



TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER *	CRASH SEVERITY	HIT/SKIP
2018-00020792	3 1 - FATAL 2 - INJURY 3 - PDO	2 1 - SOLVED 2 - UNSOLVED

LOCAL INFORMATION		REPORTING AGENCY NCIC *	REPORTING AGENCY NAME *	NUMBER OF UNITS	UNIT IN ERROR
<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER	<input type="checkbox"/> PDO UNDER STATE REPORTABLE DOLLAR AMOUNT	<input checked="" type="checkbox"/> PRIVATE PROPERTY	04501 Newark Police Department	02	01 98 - ANIMAL 99 - UNKNOWN

COUNTY *	<input checked="" type="checkbox"/> CITY * <input type="checkbox"/> VILLAGE * <input type="checkbox"/> TOWNSHIP *	CITY, VILLAGE, TOWNSHIP *	CRASH DATE *	TIME OF CRASH	DAY OF WEEK
45	NEWARK	NEWARK	07142018	1127	Sat

DEGREES / MINUTES / SECONDS LATITUDE	LONGITUDE	DECIMAL DEGREES LATITUDE	LONGITUDE
0 / 0 00.0000	0 / 00.0000	40.086231	-8.242760

ROADWAY DIVISION	DIVIDED LANE DIRECTION OF TRAVEL	NUMBER OF THRU LANES	ROAD TYPES OR MILEPOST 2
<input type="checkbox"/> DIVIDED <input checked="" type="checkbox"/> UNDIVIDED	<input type="checkbox"/> N - NORTHBOUND E - EASTBOUND <input type="checkbox"/> S - SOUTHBOUND W - WESTBOUND	01	AL - ALLEY CR - CIRCLE HE - HEIGHTS MP - MILEPOST PL - PLACE ST - STREET WA - WAY AV - AVENUE CT - COURT HW - HIGHWAY PK - PARKWAY RD - ROAD TE - TERRACE BL - BOULEVARD DR - DRIVE LA - LANE PI - PIKE SQ - SQUARE TL - TRAIL

LOCATION ROUTE TYPE 1	LOCATION ROUTE NUMBER	LOC PREFIX N,S,E,W	LOCATION ROAD NAME	ROUTE TYPES 1
	21	N	1415 N. 21ST	IR - INTERSTATE ROUTE (INC. TURNPIKE) CR - NUMBERED COUNTY ROUTE US - US ROUTE TR - NUMBERED TOWNSHIP ROUTE SR - STATE ROUTE

DISTANCE FROM REFERENCE	DIR FROM REF N,S,E,W	REFERENCE ROUTE TYPE 1	REFERENCE ROUTE NUMBER	REF PREFIX N,S,E,W	REFERENCE NAME (ROAD, MILEPOST, HOUSE #)	REFERENCE ROAD TYPE 2
20	E				1415 N. 21ST	ST

REFERENCE POINT USED	CRASH LOCATION	LOCATION OF FIRST HARMFUL EVENT
3 1 - INTERSECTION 2 - MILE POST 3 - HOUSE NUMBER	01 01 - NOT AN INTERSECTION 02 - FOUR-WAY INTERSECTION 03 - T-INTERSECTION 04 - Y-INTERSECTION 05 - TRAFFIC CIRCLE/ROUNDBOAT 06 - FIVE-POINT, OR MORE 07 - ON RAMP 08 - OFF RAMP 09 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAILS 99 - UNKNOWN	1 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 9 - UNKNOWN

ROAD CONTOUR	ROAD CONDITIONS	WEATHER
1 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - UNKNOWN	01 PRIMARY SECONDARY	1 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - OTHER/UNKNOWN

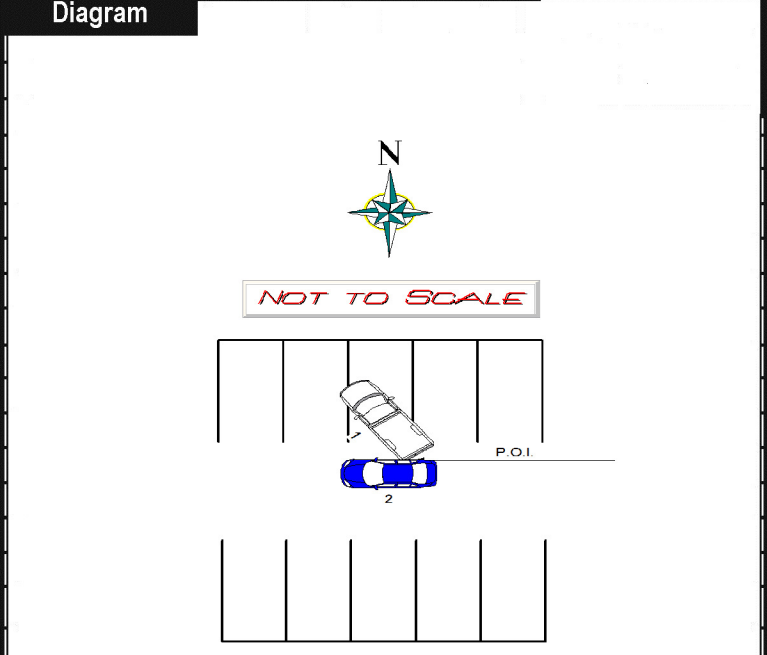
MANNER OF CRASH COLLISION/IMPACT	WEATHER
5 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - UNKNOWN	1 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - OTHER/UNKNOWN

ROAD SURFACE	LIGHT CONDITIONS	SCHOOL BUS RELATED
2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 6 - OTHER	1 PRIMARY SECONDARY 1 - DAYLIGHT 2 - DAWN 3 - DUSK 4 - DARK - LIGHTED ROADWAY 5 - DARK - ROADWAY NOT LIGHTED 6 - DARK - UNKNOWN ROADWAY LIGHTING 7 - GLARE* 8 - OTHER 9 - UNKNOWN	<input type="checkbox"/> SCHOOL BUS RELATED <input type="checkbox"/> YES, SCHOOL BUS DIRECTLY INVOLVED <input type="checkbox"/> YES, SCHOOL BUS INDIRECTLY INVOLVED

WORK ZONE RELATED	TYPE OF WORK ZONE	LOCATION OF CRASH IN WORK ZONE
<input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE) <input type="checkbox"/> LAW ENFORCEMENT PRESENT (VEHICLE ONLY)	<input type="checkbox"/> 1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER	<input type="checkbox"/> 1 - BEFORE THE FIRST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA

NARRATIVE

Unit #1 was backing out of the parking spot. Unit #2 was entering Wendy's. Unit #1 proceeded to back up and strike Unit #2 on the passenger side rear door. Unit #1 then left the scene of the crash. Unit #1 is at fault.



REPORT TAKEN BY	<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)				
DATE CRASH REPORTED	TIME CRASH REPORTED	DISPATCH TIME	ARRIVAL TIME	TIME CLEARED	OTHER INVESTIGATION TIME	TOTAL MINUTES
07142018	1127	1131	1140	1159		32
OFFICER'S NAME *	OFFICER'S BADGE NUMBER	CHECKED BY				
Carter, Adam	45NPD-356					



UNIT

LOCAL REPORT NUMBER

2018-00020792

UNIT NUMBER 01		OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER)		OWNER PHONE NUMBER - INC. AREA CODE (<input type="checkbox"/> SAME AS DRIVER)		DAMAGE SCALE 9	DAMAGED AREA
OWNER ADDRESS: CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER)						1 - NONE	
LP STATE	LICENSE PLATE NUMBER		VEHICLE IDENTIFICATION NUMBER			# OCCUPANTS	2 - MINOR
VEHICLE YEAR	VEHICLE MAKE		VEHICLE MODEL		VEHICLE COLOR	3 - FUNCTIONAL	4 - DISABLING
<input type="checkbox"/> PROOF OF INSURANCE SHOWN	INSURANCE COMPANY		POLICY NUMBER		TOWED BY	9 - UNKNOWN	
CARRIER NAME, ADDRESS, CITY, STATE, ZIP						CARRIER PHONE - INCLUDE AREA CODE	
US DOT	VEHICLE WEIGHT GVWR/GCWR 1 - LESS THAN OR EQUAL TO 10K LBS. 2 - 10,001 TO 26,000 LBS. 3 - MORE THAN 26,000 LBS.		CARGO BODY TYPE <input type="checkbox"/>		TRAFFICWAY DESCRIPTION 5	1 - TWO-WAY, NOT DIVIDED	2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE
HM PLACARD ID NO.	<input type="checkbox"/> HAZARDOUS MATERIAL RELEASED	01 - NO CARGO BODY TYPE/NOT APPLICABLE	02 - BUS/VAN (9-15 SEATS, INC DRIVER)	03 - BUS (16+ SEATS, INC DRIVER)	04 - VEHICLE TOWING ANOTHER VEHICLE	05 - LOGGING	06 - INTERMODAL CONTAINER CHASSIS
HM CLASS NUMBER	07 - CARGO VAN/ENCLOSED BOX	08 - GRAIN, CHIPS, GRAVEL	09 - POLE	10 - CARGO TANK	11 - FLAT BED	12 - DUMP	13 - CONCRETE MIXER
	09 - MOTORCYCLE	10 - MOTORIZED BICYCLE	11 - SNOWMOBILE/ATV	12 - OTHER PASSENGER VEHICLE	13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES	14 - SINGLE UNIT TRUCK; 3+ AXLES	15 - SINGLE UNIT TRUCK / TRAILER
	16 - TRUCK/TRACTOR (BOBTAIL)	17 - TRACTOR/SEMI-TRAILER	18 - TRACTOR/DOUBLE	19 - TRACTOR/TRIPLES	20 - OTHER MED/HEAVY VEHICLE	21 - BUS/VAN (9-15 SEATS, INC DRIVER)	22 - BUS (16+ SEATS, INC DRIVER)
	23 - ANIMAL WITH RIDER	24 - ANIMAL WITH BUGGY, WAGON, SURREY	25 - BICYCLE/PEDACYCLIST	26 - PEDESTRIAN/SKATER	27 - OTHER NON-MOTORIST	<input checked="" type="checkbox"/> HIT / SKIP UNIT	
NON-MOTORIST LOCATION PRIOR TO IMPACT <input type="checkbox"/>		TYPE OF USE <input type="checkbox"/>	UNIT TYPE 99	PASSENGER VEHICLES (LESS THAN 9 PASSENGERS)	MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS	BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER)	
01 - INTERSECTION - MARKED CROSSWALK		1 - PERSONAL	99 - UNKNOWN OR HIT / SKIP	01 - SUB-COMPACT	13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES	21 - BUS/VAN (9-15 SEATS, INC DRIVER)	
02 - INTERSECTION - NO CROSSWALK		2 - COMMERCIAL		02 - COMPACT	14 - SINGLE UNIT TRUCK; 3+ AXLES	22 - BUS (16+ SEATS, INC DRIVER)	
03 - INTERSECTION - OTHER		3 - GOVERNMENT		03 - MID SIZE	15 - SINGLE UNIT TRUCK / TRAILER	NON-MOTORIST	
04 - MIDBLOCK - MARKED CROSSWALK		<input type="checkbox"/> IN EMERGENCY RESPONSE		04 - FULL SIZE	16 - TRUCK/TRACTOR (BOBTAIL)	23 - ANIMAL WITH RIDER	
05 - TRAVEL LANE - OTHER LOCATION				05 - MINIVAN	17 - TRACTOR/SEMI-TRAILER	24 - ANIMAL WITH BUGGY, WAGON, SURREY	
06 - BICYCLE LANE				06 - SPORT UTILITY VEHICLE	18 - TRACTOR/DOUBLE	25 - BICYCLE/PEDACYCLIST	
07 - SHOULDER/ROADSIDE				07 - PICKUP	19 - TRACTOR/TRIPLES	26 - PEDESTRIAN/SKATER	
08 - SIDEWALK				08 - VAN	20 - OTHER MED/HEAVY VEHICLE	27 - OTHER NON-MOTORIST	
09 - MEDIAN/CROSSING ISLAND				09 - MOTORCYCLE			
10 - DRIVEWAY ACCESS				10 - MOTORIZED BICYCLE			
11 - SHARED-USE PATH OR TRAIL				11 - SNOWMOBILE/ATV			
12 - NON-TRAFFICWAY AREA				12 - OTHER PASSENGER VEHICLE			
99 - OTHER/UNKNOWN							
SPECIAL FUNCTION <input type="checkbox"/>	01 - NONE	09 - AMBULANCE	17 - FARM VEHICLE	MOST DAMAGED AREA 99	01 - NONE	08 - LEFT SIDE	99 - UNKNOWN
02 - TAXI	10 - FIRE	18 - FARM EQUIPMENT	18 - FARM EQUIPMENT	IMPACT AREA 99	02 - CENTER FRONT	09 - LEFT FRONT	ACTION 9
03 - RENTAL TRUCK (OVER 10K LBS)	11 - HIGHWAY/MAINTENANCE	19 - MOTORHOME	19 - MOTORHOME	03 - RIGHT FRONT	04 - RIGHT SIDE	10 - TOP AND WINDOWS	1 - NON-CONTACT
04 - BUS - SCHOOL (PUBLIC OR PRIVATE)	12 - MILITARY	20 - GOLF CART	20 - GOLF CART	04 - RIGHT REAR	05 - RIGHT REAR	11 - UNDERCARRIAGE	2 - NON-COLLISION
05 - BUS - TRANSIT	13 - POLICE	21 - TRAIN	21 - TRAIN	05 - RIGHT REAR	06 - REAR CENTER	12 - LOAD/TRAILER	3 - STRIKING
06 - BUS - CHARTER	14 - PUBLIC UTILITY	22 - OTHER (EXPLAIN IN NARRATIVE)	22 - OTHER (EXPLAIN IN NARRATIVE)	06 - REAR CENTER	07 - LEFT REAR	13 - TOTAL(ALL AREAS)	4 - STRUCK
07 - BUS - SHUTTLE	15 - OTHER GOVERNMENT			07 - LEFT REAR	14 - OTHER	14 - OTHER	5 - STRIKING/STRUCK
08 - BUS - OTHER	16 - CONSTRUCTION EQUIP.						9 - UNKNOWN
PRE-CRASH ACTIONS 02	MOTORIST	07 - MAKING U-TURN	13 - NEGOTIATING A CURVE	NON-MOTORIST	15 - ENTERING OR CROSSING SPECIFIED LOCATION	21 - OTHER NON-MOTORIST ACTION	
99 - UNKNOWN	01 - STRAIGHT AHEAD	08 - ENTERING TRAFFIC LANE	14 - OTHER MOTORIST ACTION	16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING	17 - WORKING		
	02 - BACKING	09 - LEAVING TRAFFIC LANE		18 - PUSHING VEHICLE	19 - APPROACHING OR LEAVING VEHICLE		
	03 - CHANGING LANES	10 - PARKED		20 - STANDING			
	04 - OVERTAKING/PASSING	11 - SLOWING OR STOPPED IN TRAFFIC					
	05 - MAKING RIGHT TURN	12 - DRIVERLESS					
	06 - MAKING LEFT TURN						
CONTRIBUTING CIRCUMSTANCES PRIMARY 11	MOTORIST	11 - IMPROPER BACKING		NON-MOTORIST	22 - NONE	VEHICLE DEFECTS <input type="checkbox"/>	01 - TURN SIGNALS
02 - FAILURE TO YIELD	12 - IMPROPER START FROM PARKED POSITION	12 - IMPROPER START FROM PARKED POSITION		23 - IMPROPER CROSSING	23 - IMPROPER CROSSING	02 - HEAD LAMPS	02 - HEAD LAMPS
03 - RAN RED LIGHT	13 - STOPPED OR PARKED ILLEGALLY	13 - STOPPED OR PARKED ILLEGALLY		24 - DARTING	24 - DARTING	03 - TAIL LAMPS	03 - TAIL LAMPS
04 - RAN STOP SIGN	14 - OPERATING VEHICLE IN NEGLIGENCE MANNER	14 - OPERATING VEHICLE IN NEGLIGENCE MANNER		25 - LYING AND/OR ILLEGALLY IN ROADWAY	25 - LYING AND/OR ILLEGALLY IN ROADWAY	04 - BRAKES	04 - BRAKES
05 - EXCEEDED SPEED LIMIT	15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS)	15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS)		26 - FAILURE TO YIELD RIGHT OF WAY	26 - FAILURE TO YIELD RIGHT OF WAY	05 - STEERING	05 - STEERING
06 - UNSAFE SPEED	16 - WRONG SIDE/WRONG WAY	16 - WRONG SIDE/WRONG WAY		27 - NOT VISIBLE (DARK CLOTHING)	27 - NOT VISIBLE (DARK CLOTHING)	06 - TIRE BLOWOUT	06 - TIRE BLOWOUT
07 - IMPROPER TURN	17 - FAILURE TO CONTROL	17 - FAILURE TO CONTROL		28 - INATTENTIVE	28 - INATTENTIVE	07 - WORN OR SLICK TIRES	07 - WORN OR SLICK TIRES
08 - LEFT OF CENTER	18 - VISION OBSTRUCTION	18 - VISION OBSTRUCTION		29 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER	29 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER	08 - TRAILER EQUIPMENT DEFECTIVE	08 - TRAILER EQUIPMENT DEFECTIVE
99 - UNKNOWN	19 - OPERATING DEFECTIVE EQUIPMENT	19 - OPERATING DEFECTIVE EQUIPMENT		30 - WRONG SIDE OF THE ROAD	30 - WRONG SIDE OF THE ROAD	09 - MOTOR TROUBLE	09 - MOTOR TROUBLE
	20 - IMPROPER LANE CHANGE /PASSING/OFF ROAD	20 - IMPROPER LANE CHANGE /PASSING/OFF ROAD		31 - OTHER NON-MOTORIST ACTION	31 - OTHER NON-MOTORIST ACTION	10 - DISABLED FROM PRIOR ACCIDENT	10 - DISABLED FROM PRIOR ACCIDENT
						11 - OTHER DEFECTS	11 - OTHER DEFECTS
SEQUENCE OF EVENTS	NON-COLLISION EVENTS	01 - OVERTURN/ROLLOVER	06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC)	10 - CROSS MEDIAN OR SUPPORT	11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL		
1 20	02 - FIRE/EXPLOSION	02 - FIRE/EXPLOSION	07 - SEPARATION OF UNITS	12 - DOWNHILL RUNAWAY	12 - DOWNHILL RUNAWAY		
2 <input type="checkbox"/>	03 - IMMERSION	03 - IMMERSION	08 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION	13 - OTHER NON-COLLISION		
3 <input type="checkbox"/>	04 - JACKKNIFE	04 - JACKKNIFE	09 - RAN OFF ROAD LEFT				
4 <input type="checkbox"/>	05 - CARGO/EQUIPMENT LOSS OR SHIFT	05 - CARGO/EQUIPMENT LOSS OR SHIFT					
5 <input type="checkbox"/>							
6 <input type="checkbox"/>							
FIRST HARMFUL EVENT 1	MOST HARMFUL EVENT 1	99 - UNKNOWN					
COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED	COLLISION WITH FIXED OBJECT	14 - PEDESTRIAN	25 - IMPACT ATTENUATOR/CRASH CUSHION	33 - MEDIAN CABLE BARRIER	41 - OTHER POST, POLE OR SUPPORT	48 - TREE	
15 - PEDALCYCLE	26 - BRIDGE OVERHEAD STRUCTURE	21 - PARKED MOTOR VEHICLE	27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	42 - CULVERT	49 - FIRE HYDRANT	
16 - RAILWAY VEHICLE (TRAIN, ENGINE)	28 - BRIDGE PARAPET	22 - WORK ZONE MAINTENANCE EQUIPMENT	29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT	
17 - ANIMAL - FARM	30 - GUARDRAIL FACE	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE	31 - GUARDRAIL END	36 - MEDIAN OTHER BARRIER	44 - DITCH	51 - WALL, BUILDING, TUNNEL	
18 - ANIMAL - DEER	32 - PORTABLE BARRIER	24 - OTHER MOVABLE OBJECT	33 - MEDIAN CABLE BARRIER	37 - TRAFFIC SIGN POST	45 - EMBANKMENT	52 - OTHER FIXED OBJECT	
19 - ANIMAL - OTHER			34 - MEDIAN GUARDRAIL BARRIER	38 - OVERHEAD SIGN POST	46 - FENCE		
20 - MOTOR VEHICLE IN TRANSPORT			35 - MEDIAN CONCRETE BARRIER	39 - LIGHT/LUMINARIES SUPPORT	47 - MAILBOX		
			36 - MEDIAN OTHER BARRIER	40 - UTILITY POLE			
UNIT SPEED 4	POSTED SPEED 10	TRAFFIC CONTROL 01	01 - NO CONTROLS	07 - RAILROAD CROSSBUCKS	13 - CROSSWALK LINES	UNIT DIRECTION FROM N TO S	1 - NORTH
<input type="checkbox"/> STATED <input checked="" type="checkbox"/> ESTIMATED		02 - STOP SIGN	02 - STOP SIGN	08 - RAILROAD FLASHERS	14 - WALK/DON'T WALK	2 - SOUTH	5 - NORTHEAST
		03 - YIELD SIGN	03 - YIELD SIGN	09 - RAILROAD GATES	15 - OTHER	3 - EAST	6 - NORTHWEST
		04 - TRAFFIC SIGNAL	04 - TRAFFIC SIGNAL	10 - CONSTRUCTION BARRICADE	16 - NOT REPORTED	4 - WEST	7 - SOUTHEAST
		05 - TRAFFIC FLASHERS	05 - TRAFFIC FLASHERS	11 - PERSON (FLAGGER, OFFICER)		8 - SOUTHWEST	9 - UNKNOWN
		06 - SCHOOL ZONE	06 - SCHOOL ZONE	12 - PAVEMENT MARKINGS			



UNIT

LOCAL REPORT NUMBER

2018-00020792

UNIT NUMBER 02		OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER) BROWN, STUART, S		OWNER PHONE NUMBER - INC. AREA CODE (<input checked="" type="checkbox"/> SAME AS DRIVER) 740-403-9278		DAMAGE SCALE 2		DAMAGED AREA 			
OWNER ADDRESS: CITY, STATE, ZIP (<input checked="" type="checkbox"/> SAME AS DRIVER) 1404 HOWELL DR ,OH 43055											
LP STATE OH		LICENSE PLATE NUMBER GU5650		VEHICLE IDENTIFICATION NUMBER 5NPDH4AE0GH749342			# OCCUPANTS 01				
VEHICLE YEAR 2016		VEHICLE MAKE Kia		VEHICLE MODEL SPECTRA		VEHICLE COLOR					
<input checked="" type="checkbox"/> PROOF OF INSURANCE SHOWN		INSURANCE COMPANY USAA General		POLICY NUMBER 038323515G		TOWED BY					
CARRIER NAME, ADDRESS, CITY, STATE, ZIP								CARRIER PHONE- INCLUDE AREA CODE			
US DOT		VEHICLE WEIGHT GVWR/GCWR 1 - LESS THAN OR EQUAL TO 10K LBS. 2 - 10,001 TO 26,000 LBS. 3 - MORE THAN 26,000 LBS.		CARGO BODY TYPE <input type="checkbox"/> 01 - No CARGO BODY TYPE/NOT APPLICABLE <input type="checkbox"/> 02 - BUS/VAN (9-15 SEATS, INC DRIVER) <input type="checkbox"/> 03 - BUS (16+ SEATS, INC DRIVER) <input type="checkbox"/> 04 - VEHICLE TOWING ANOTHER VEHICLE <input type="checkbox"/> 05 - LOGGING <input type="checkbox"/> 06 - INTERMODAL CONTAINER CHASSIS <input type="checkbox"/> 07 - CARGO VAN/ENCLOSED BOX <input type="checkbox"/> 08 - GRAIN, CHIPS, GRAVEL		TRAFFICWAY DESCRIPTION 5 1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS >4 FT) MEDIAN 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY		<input type="checkbox"/> HIT / SKIP UNIT			
HM PLACARD ID No.		<input type="checkbox"/> HAZARDOUS MATERIAL RELEASED		PASSENGER VEHICLES (LESS THAN 9 PASSENGERS) 01 - SUB-COMPACT 02 - COMPACT 03 - MID SIZE 04 - FULL SIZE 05 - MINIVAN 06 - SPORT UTILITY VEHICLE 07 - PICKUP 08 - VAN 09 - MOTORCYCLE 10 - MOTORIZED BICYCLE 11 - SNOWMOBILE/ATV 12 - OTHER PASSENGER VEHICLE		MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS 13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES 14 - SINGLE UNIT TRUCK; 3+ AXLES 15 - SINGLE UNIT TRUCK / TRAILER 16 - TRUCK/TRACTOR (BOBTAIL) 17 - TRACTOR/SEMI-TRAILER 18 - TRACTOR/DOUBLE 19 - TRACTOR/TRIPLES 20 - OTHER MED/HEAVY VEHICLE		BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER) 21 - BUS/VAN (9-15 SEATS, INC DRIVER) 22 - BUS (16+ SEATS, INC DRIVER) NON-MOTORIST 23 - ANIMAL WITH RIDER 24 - ANIMAL WITH BUGGY, WAGON, SURREY 25 - BICYCLE/PEDACYCLIST 26 - PEDESTRIAN/SKATER 27 - OTHER NON-MOTORIST			
NON-MOTORIST LOCATION PRIOR TO IMPACT <input type="checkbox"/> 01 - INTERSECTION - MARKED CROSSWALK <input type="checkbox"/> 02 - INTERSECTION - NO CROSSWALK <input type="checkbox"/> 03 - INTERSECTION - OTHER <input type="checkbox"/> 04 - MIDBLOCK - MARKED CROSSWALK <input type="checkbox"/> 05 - TRAVEL LANE - OTHER LOCATION <input type="checkbox"/> 06 - BICYCLE LANE <input type="checkbox"/> 07 - SHOULDER/ROADSIDE <input type="checkbox"/> 08 - SIDEWALK <input type="checkbox"/> 09 - MEDIAN/CROSSING ISLAND <input type="checkbox"/> 10 - DRIVEWAY ACCESS <input type="checkbox"/> 11 - SHARED-USE PATH OR TRAIL <input type="checkbox"/> 12 - NON-TRAFFICWAY AREA <input type="checkbox"/> 99 - OTHER/UNKNOWN		TYPE OF USE 1 1 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		UNIT TYPE 01 99 - UNKNOWN OR HIT / SKIP		<input type="checkbox"/> HAS HM PLACARD					
SPECIAL FUNCTION 01 01 - NONE 02 - TAXI 03 - RENTAL TRUCK (OVER 10K LBS) 04 - BUS - SCHOOL (PUBLIC OR PRIVATE) 05 - BUS - TRANSIT 06 - BUS - CHARTER 07 - BUS - SHUTTLE 08 - BUS - OTHER		09 - AMBULANCE 10 - FIRE 11 - HIGHWAY/MAINTENANCE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - OTHER GOVERNMENT 16 - CONSTRUCTION EQUIP.		17 - FARM VEHICLE 18 - FARM EQUIPMENT 19 - MOTORHOME 20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NARRATIVE)		MOST DAMAGED AREA 04 01 - NONE 02 - CENTER FRONT 03 - RIGHT FRONT 04 - RIGHT SIDE 05 - RIGHT REAR 06 - REAR CENTER 07 - LEFT REAR		08 - LEFT SIDE 09 - LEFT FRONT 10 - TOP AND WINDOWS 11 - UNDERCARRIAGE 12 - LOAD/TRAILER 13 - TOTAL(ALL AREAS) 14 - OTHER		ACTION 4 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN	
PRE-CRASH ACTIONS 01 MOTORIST 01 - STRAIGHT AHEAD 02 - BACKING 03 - CHANGING LANES 04 - OVERTAKING/PASSING 05 - MAKING RIGHT TURN 06 - MAKING LEFT TURN 99 - UNKNOWN											
07 - MAKING U-TURN 08 - ENTERING TRAFFIC LANE 09 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS											
13 - NEGOTIATING A CURVE 14 - OTHER MOTORIST ACTION											
NON-MOTORIST 15 - ENTERING OR CROSSING SPECIFIED LOCATION 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING 17 - WORKING 18 - PUSHING VEHICLE 19 - APPROACHING OR LEAVING VEHICLE 20 - STANDING 21 - OTHER NON-MOTORIST ACTION											
CONTRIBUTING CIRCUMSTANCES PRIMARY 01 MOTORIST 01 - NONE 02 - FAILURE TO YIELD 03 - RAN RED LIGHT 04 - RAN STOP SIGN 05 - EXCEEDED SPEED LIMIT 06 - UNSAFE SPEED 07 - IMPROPER TURN 08 - LEFT OF CENTER 09 - FOLLOWED TOO CLOSELY/ACDA 10 - IMPROPER LANE CHANGE /PASSING/OFF ROAD 99 - UNKNOWN											
NON-MOTORIST 11 - IMPROPER BACKING 12 - IMPROPER START FROM PARKED POSITION 13 - STOPPED OR PARKED ILLEGALLY 14 - OPERATING VEHICLE IN NEGLIGENCE MANNER 15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS) 16 - WRONG SIDE/WRONG WAY 17 - FAILURE TO CONTROL 18 - VISION OBSTRUCTION 19 - OPERATING DEFECTIVE EQUIPMENT 20 - LOAD SHIFTING/FALLING/SPILLING 21 - OTHER IMPROPER ACTION											
VEHICLE DEFECTS <input type="checkbox"/> 01 - TURN SIGNALS 02 - HEAD LAMPS 03 - TAIL LAMPS 04 - BRAKES 05 - STEERING 06 - TIRE BLOWOUT 07 - WORN OR SLICK TIRES 08 - TRAILER EQUIPMENT DEFECTIVE 09 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 11 - OTHER DEFECTS											
SEQUENCE OF EVENTS 1 20 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1 99 - UNKNOWN											
NON-COLLISION EVENTS 01 - OVERTURN/ROLLOVER 02 - FIRE/EXPLOSION 03 - IMMERSION 04 - JACKKNIFE 05 - CARGO/EQUIPMENT LOSS OR SHIFT 06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC) 07 - SEPARATION OF UNITS 08 - RAN OFF ROAD RIGHT 09 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN OR SUPPORT 11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION											
COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE (TRAIN, ENGINE) 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT 25 - IMPACT ATTENUATOR/CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL, BUILDING, TUNNEL 52 - OTHER FIXED OBJECT											
UNIT SPEED 4		POSTED SPEED 10		TRAFFIC CONTROL 01 01 - NO CONTROLS 02 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGNAL 05 - TRAFFIC FLASHERS 06 - SCHOOL ZONE 07 - RAILROAD CROSSBUCKS 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BARRICADE 11 - PERSON (FLAGGER, OFFICER) 12 - PAVEMENT MARKINGS 13 - CROSSWALK LINES 14 - WALK/DON'T WALK 15 - OTHER 16 - NOT REPORTED		UNIT DIRECTION FROM E TO W 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN					



MOTORIST / Non-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER

2018-00020792

Motorist/Non-Motorist

Motorist/Non-Motorist

OCCUPANT

OCCUPANT

UNIT NUMBER 01	NAME: LAST, FIRST, MIDDLE UNKNOWN, 01, 2018-00020792	DATE OF BIRTH	AGE	GENDER F - FEMALE M - MALE
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ADDRESS, CITY, STATE, ZIP			CONTACT PHONE- INCLUDE AREA CODE	
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INJURIES 1	INJURED TAKEN BY 1	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION 01	AIR BAG USAGE	EJECTION	TRAPPED		
OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	No <input type="checkbox"/> VALID OL	M/C <input type="checkbox"/> END.	CONDITION	ALCOHOL/DRUG SUSPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST STATUS	DRUG TEST TYPE
OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)		OFFENSE DESCRIPTION			CITATION NUMBER		HANDS-FREE <input type="checkbox"/> DEVICE USED		DRIVER DISTRACTED BY 1		

UNIT NUMBER 02	NAME: LAST, FIRST, MIDDLE BROWN, GRACE, KATHRYN	DATE OF BIRTH 03012000	AGE 018	GENDER F - FEMALE M - MALE
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ADDRESS, CITY, STATE, ZIP 1404 N HOWELL DR ,OH 43055			CONTACT PHONE- INCLUDE AREA CODE 740-403-9278	
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INJURIES 1	INJURED TAKEN BY 1	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER TZ965301	OL CLASS 4	No <input type="checkbox"/> VALID OL	M/C <input type="checkbox"/> END.	CONDITION 1	ALCOHOL/DRUG SUSPECTED 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE	DRUG TEST STATUS 1	DRUG TEST TYPE 1
OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)		OFFENSE DESCRIPTION			CITATION NUMBER		HANDS-FREE <input type="checkbox"/> DEVICE USED		DRIVER DISTRACTED BY 1		

INJURIES 1 - NO INJURY / NONE REPORTED 2 - POSSIBLE 3 - NON-INCAPACITATING 4 - INCAPACITATING 5 - FATAL	INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 4 - OTHER 9 - UNKNOWN	SAFETY EQUIPMENT USED MOTORIST 01 - NONE USED - VEHICLE OCCUPANT 02 - SHOULDER BELT ONLY USED 03 - LAP BELT ONLY USED 04 - SHOULDER AND LAP BELT USED	99 - UNKNOWN SAFETY EQUIPMENT NON-MOTORIST 05 - CHILD RESTRAINT SYSTEM-FORWARD FACING 06 - CHILD RESTRAINT SYSTEM- REAR FACING 07 - BOOSTER SEAT 08 - HELMET USED	Non-Motorist 09 - NONE USED 10 - HELMET USED 11 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC) 12 - REFLECTIVE CLOTHING 13 - LIGHTING 14 - OTHER
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SEATING POSITION 01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 02 - FRONT - MIDDLE 03 - FRONT - RIGHT SIDE 04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 05 - SECOND - MIDDLE 06 - SECOND - RIGHT SIDE	07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 08 - THIRD - MIDDLE 09 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF CAB (TRUCK) 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP)	12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 16 - OTHER 99 - UNKNOWN	AIR BAG USAGE 1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN
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EJECTION 1 - NOT EJECTED 2 - TOTALLY EJECTED 3 - PARTIALLY EJECTED 4 - NOT APPLICABLE	TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - EXTRICATED BY NON-MECHANICAL MEANS	OPERATOR LICENSE CLASS 1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO'S "D") 5 - MC/MOPED ONLY	CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS	5 - FELL ASLEEP, FAINTED, FATIGUED 6 - UNDER THE INFLUENCE OF MEDICATIONS, DRUGS, ALCOHOL 7 - OTHER	ALCOHOL/DRUG SUSPECTED 1 - NONE 2 - YES - ALCOHOL SUSPECTED 3 - YES - HBD NOT IMPAIRED 4 - YES - DRUGS SUSPECTED 5 - YES - ALCOHOL AND DRUGS SUSPECTED
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ALCOHOL TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	ALCOHOL TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	DRUG TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	DRIVER DISTRACTED BY 1 - NO DISTRACTION REPORTED 2 - PHONE 3 - TEXTING/E-MAILING 4 - ELECTRONIC COMMUNICATION DEVICE 5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD) 6 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION
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UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER F - FEMALE M - MALE
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INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER F - FEMALE M - MALE
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INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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