015792417		SIL	JETTA	10 11 7 11	2 10 11 1 2					
COMMERC	TYPE OF USE	IN EMERGENCY	US DOT#	TOW	ED BY: COMPANY	NAME	<i> -</i> - -						
INTERLOC		RESPONSE VEHIC	LE WEIGHT GVWR/GCW		HAZARDOL	IS MATERIAL		/' 'L HOH J					
DEVICE EQUIPPED	HIT/\$KIP UNIT	CCCOPANIS	1 - ≤10K LBS. 2 - 10.001 - 26K LBS. 3 -> 26K LBS.	IJ 	MATERIAL CLA. ELEASED LACARD [SS# PLACARD ID#							
				IMO (LIVE	RY VEHICLE) 23 -	PEDESTRIAN/SKATER	1 6						
1 1	(MINIVAN) 8 - M		A . CINICE É LIBIET			WHEELCHAIR (ANY TYPE)	10/						
UNIT TYPE	A COLUMNIC CO.	JTOCYCLE	TRUCK	OTHER VEH JEAVY EQL		OTHER NON-MOTORIST BICYCLE	<u> </u>						
	1U - N		IS - FARM FOLHPMENT 22 - A		DALLAND ACCUSED C	- TRAIN	_						
	5 - CARGO VAN 11 - A (ATV)		17 - MOTORHOME	MMAL-DI	RAWN VEHICLE 99.	- UNKNOWN OR HIT/SKIP	8						
<u> </u>	# OF TRAILING UNITS						. 12	12					
	WAS VEHICLE OPERATING IN AI MODE WHEN CRASH OCCURRE		0 - NO AUTOMATION 3	- CONDITI	IONAL AUTOMATION	9 - UNKNOWN	1 2	1 1					
. 2 .					JTOMATION			10/ 11/2					
L	I-YES 2-NO 9-OTHER/U	INKNOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION 5	- FULL AU	TOMATION		9 3)3 8					
	1 - NONE	6 - BUS - CHARTER/TOUR	11 - F:RE	16 - FA	ARM	21 - MAIL CARRIER							
1 1 1	2 - TAXI 3 - ELECTRONIC RIDE	7 - BUS - INTERCITY 8 - BUS - SHUTTLE	12 - MILITARY 13 - POLICE		IOWING NOW REMOVAL	99 - OTHER / UNKNOWN	▎▝╲╟╬╣	'\\ \\\\\					
SPECIAL	SHARING 4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19 - 10	OWING		7 6 5	3					
PUNCTION	5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIP		AFETY SERVICE ATROL			12 17 19					
. 4	1 - NO CARGO BODY TYPE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - D		99 - OTHER / UNKNOWN	12						
	/ NOT APPLICABLE 2 - BUS	5 - INTERMODAL	8 - POLE	12 - C	ONCRETE MIXER	33 - OTHER J CHANGWIN	, R.A .						
BODY 3	3 - VEHICLE TOWING	CONTAINER CHASSIS 6 - CARGOVAN	9 - CARGO TANK 10 - FLAT BED		UTO TRANSPORTER		، درگر کرای						
TYPE	ANOTHER MOTOR VEHICLE	/ENCLOSED BOX		14 - G.	ARBAGE/REFUSE								
	I - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	7 - WORN OR SLICK TIRES		OTOR TROUBLE	99 - OTHER / UNKNOWN	6						
VÉHICIE	3 - TAIL LAMPS	6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE		ISABLED FROM PRIOR ECIDENT	i		6 6 6					
							☐- NO DAMAG	E[0] UNDERCARRIAGE [14]					
	1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER/ROADSIDE 8 - SIDEWALK		RIVEWAY ACCESS	99 - OTHER / UNKNOWN	□-тор [13]	- ALL AREAS [15]					
MOTORIST	2 - INTERSECTION - LINMARKED CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION	9 - MEDIAN/CROSSING	O	R TRAILS RST RESPONDER		<u> </u>						
	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	ISUAND		INCIDENT SCENE		<u> </u>	UNIT NOT AT SCENE [16]					
	1 - NON-CONTACT	1 - STRAIGHT AHEAD 2 - BACKING	9 - LEAVING TRAFFIC LANE		ALKING, RUNNING, IGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE	INITIA	L POINT OF CONTACT					
. 3 .	2 - NON-COLLISION	3 - CHANGING LANES 4 - OVERTAKING/PASSING	10 - PARKED	16 - W	ORKING	99 - OTHER / UNKNOWN	0 - NO DAN						
		5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED IN TRAFFIC	18 - AI	JSHING VEHICLE PPROACHING OR	•	1-12 - REFE	R TO UNIT 15 - VEHICLE NOT AT SCENE					
	ACTIONS 5 - BOTH STRIKING	6 - MAKING LEFT TURN 7 - MAKING U-TURN	12 - DRIVERLESS 13 - NEGOTIATING A CURVE		AVING VEHICLE ANDING		13 - TOP	99 - UNKNOWN					
,	& STRUCK 9 - OTHER/UNKNOWN	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION			т							
<u>-</u>	1 - NONE	8 - FOLLOWING TOO CLOSE	13 - IMPROPER START FROM	18 - OP	ERATING DEFECTIVE	23 - OPENING DOOR INTO	TRAFFICALISM	TRAFFIC					
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	/ACDA 9 - IMPROPER LANE	A PARKED POSITION 14 - STOPPED OR PARKED	EQ	UIPMENT	YAWDAOR	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN					
1 1 .	4 - RAN STOP SIGN	CHANGE	ILLEGALLY	/FA	AD SHIFTING LLING/SPILLING	99 - OTHER IMPROPER ACTION	2 - TWO-WAY	2 - SIGNAL 5 - VIELD SIGN					
CONTRIBUTING	5 - UNSAFE SPEED 6 - IMPROPER TURN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY		PROPER CROSSING ING IN ROADWAY			6 - NO CONTROL					
CONTRIBUTING CIRCUMSTANCE: SEQUENCE O	7 - LEFT OF CENTER	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION		T DISCERNIBLE		# OF THROUGH LANES	RAIL GRADE CROSSING					
SEQUENCE O				_			ON ROAD	1 - NOT INVLOVED					
_	t	7 - SEPARATION OF THE	EVENTS			727	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING					
1 20	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION		IIMAL -OTHER OTOR VEHICLE IN	23 - STRUCK BY FALLING, SHIFTING CARGO OR		_ 					
	3 - IMMERSION 4 - JACKKNIFE	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TRA	ANSPORT RKED MOTOR	ANYTHING SET IN MOTION BY A MOTOR	UNIT / NO	ON-MOTORIST DIRECTION					
²	5 - CARGO / EQUIPMENT LOSS OR SHIFT	11 - CROSS CENTERLINE - OPPOSITE DIRECTION	16 - RAILWAY VEHICLE	VEI	HICLE	VEHICLE 24 - OTHER MOVABLE		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST					
al	6 - EQUIPMENT FAILURE	OF TRAVEL	17 - ANIMAL - FARM 18 - ANIMAL - DEER	MA	ORK ZONE NNTENANCE	OBJECT	FROM 3 TO	A 3 - EAST 7 - SOUTHEAST					
"		TUL ULICOLISM	N WITH FIXED OBJECT		UIPMENT	,	FROM TO	4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN					
4		31 - GUARDRAIL END 32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES		BANKMENT :	S2 - BUILDING S3 - TUNNEL							
Ι, ,		33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	SUPPORT	47 - MA	AILBOX	S4 - OTHER FIXED	UNIT SPEED	DETECTED SPEED					
5 🗀	27 - BRIDGE PIER OR	BARRIER	40 - UTILITY POLE 41 - OTHER POST, POLE		E HYDRANT	OBJECT 99 - OTHER / UNKNOWN	ı 30 ı	1 - STATED / ESTIMATED SPEED					
اما	ABUTMENT 28 - BRIDGE PARAPET	35 - MEDIAN CONCRETE BARRIER	OR SUPPORT 42 - CULVERT	MA	ORK ZONE LINTENANCE								
6		36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST	43 - CURB		UIPMENT		POSTED SPEED	2 - CALCULATED / EDR					

27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE

1 FIRST HARMFUL EVENT

35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST

42 - CULVERT 43 - CURB 44 - DITCH

1 | MOST HARMFUL EVENT

51 - WALL

25

3 - UNDETERMINED

Ū	Motorist / Non-Motorist								LOCAL REPORT NUMBER												
I	UNIT #										24MPD0202										
ı	1	SCHAFER, JARRETT, ANDREW												0/2008			16				
FS	ADDRESS:	STREET, CITY, S									CONT	ACT PH		- INCLUDE A	REA CODE		- 10	M			
Ĭ	2634 SR	83, MILLER		1	231-5		***************************************														
ž	INJURIES	ES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: 1						MEDICAL FACILITY (NAME,	CIM)	SAFETY EQUIPMENT		Т-Сомя		SEATING POSITION	AIR 84	G USAG	EJECTIO	TRAPPED			
Į NO	5	ву 1								4		HELMS		1		1	1	1			
RIST	OL STATE	OPERATOR L	CENSE NUMBER		İ	OFFEN:	SE CHARG	GED	LOCAL	OFFENSE DESCR	IPTION				CITA	TION N	UMBER				
OTO	ОН	VQ915485						CODE													
2	OL CLASS	ENDORSEMEN	ENDORSEMENT RESTRICTION SELECT UP TO 3 DRIVER ALCOH				HOL / DRUG SUSPE	CTED	CONDITION	A	ĻСОН	OL T	EST		DRUG	TEST(S)				
	4				DISTI BY 1	RACTED		DHOL MARUU	JANA	1 1	STATUS			STATUS	TYPE	RESULTS	SELECT UP TO 4				
F	UNIT #	NAME: LAST.	FIRST, MIDDLE				ITTI OTH	ER DRUG		, ,	1	1 1	Date	OF BIRTH	1	1	1.55				
I	2	KUPIEC, SI									Ì						AGE	GENDER			
Į,		STREET, CITY, S								_	CONT	e CT DU		9/1995 - INCLUDE A		1_	28	F			
100	10420 RI	ED ROSE DE	R, WADSWORTH, OH, 442	281							·	244-9		- INCLUDE A	REA CODE						
Ş	INJURIES		MS AGENCY (NAME)			INJURED	TAKEN TO;	MEDICAL FACILITY (NAME,	an)	SAFETY EQUIPMENT	+	SEATING				G USAGI	EJECTIO	TRAPPED			
DTORIST / NON-MOTORIST	5	TAKEN BY 1								USED 4	11 1	MC HELMET 1				1	1	1			
alst	OL STATE	OPERATOR LI	CENSE NUMBER		\neg	OFFEN:	SE CHARG	GED	LOCAL	OFFENSE DESCR	PTION			<u> </u>	CITA	TION N	UMBER				
Ē	он	TX020716							CODE												
Σ	OL CLASS	ENDORSEMEN	T RESTRICTION SELECT UP TO 3		DRIV	ÉR	ALCO	HOL / DRUG SUSPE	ALCOHOL TEST				DRUG TEST(S)								
ı	4				DISTI BY 1	RACTED	lH		JANA	,	STATUS	TYPE		VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4			
٥	UNIT #	NAMELLAST	FIRST, MIDDLE		_		ОТН	ER DRUG		1	1	1	<u>.</u>		1	1	j				
		TORING DIGI,	THOT, WIDDLE								DATE OF BIRTH AGE GI							GENDER			
12	ADDRESS:	STREET, CITY, S	TATE, ZIP				=		CONTACT PHONE - INCLUDE AREA COOF												
Š														CONTACT PHONE - INCLUDE AREA CODE							
oM-i	INJURIES		MS AGENCY (NAME)		I	(NUURED	TAKEN TO: I	MEDICAL FACILITY (NAME O	(YI	SAFETY EQUIPMENT	SEATING SEATING POSITION				AIR BA	G USAGE	EJECTION	TRAPPED			
ÓZ.		TAXEN BY						USED		USED			-COMPLIANT POSITION HELMET								
RIST /	OL STATE	OPERATOR LI	CENSE NUMBER			OFFENS	SE CHARG				PTION				CITA	CITATION NUMBER					
MOTORIST / NON-MOTORIST									CODE												
æ	OL CLASS	ENDORSEMEN	RESTRICTION SELECT UP TO 3		DRIV	VER ALCOHOL / DRUG SUSPECTED TRACTED ALCOHOL MARIJUANA OTHER DRUG			CONDITION	ALCOHOL TEST		DRUG TEST		TEST(S)						
					BY					STATUS	TYPE		VALUE	SUTATE	TYPE	RESULTS	SELECT UP TO 4				
7	INJU	IRIES"	SEATING POSITION		Δ	IR BAC		OLCIAS		OL RESTRIC	TIONIC	i Vist	·	DISTRAC	CTION	J	CT CT	THE			
ı	FATAL		1:- FRONT - LEFT SIDE			PLOYED		1 - CLASS A	, <u>, , , , , , , , , , , , , , , , , , </u>	I - ALCOHOL INTER		 1-1	NOT DIS	STRACTED	į		EST STA	IUŞ			
	SUSPECTED S	SERIOUS	2 - FRONT - MIDDLE	3 - DE	EPLOYE	ED SIDE		2 - CLASS B		DEVICE. 2 - CDL INTRASTATI	EONLY		MANUA LECTRO	ILLY OPERAT INIC	ING AN	2 - TEST 3 - TEST	REFUSED GIVEN,				
	SUSPECTED !	MINOR	3 - FRONT - RIGHT SIDE 4 - DEPLOYED BOTH 4 - SECOND - LEFT SIDE FRONT/SIDE					'3 - CLASS C 13 - CORRECTIVE LEN '4 - FARM WAIVER				ISES COMMUNICATION DEVICE (TEXTING, TYPING,					E CONTAMINATED SAMPLE / UNUSABLE				
1	POSSIBLE INI		(MOTORCYCLE PASSENGER) 5 - NOT APPLICABLE 5 - SECOND - MIDDLE 9 - DEPLOYMENT UNKNOWN 6 - SECOND - RIGHT SIDE					(OHIO = D) 6 - EXCEPT CLASS A								REE PEST GIVEN,					
			7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION (71						7. EXCEPT TRACTOR-TRAILER 4 - TALKING ON HAND-HELD 8 - INTERMEDIATE LICENSE COMMUNICATION DEVICE				5 - TEST GIVEN, RESULTS UNKNOWN							
г		TAKEN BY	8 - THIRD - MIDDLE	1	OT EJEC	CTED LY EJECTE	'n	OL ENDORSE	BAENT	RESTRICTIONS 5 - OTHER				HER ACTIVITY WITH AN ALCOHOL TEST TYPE				ST TYPE			
	/TREATED AT SCENE 10 - SLE		10 - SLEEPER SECTION	3 - TO	TALLY	EJECTED		H. HAZMAT	RESTRICTIONS 10 - LIMITED TO DA		6 - PASSENGER 7 - OTHER DISTRACTION				1 - NONE 2 - BLOOD						
	POLICE		11 - PASSENGER IN OTHER ENCLOSED CARGO	2		RAPPE	D	M - MOTORCYCLE	Ē	ONLY 11 - LIMITED TO EM	INSIDE THE VEHICLE				3 - URINE 4 - BREATH						
9	OTHER / UI	NKNOWN		1 - NO		APPED TED BY		P - PASSENGER N - TANKER		,12" - LIMITED - OTHI 13 - MECHANICAL I	EVICES			E THE VEHICI UNKNOWN		5 - OTH					
E	AFETY EC	QUIPMENT	12 - PASSENGER IN UNENCLOSED CARGO AREA	. ME	ECHAN	IICAL MEA	ANS	Q - MOTOR SCOO	TER	(SPECIAL BRAKE CONTROLS, OR	OTHER	12.4		NDITION		DRUG TEST TYPE					
	NONE USED SHOULDER B		13 - TRAILING UNIT 14 - RIDING ON VEHICLE				L MEANS	R - THREE-WHEEL MOTORCYCLE		ADAPTIVE DEVI	CLES ONLY	ONLY 2 - PHYSICAL IMPAIRMENT				2 - BLOC 3 - URIN	řΕ				
3 -	USED LAP BELT ON		EXTERIOR NON-TRAILING UNITS					S - SCHOOL BUS T - DOUBLE & TRI		15 - MOTOR VEHICI WITHOUT AIR E ,16 - OUTSIDE MIRRI	3 - EMOTIONAL (E.G.,			!	4 - OTHER						
	SHOULDER B USED	k LAP BELT	15 - NON-MOTORIST 199 - OTHER / UNKNOWN					TRAILERS		17 - PROSTHETIC AID			LINESS			1 - AMPHETAMINES					
l	- FORWARD I		1	[·				X-TANKER/HAZ	MAT	1		, F	ATIGUE	EEP, FAINTE D. ETC. THE INFLUEN	/	3 - BENZ	ITURATES ODIAZEPIN				
ľ	- REAR FACIN			• •				GENDE	R	ļ		N		TIONS / DRU	GS /:	4 - CANNABINOIDS 5 - COCAINE					
8 -	BOOSTER SEA HELMET USE	D :_	*	ř Š				F - FEMALE						UNKNOWN	16 - OPIATES / OPIOIDS 17 - OTHER 8 - NEGATIVE RESULTS						
l	(ELBOWS, KN	(EES, ETC)						,U - OTHER / UNKN	NWO	1		;			l ,	o - NEGA	VIVE KESU	r12.			
	- REFLECTIVE - LIGHTING -	PEDESTRÍAN	1									1			<u> </u>						
99	/ BICYCLE O - OTHER / UN		<u> </u>	<u> </u>	_			1 -2		:		į			i						

U	OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER 24MPD0202						
-	UNIT #		ST, FIRST, MIDDLE		Di	AGE	GENDER								
	1	SCHAFE	R, KHLOE			/20/2010	İ	13	F						
Ā	ADDRESS:	STREET, CIT	Y, STATE, ZIP			CONTACT PHONE - INCLUDE AREA CODE									
CCUPAN	2634 SR	83, MILL	ERSBURG, OH, 44	654				330-275-5296		-					
		INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAXEN TO: MEDICAL FACILITY (NA	AME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	GE EJECTIO	N TRAPPED			
1	5	BY 1	J				4	MC HELMET	3	1	1	1			
	UNIT #	NAME: LA	ST, FIRST, MIDDLE	<u> </u>	<u> </u>		<u> </u>	D/	ATE OF BIRTH		AGE	GENDER			
	_														
CCUPAN	ADDRESS:	STREET, CIT	Y, STATE, ZIP				-	CONTACT PHONE - INCLUDE AREA CODE							
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NA	LME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USA	GE EJECTIO	N TRAPPED			
	UNIT #	IT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH						
											AGE	GENDER			
DCCUPAN	ADDRESS:	STREET, CIT	Y, STATE, ZIP			CONTACT PHON	E - INCLUDE ARI	A CODE	<u> </u>	<u> </u>					
	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NA	UME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	GE EJECTIO	N TRAPPED			
		ВУ	1					MC HELMET							
	UNIT #	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH						
CCUPAN	ADDRESS:	STREET, CIT	Y, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE										
	INJURIES	INJURED TAKEN BY	EMS AGENCY INAME		INJURED TAKEN TO: MEDICAL FACILITY (NA	ME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USA	GE EJECTIO	N TRAPPED			
Ē		IN.	UL JURIES		Y EQUIPMENT USED	1	SEATING POS	ITION		AIR BAG	LICACE				
1 - NONE USED 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 1 - NALE W - OTHER / UNKNOWN 1 - NOTHER / UNKNOWN 1 - NOME USED 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - OTHER / UNKNOWN 1 - REFLECTIVE - PADS USED (ELBOWS, KNEES, ETC) 10 - REFLECTIVE - CLOTHING 11 - LIGHTING - PEDESTRIAN - / BICYCLE ONLY 99 - OTHER / UNKNOWN							IT - LEFT.SIDE FORCYCLE DRIVE IT - MIDDLE IT - RIGHT SIDE ND - LEFT SIDE ORCYCLE PASSE ND - MIDDLE ND - RIGHT SIDE ORCYCLE SIDE C O- MIDDLE O- MIDDLE O- RIGHT SIDE O- RIGHT SIDE SENGER IN OTHI GO AREA (NON-THE SENGER IN UNE SENER IN	NGER) FTRUCK CAB FR ENCLOSED WITH CAP) NCLOSED EXTERIOR	2 DEPLO 3 DEPLO 4 DEPLO FRON 5 NOT POPPLO 1 NOT POPPLO 2 PARTI 3 TOTA 4 NOT POPPLO 1 NOT POPPLO 1 NOT POPPLO 3 FREEL 3 FREEL	EJECTED EJECTED ALLY EJECTE APPLICABL TRAPPED CATED BY ANICAL M	E NKNOW ON TED D E				
SS	NAME: LAS	ST, FIRST, MI	DDLE	_				DA	TE OF BIRTH		AGE	GENDER			
WITNE	ADDRESS:	STREET, CIT	Y, STATE, ZIP		· ·		<u> </u>	CONTACT PHON	E - INCLUDE ARE	A CODE	-				
ESS	NAME: LAS	ST, FIRST, MI	DDLE	_	v			DA	TE OF BIRTH		AGE	GENDER			
WITM	ADDRESS:	STREET, CIT	Y, STATE, ZIP				-	CONTACT PHON	E - INCLUDE ARE	A CODE		<u> </u>			
ESS	NAME: LAS	ST, FIRST, MI	DDLE		<u>.</u> .			DA	TE OF BIRTH		AGE .	GENDER			
WITN	ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE ARE	A CODE		l			