Well 4-15-24															
TRAFFIC CRASH REPORT DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT											LOCAL REPORT NUMBER •  24MPD0485				
XI PHOTOS TAKEN LIGHT 2 LIGHT 3 24MPDU485									NCIC *	HIT/SKIP	NUMBER OF	<del></del>	UNIT IN ERROR		
SECONDARY	CRASH [	PRIVATE I	_	·	rsburg			L	1 - SOLVED	1	1 1	98 - ANIMAL 99 - UNKNOWN			
COUNTY* LOCALITY* LOCATION: CITY. VILLAGE, TOWNSHIP*											TE / TIME* CRASH SEVERITY				
38 2 2 - VILLAGE Millersburg											12:43	1, 3, ,	· Fatal · Serious Injury		
ROUTE TYPE ROUTE TYPE ROUTE TYPE	OUTE NUM	BER PREFI	x 1 - NORT 2 - SOUT		TION ROAD NAM	E			ROAD TYPE	LATITUDE D	SUSPECTED				
100			3 - EAST 4 - WEST		view				AV	40.552	MINOR INJURY SUSPECTED				
ROUTE TYPE RO	MUN 3TUO	BER PREFI	X 1 - NORT 2 - SOUT		RENCE ROAD NAM	IE (ROAD, I	MILEPOST, HO	USE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES 4 - INJURY POSS					
					) Fairview					5 - PROPERTY DATE ONLY					
REFERENCE POINT DIRECTION FROM REFERENCE					ROUTE TYPE		, , ,	ROAD TYPE		INTERSECTION RELATED					
1 - INTERSEC 3   2 - MILE POS		, ,2-	SOUTH .		STATE ROUTE (TP)		- ALLEY - AVENUE /	HW - HIGHWA LA - LANE	Y RD - ROAD SQ - SQUARE	WITHIN INTE	RSECTION OR C	N APPROAC	iH I I		
3 - HOUSE #	1	4 - 1	WEST ,	JS - FEDE SR - STATI	RAL'US ROUTE E ROUTE		- BOULEVARD	MP - MILEPOS	T ST - STREET TE - TERRACE	WITHIN INTE	RCHANGE ARE	A NUM	IBER OF APPROACHES		
DISTANCE FROM REFERENCE	CE	DISTAN UNIT OF ME	ASURE (		BERED COUNTY RO	оите ст	- COURT	PK - PARKWAY	TL - TRAIL		ROA	DWAY			
  -	را،	1 2-			MBERED TOWNSHIP HE - HEIGHTS PL - PLACE ROADWA						DIVIDED				
LC	OCATION -	OF FIRST HA	YARDS   ARMEUL EV		rēdru		INED or CDAC	H COLUMNON /		DIRECTION of TRA	/51	MEDIA	N TVDE		
1-ONF	ROADWAY	9	- CROSSOV	ER	ACCESS 1 1	1 - NOT	COLLISION 4	H COLLISION/I - REAR-TO-REA		1 - NORTH	i	MEDIA DIVIDED FLI	N 14PE USH MEDIAN		
3 - IN M	IEDIAN	1	0 - DRIVEW 1 - RAILWAY		1 —	TWO	MOTOR 6	- BACKING - ANGLE		2 - SOUTH		( <4 FEET)	USH MEDIAN		
4 - ON F 5 - ON C	roadside Gore	12	SHARED - STAILS	USE PATI	HS OR		CLES IN	- SIDESWIPE, SA	ME DIRECTION	4 - WEST	}	( 24 FEET )			
		FIC WAY 1:				2 - REA!	K-EIVD	- SIDESWIPE, OF	3 - DIVIDED, DEPRESSED MEDIA 4 - DIVIDED, RAISED MEDIAN						
7 - ON F 8 - OFF			4 - TOLL BO 9 - OTHER /		vn.	3 - HEA	U-ON 9	- OTHER / UNK	NOWN		.و	(ANY TYPE) (U / OTHER	IKNOWN		
WORK ZONE I	RELATED		$T^{-}$	wo	ORK ZONE TYPE		LOCATIO	N OF CRASH II	N WORK ZONE	CONTOUR	CONDI	TIONS	SURFACE		
WORKERS PRI	ESENT			1 - LANE	CLOSURE		1.		T WORK ZONE	121	, 2	ı	191		
LAW ENFORCE	EMENT PR	ESENT			SHIFT/ CROSSOVI K ON SHOULDER	R		WARNING SIGI ADVANCE WA		1 - STRAIGHT	1 - DRY	_	1 - CONCRETE		
			┧╙	OR M	1EDIAN		٠ ،	TRANSITION A		LEVEL 2 - STRAIGHT	2 - WET 3 - SNOW		2 - BLACKTOP, BITUMINOUS,		
ACTIVE SCHO	OL ZONE			4 - INTE	RMITTENT OR MOY	/ING WORK	1	TERMINATION		GRADE 3 - CURVE LEVEL	4 - ICE	ID DIDT	ASPHALT 3 - BRICK/BLOCK		
	LIGHT CO	NDITION	Щ.	<del></del>	WEATHER					4 - CURVE GRADE	5 - SAND, MI OIL, GRAY	/EL	4 - SLAG , GRAVEL,		
1 - DAYI	LIGHT				1 - CLEAR		6 - SNOW			9 - OTHER JUNKNOWN	6 - WATER (S MOVING)	•	STONE 5 - DIRT		
11 1 1	/N/DUSK K - LIGHTE	D ROADWA'	,	l	2 - CLOUDY 3 - FOG. SN		7 - SEVERE CI	ROSSWINDS SAND, SOIL, DI	RT SNOW	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7 - SLUSH	nunoun.	9 - OTHER / UNKNOWN		
		Way not li		, NE	4 - RAIN		9 - FREEZING	RAIN OR FREEZ			9 - OTHER/I	JAKNOWN	,		
	ER/UNKN		WAT LIGHT	ING	5 - SLEET, H	IAIL	99 - OTHER /	UNKNOWN							
NARRATIVE										<u></u>	1				
Unit 01 was pu	ulling int	o their dri	veway, Uı	nit 01 st	ruck her retaini	ng wall. U	nit 01		30 Fairvelw Ave						
across the rao	could no dway (Fa	t locate th iirveiw Ave	e brake t e) througi	o apply h the ya	the brake. Unit rd of 180 Fairve	01 then b iw, up on	acked to the	1	20 FallAelM VAB						
front porch, di	ropped o	off the side	e of the p		d went into 130				Deck						
causing dama	ge to bo	ın propen	iles.						)				$\setminus Y \setminus$		
										<u>.  </u>	. ₩				
									\$	'	Fairveiw Ave				
								<u></u>			щ				
									Umitol us						
								g	. ]] ~	38.					
										9					
										Unito	, L		1 183 Fairveiw Ave		
Tie Unit 01 traval tenth										Fairv					
													<u> </u>		
CRASH REPO	RTEN DAT	TE / TIBAT	ı	- Nico	NTCU DATE ( ****	<del></del> ,		DISTALL DATE (	1945		D. 1	1 -			
	/2024 12				12/2024 12:46			/12/2024 12		SCENE CLEARED		- 1	POLICE AGENCY		
TOTAL TIME					12/2024 12:46			/12/2024 12		04/12/202	4 15:45		MOTORIST		
ROADWAY CLOSE		OTHER IGATION TI		OTAL NUTES	Genet, Steph				Checked by OFFICE	Latel D-			SUPPLEMENT		
_		40		20			OGE NUMBER*	<del></del>		Y OFFICER'S BADGE	NUMBER*		PRECTION OR ADDITION IN EXISTING REPORT SENT TO		
0	0 40 99 107									100	2)				

	•											
E SER	UNIT						LOC	AL REPORT NUMB	ER			
						24MPD0485						
•	OWNER NAME: LAST, FIRST, I	MIDDLE ( SAME AS DRIVER)		OWNER		EA CODE ( SAME AS DRIVER)	DAMAGE COLE					
	BOLEY, MARILYN DDRESS: STREET, CITY, STATE, Z	IP # Th EAST AT CONTROL	<u>_</u>		330-674	1-3696	1 - NONE	DAMAGE SCALE	NCTIONAL DAMAGE			
-	RVIEW AVE, MILLERSE						4 1 2 - MINOR DA		ABLING DAMAGE			
• —	IAL CARRIER: NAME, ADDRES	<del></del>	_	Cor	MMERCIAL CARRIER PH	DNE: INCLUDE AREA CODE		9 - UNKNOWN				
							DAMAGED AREA(S)					
LP STATE	LICENSE PLATE #	VEHICLE II	DENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	INDICATE ALL THAT APPLY					
ОН	CL42FD	KL5VM5	52L84B101463		2004	SUZUKI	12		12			
X INSURA	NCE INSURANCE COMPA	SURANCE POLICY #	COLOR VEHICLE MODEL					7 2				
LALIVERIFIE	1	JAL APV	-617-04-55	T would	SIL	VERONA	10/11/11	10/				
Псомме	TYPE OF USE  RCIAL GOVERNMENT G	IN EMERGENCY	US DOT#	RIGZ	'ED BY: COMPANY N Z	AME		\ <i>[</i>				
INTERLO		JRESPONSE VEHICL	E WEIGHT GVWR/GCWR		HAZARDOU MATERIAL CLAS			/ · · · · <del>·</del>	- BOH <i>-</i> /			
DEVICE	HIT/SKIP UNIT		1 - ≤10K LBS. 1 2 - 10.001 - 26K LBS.	Í⊟ĸ	ELEASED	S# PLACARD ID#	, , , , , , , , , , , , , , , , , , ,	• •	<b>✓├┼┼┤</b> ✓•			
EQUIPPI	<del></del>	<u> </u>	3 - > 26K LBS.	LP	LACARD		5	12	1			
						PEDESTRIAN/SKATER WHEELCHAIR (ANY TYPE)						
	(MINIVAN) 8 M	OTORCYCLE 3-WHEELED 14	I - SINGLE UNIT 20 - O	THER VEH	•	OTHER NON-MOTORIST	10/_	` <u> :  #</u>     ^_	\			
UNIT TYPI	VERNICIE	ITOCYCLE ROPED OR MOTORIZED 15	- SEMI-TRACTOR	EAVY EQL		BICYCLE	3 (	0 2 3	٦,			
	4 - PICK UP B	ICYCLE 16	A PARM EQUIPMENT			TRAIN UNKNOWN OR HIT/SKIP	\ <u></u>		<del>/</del>			
<b>.</b> .	(ATV)		- MOTORHOME		33.4	ONKNOWN OR HITTSKIP	8	〈 <del>[[[]]]</del> 〉	<b>/</b> 4			
<u> </u>	# of TRAILING UNITS						11 12		11 12			
VEHICL 	WAS VEHICLE OPERATING IN AT MODE WHEN CRASH OCCURRE		- NO AUTOMATION 3	-CONDITI	IONAL AUTOMATION	9 - UNKNOWN	100					
1 2 1		1			JTOMATION			. "/				
	1-YES 2-NO 9-OTHER/L	NKNOWN AUTONOMOUS : MODE LEVEL	2 - PARTIAL AUTOMATION 5	- FULL AU	TOMATION		9 9 3 3					
	1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16 - F/	ARM	21 - MAIL CARRIER		·				
<sub>1</sub> 1 <sub>1</sub>	2 - TAXI 3 - ELECTRONIC RIDE	7 - BUS - INTERCITY 8 - BUS - SHUTTLE	12 - MILITARY 13 - POLICE		OWING	99 - OTHER / UNKNOWN		4 ,	ス <del>        </del>			
SPECIAL	SHARING	9 - BUS - OTHER	14 - PUBLIC UTILITY		N <b>OW</b> REMOVAL DWING		, 6		3			
FUNCTION	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIP.		AFETY SERVICE ATROL							
	1 - NO CARGO BODY TYPE	4 - LOGGING	7 Chanticular control					Ä				
1	/ NOT APPLICABLE	5 - INTERMODAL	7 - GRAIN/CHIPS/GRAVEL 8 - POLE	11 - D1	ONCRETE MIXER	99 - OTHER / UNKNOWN	ก๊ด	A 1				
CARGO BODY	2 - BUS 3 - VEHICLE TOWING	CONTAINER CHASSIS 6 - CARGOVAN	9 - CARGO TANK		UTO TRANSPORTER		والمستشرية والمستشرية	ر و مار	3 9			
TYPE	ANOTHER MOTOR VEHICLE	/ENCLOSED BOX	to - FLAT BED	14 - G	ARBAGE/REFUSE			<b>*</b>	. ⊕			
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES		OTOR TROUBLE	99 - OTHER / UNKNOWN	6	j j=	<b>1</b>			
VEHICLE	<sup>J</sup> 2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOLT	8 - TRAILER EQUIPMENT DEFECTIVE		isabled from Prior Ecident			6	6 6			
DEFECTS							□- NO DAMA	se[0] <b>⊠</b> -∪r	NDERCARRIAGE [ 14 ]			
	1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER/ROADSIDE		RIVEWAY ACCESS	99 - OTHER / UNKNOWN	□- <b>T</b> OP[13]	п.,				
NON-	2 - INTERSECTION -	5 - TRAVEL LANE -	8 - SIDEWALK 9 - MEDIAN/CROSSING	O	HARED USE PATHS R TRAILS		· <u>·</u>		L AREAS [ 15 ]			
LOCATION	UNMARKED CROSSWALK  3 - INTERSECTION - OTHER	OTHER LOCATION  6 - BICYCLE LANE	ISLAND		RST RESPONDER FINCIDENT SCENE		·	UNIT NOT AT SCEI	NE [ 16 ]			
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	9 - LEAVING TRAFFIC		ALKING, RUNNING,	21 - STANDING OUTSIDE	INITI	AL POINT OF CONTA				
	2-NON-COLLISION	2 - BACKING 3 - CHANGING LANES	LANE 10 - PARKED		ogging, Playing Orking	DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DA		IDERCARRIAGE			
3	3 - STRIKING L	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED IN TRAFFIC		USHING VEHICLE PPROACHING OR				HICLE NOT AT SCENE			
ACTION	4 - STRUCK ACTIONS	6 - MAKING LEFT TURN	12 - DRIVERLESS		AVING VEHICLE			RAM 99 - UN	KNOWN			
	5 - BOTH STRIKING & STRUCK	7 - MAKING U-TURN 8 - ENTERING TRAFFIC	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING		TANDING THER NON-MOTORIS	•	13 - TOP					
	9 - OTHER / UNKNOWN	LANE	SPECIFIED LOCATION					TRAFFIC				
	1 - NONE 2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE /ACDA	13 - IMPROPER START FROM A PARKED POSITION		PERATING DEFECTIVE	23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW	TRAFFIC	CONTROL			
	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY	19 - LO	AD SHIFTING	99 - OTHER IMPROPER	1 - ONE-WAY 2 - TWO-WAY		ABOUT 4 - STOP SIGN			
<u> </u>	5 - UNSAFE SPEED	10 - IMPROPER PASSING	15 - SWERVING TO AVOID		ALLING/SPILLING PROPER CROSSING	ACTION	2	6 3-FLASHE				
G CONTRIBUTE OF CIRCUMSTAN	NG 6-IMPROPER TURN CES 7-LEFT OF CENTER	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY 17 - VISION OBSTRUCTION		ING IN ROADWAY		# OF THROUGH LANES	DAII CDA	DE CROSSING			
<u> </u>					JI DISCLATION.		ON ROAD	1 - NOT INV				
SEQUENCE	E OF EVENTS		* ******		u	** ** == =	2	2 - INVOLVE	D-ACTIVE CROSSING			
, 51	1 - OVERTURN/ROLLOVER	7 - SEPARATION OF UNITS	12 - DOWNHILL RUNAWAY			23 - STRUCK BY FALLING,		3 - INVOLVE	D-PASSIVE CROSSING			
· L	2 - FIRE/EXPLOSION 3 - IMMERSION	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	13 - OTHER NON-COLLISION 14 - PEDESTRIAN		OTOR VEHICLE IN ANSPORT	SHIFTING CARGO OR ANYTHING SET IN	UNIT / N	ON-MOTORIST DIR	ECTION			
2 54	J 4 - JACKKNIFE 5 - CARGO / EQUIPMENT	10 - CROSS MEDIAN 11 - CROSS CENTERLINE -	15 - PEDALCYCLE 16 - RAILWAY VEHICLE		ARKED MOTOR HICLE	MOTION BY A MOTOR VEHICLE		1 - NORTH	S - NORTHEAST			
	LOSS OR SHIFT	OPPOSITE DIRECTION	17 - ANIMAL - FARM	22 - W	ORK ZONE	24 - OTHER MOVABLE OBJECT	_	2 - SOUTH A 3 - EAST	6 - NORTHWEST 7 - SOUTHEAST			
3 <u>L 54</u>	6 - EQUIPMENT FAILURE	OF TRAVEL	18 - ANIMAL - DEER		AINTENANCE JUIPMENT		FROM 3 TO	4 4-WEST	8 - SOUTHWEST			
	25 - IMPACT ATTENUATOR	COLLISIO	N WITH FIXED OBJECT - 38 - OVERHEAD SIGN POST			EZ SIMIDING			9 - OTHER / UNKNOWN			
4 🗀	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER	39 - LIGHT / LUMINARIES	45 - FE	NCE	52 - BUILDING 53 - TUNNEL	UNIT SPEED	DET	ECTED SPEED			
e l	STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	SUPPORT 40 - UTILITY POLE	47 - M 48 - TR	EE	54 - OTHER FIXED OBJECT						
<b>1</b>	27 - BRIDGE PIER OR ABUTMENT	BARRIER 35 - MEDIAN CONCRETE	41 - OTHER POST, POLE OR SUPPORT	50 - W	ORK ZONE	99 - OTHER / UNKNOWN	15	1 - 51	ATED / ESTIMATED SPEED			
61	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	BARRIER 36 - MEDIAN OTHER BARRIER	42 - CULVERT	MA	AINTENANCE JUIPMENT		DOCTED COLES	—  1 <sub>12</sub> .0	ALCULATED / EDR			
<b>I</b>	30 - GUARDRAIL FACE	37 - TRAFFIC SIGN POST	44 - DITCH	51 - W			POSTED SPEED		NOTTED MINED			

2 | MOST HARMFUL EVENT

1 FIRST HARMFUL EVENT

3 - UNDETERMINED

25

Motorist / Non-Motorist												LOCAL RE				1					
	UNIT # NAME: LAST, FIRST, MIDDLE										+	24MPD0485  DATE OF BIRTH AGE GENDER									
	1	BOLEY, MARILYN											08/09/1930 93								
RIST	ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE								
010	183 FAIRVIEW AVE, MILLERSBURG, OH, 44654  INJURIES INJURIED LEMS AGENCY (NAME)  INJURIES INJURIED LEMS AGENCY (NAME)  INJURIES INJURIED LEMS AGENCY (NAME)  INJURIES INJURIES INJURIED LEMS AGENCY (NAME)  INJURIES INJURIES INJURIES LEMS AGENCY (NAME)																				
≥ NO		TAKEN		S AGENCY (NAME) TRICT ONE			TAKEN TO: I	MEDICAL FACILITY (NAME	. CITY)	SAFETY EQUIPMENT USED		T-Compl		SEATING POSITION	AIR BA	IG USAGE	EJECTIO	TRAPPED			
ΝL	3	BY 2		NET MILET NO.			JPH				4		MC HELMET 1				1 1 1				
IOTORIST / NON-MOTORIST	OH			NSE NUMBER		OFFEN	SE CHARG	iED	CODE	OFFENSE DESCR	IPTION				CITA	CITATION NUMBER					
Σ	OL CLASS	RK41575	_	RESTRICTION SELECT UP TO 3		l DON	<u> </u>	ALCOL	AOL / PRUG SUSP	<u> </u>	CONDITION	Δ	ICOH	OHOL TEST			DRUG TEST(S)				
				DI			DRIVER ALCOHOL / DRUG SUSPECT DISTRACTED ALCOHOL MARIJUAN				COMPITION	STATUS	TYPE		VALUE	SUTATE	TYPE	$\overline{}$			
	4			3		BY .	1	OTHE	R DRUG		1	1	1			1	1				
	UNIT #	NAME: LA	ST, FII	RST, MIDDLE										DATE	OF BIRTH			AGE	GENDER		
Ŀ	ADDRESS:	STREET, CIT	V STA	TF 719							-	-									
OTORIST / NON-MOTORIST	ADDRESS,	311421, 611	1, 31,									CONT	ACT PH	ONE -	- INCLUDE A	REA CODE					
J-MO	INJURIES		EMS	AGENCY (NAME)			INJURED	TAKEN TO: 8	MEDICAL FACILITY (NAME	, CITY)	SAFETY EQUIPMENT		Т-Сомац		SEATING	AIR BA	AIR BAG USAGE EJECTIO		TRAPPED		
/ NO		TAKEN BY						USED					HELME		POSITION		]				
RIST	OL STATE	OPERATOR	LICE	NSE NUMBER			OFFEN:	SE CHARG	ED	LOCAL	OFFENSE DESCR	IPTION				CITA	TION NI	JMBER			
МОТС						لـــا	L														
	OL CLASS	ENDORSEN	IENT	RESTRICTION SELECT UP TO 3		DRIV DIST	/ER RACTED		HOL / DRUG SUSPECTED CONDITION			"A STATUS	TYPE	OL T	VALUE	STATUS	DRUG	UEST(	SELECT UP TO 4		
						BY		ı⊨	R DRUG			312103	""		VALUE	314103	1176	RESOLIS	SELECT OF ID 4		
	UNIT #	NAME: LA	ST, FII	RST, MIDDLE							•	Ţ	•	DATE	OF BIRTH			AGE	GENDER		
	_											<u> </u>									
ORIST	ADDRESS:	STREET, CIT	Y, STA	TE, ZIP								CONT	ACT PH	ONE -	INCLUDE A	REA CODE					
Mo	INJURIES	INJURED	EMS	AGENCY (NAME)			INJURED	TAKEN TO: N	MEDICAL FACILITY (NAME	.arv)	SAFETY EQUIPMENT	SEATING AIR BAG USAGE EJECTION TRAPPED									
OTORIST / NON-MOTORIST		TAKEN BY ,						nzed				DOT-COMPLIANT POSITION MC HELMET									
RIST /	OL STATE	OPERATOR	LICE	NSE NUMBER			OFFENS	SE CHARG	ED	LOCAL	OFFENSE DESCR	IPTION				CITA	TION N	JMBER	1		
AOTO																					
Ī	OL CLASS	ENDORSEN	LENT	RESTRICTION SELECT UP TO 3					COHOL / DRUG SUSPECTED LICOHOL MARUUANA		CONDITION	ALCOH STATUS TYPE		VALUE S		STATUS	DRUG	TEST(	SELECT UP TO 4		
						BY		=	R DRUG				'''-		77202	317103	""	KESUCIS	Secze1 07 10-4		
		JRIES		SEATING POSITION			AIR BAG	3	OL CLA	ss	OL RESTRIC	TION(S	DR	IVER	DISTRA	CTION	T	EST ST	TUS		
ı	· FATAL · SUSPECTED :	SERIOUS	:	- FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	2 D	EPLOY	PLOYED ED FRON	Ţ	1 - CLASS A	LOCK 1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN											
l	INJURY SUSPECTED		1	2 - FRONT - MIDDLE 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH 4 - SECOND - LEFT SIDE FRONT/SIDE					2 - CLASS B 3 - CLASS C	ONLY ELECTRONIC SES COMMUNICATION DEVICE				i	3 - TEST GIVEN,						
l	INJURY		į.	(MOTORCYCLE PASSENGER)	OT AP	PLICABLE		4 - REGULAR CLA	BUS DIATING					/ UNUSABLE							
Ι.	4 - POSSIBLE INJURY 5 - SECOND - MIDDLE 5 - NO APPARENT INJURY 6 - SECOND - RIGHT SIDE			9-D	EPLOY	MENT UN	UNKNOWN (OHIO = D) 6 - EXCEPT CLASS A 3 - TALKING ON HAND  5 - M/C MOPED ONLY  8 CLASS B BUS  COMMUNICATION I  A TALKING ON HAND						DEVICE	VICE RESULTS KNOWN							
┕	NILIBIES	TAKEN B	=	7 - THIRD - LEFT SIDE, (MOTORCYCLE SIDE CAR)		EJ	EJECTION 7 - EXCEPT TRACTOR						DR-TRAILER TAKENING ON HANDSHEED PRESULTS UNKN					NWO			
г	8 - THIRD - MIDDLE						EJECTED RESTRICTIONS TIALLY EJECTED OL ENDORSEMENT 9 - LEARNER'S PERM						III ELECTRONIC DEVICE				ALCOHOL TEST TYPE 1 - NONE				
١,	/TREATED AT SCENE \$10 - SLEEPER SECTION 3						TALLY PIECTED  TAPPLICABLE  H - HAZMAT  RESTRICTIONS 10 - LIMITED TO DAY					AYLIGHT 7 - OTHER DISTRACTION 2 - BLOOD									
ı	- POLICE			I1 - PASSENGER IN		Tí	RAPPE	D	M - MOTORCYCL	Æ	ONLY										
9.	OTHER/U	NKNOWN	;	OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	£ .	OT TRAPPED P - PASSENGER 12 - LIMITED - OTHER STRICATED BY N - TANKER 13 - MECHANICAL DE STRICATED BY REPORTS					DEVICES 9 - OTHER / UNKNOWN					T TVOC					
E	SAFETY E	QUIPMEN		12 - PASSENGER IN UNENCLOSED CARGO AREA	₽ M	ECHAN	NICAL ME	ANS	Q - MOTOR SCO	OTER	(SPECIAL BRAK CONTROLS, OF	OTHER 1 - NONE					-				
	NONE USEE SHOULDER E			13 - TRAILING UNIT 14 - RIDING ON VEHICLE				AL MEANS:	R - THREE-WHEE		ADAPTIVE DEV 14 - MILITARY VEHI 15 - MOTOR VEHIC	CLEŚ ONL'	γ ,2-P	HYSIC	AL IMPAIRME		3 - URINE				
	USED LAP BELT ON	NLY USED	į	EXTERIOR (NON-TRAILING LINIT)	i				T - DOUBLE & TR		WITHOUT AIR I	RAKES OR	D		ED, ANGRY,	Į.	DRUG TEST RESULT(S)				
	SHOULDER 8 USED	& LAP BELT		IS - NON-MOTORIST 39 - OTHER / UNKNOWN	ļ				TRAILERS		17 - PROSTHETIC A 18 - OTHER	ID	4 - ILLNESS 5 - FELL ASLEEP, FAINTED				1 - AMPHETAMINES				
5 -	- FORWARD		۷ ۱		i Y				X - TANKER / HA	ZMAT,			FATIGUED, ETC. 6 - UNDER THE INFLUENCE				3 - BENZ	ODIAZEPI			
6 -	CHILD REST	CAINT SYSTEM	vi i	:					GENDE	İ		, N	<b>IEDICA</b>	TIONS / DRU	GS/	5 - COC/					
	BOOSTER SE	AT	1		F				F - FEMALE M - MALE				COHO OTHER,	, ÜNKNOWN	l .	7 - OTHE					
	PROTECTIVE	PADS USED		,	1				U - OTHER / UNK	NOWN			:				8 - NEG/	ATIVE RESU	ILTS		
	(ELBOWS, KI - REFLECTIVE - LIGHTING -	CLOTHING	, ;	:	ş				1		1		1								
ľ	/ BICYCLE C - OTHER / UT	NLY	· · · · · · · · · · · · · · · · · · ·		į. Į.						;					ļ					

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER						
UNIT #	,	ST, FIRST, MIDDLE				_	- N	24MI	PD0485	AGE	GENDER			
_!								CIE OF BIRTH		AGE	GENDER			
ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE AR	EA CODE					
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAM	ME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	GE EJECTIO	ON TRAPPED			
UNIT#	NAME: LA	ST. FIRST, MIDDLE			_	]	MC RELMET	TE OF BIRTH		AGE	GENDER			
				(IE OF BIXTH		AGE	GENDER							
ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE AR	EA CODE		<u></u>			
INJURIES	INJURED TAKEN BY	EMS AGENCY INAME		INJURED TAKEN TO: MEDICAL FACILITY (NAM	SAFETY EQUIPMENT	DOT-COMPLIANT	AIR BAG USA	GE EJECTIO	ON TRAPPED					
UNIT #	NAME: LA	ST, FIRST, MIDDLE		D#	DATE OF BIRTH AGE GE									
<b>2</b>		· · · · · · · · · · · · · · · · · · ·												
ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE AR	EA CODE					
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	_	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  SAFETY EQUIPMENT  DOT-ComplianT POSITION  SEATING POSITION					AIR BAG USA	IGE EJECTIO	ON TRAPPED			
UNIT #	NAME: LA	ST, FIRST, MIDDLE		DA	TE OF BIRTH		AGE	GENDER						
ADDRESS:	STREET, CIT	Y, STATE, ZIP		<del></del> -	<del></del>		CONTACT PHON	E - INCLUDE AR	EA CODE					
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	-	INJURED TAKEN TO: MEDICAL FACILITY (NAM	ME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	' SEATING POSITION	AIR BAG USA	GE EJECTIO	N TRAPPED			
		JURIES		Y EQUIPMENT USED		SEATING POS	L-JMC HELMET	ï	AIR BAG					
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY- 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN  GENDER 7 - FEMALE M - MALE				ESTRAINT SYSTEM -	2 - FRON 3 - FRON 4 - SECO (MOT 5 - SECO 7 - THIRI 10 - SLEE 11 - PAS CAR SUC 12 - PAS 12 - PAS 13 - TRA 14 - RIDI 15 - NON	TORCYCLE DRIVE IT - MIDDLE IT - MIDDLE IT - RIGHT SIDE IND - LEFT SIDE IND - MIDDLE IND - RIGHT SIDE IND - R	NGER)  E AR)  F TRUCK CAB  ER ENCLOSED  RAILING UNIT  P WITH CAP)  NCLOSED  EXTERIOR	3 - DEPLI 4 - DEPLI FRON 5 - NOT 9 - DEPLI 1 - NOT 2 - PART 3 - TOTA 4 - NOT 1 - NOT 2 - EXTRI MECH 3 - PREEC	EJECTED  IALLY EJECTI  APPLICABI  TRAP  TRAPPED  CATED BY  IANICAL M  BY	ABLE TUNKNOWN CTION DECTED CTED ABLE APPED D BY				
NAME: LA	ST, FIRST, MI	DDLE					DA	TE OF BIRTH		AGE	GENDER			
ADDRESS:	STREET, CIT	Y, STATE, ZIP			-		CONTACT PHON	E - INCLUDE ARI	EA CODE		L			
NAME: LA	ST, FIRST, MI	DDLE .		<u>·</u>			D#	TE OF BIRTH		AGE	GENDER			
ADDRESS:	STREET, CIT	Y, STATE, ZIP		- · ·			CONTACT PHON	E - INCLUDE AR	EA CODE		<del></del>			
NAME: LA	ST, FIRST, MI	DDLE		_	·		DA	TE OF BIRTH		AGE	GENDER			
ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE AR	EA CODE		<u> </u>			