

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER\*

22-63528

PHOTOS TAKEN  
 SECONDARY CRASH  
 OH-2  OH-3  
 OH-1P  OTHER  
 PRIVATE PROPERTY

LOCAL INFORMATION  
 REPORTING AGENCY NAME\*  
 JACKSON TWP POLICE DEPARTME 07,624 NCIC\*

HIT/SKIP  
 1 - SOLVED  
 2 - UNSOLVED  
 NUMBER OF UNITS  
02  
 UNIT IN ERROR  
02 98 - ANIMAL  
 99 - UNKNOWN

COUNTY\* 76 LOCALITY\* 3 LOCATION: CITY, VILLAGE, TOWNSHIP\*  
 Jackson (Township of)

CRASH DATE / TIME\*  
 12202022 1901  
 CRASH SEVERITY  
5  
 1 - FATAL  
 2 - SERIOUS INJURY SUSPECTED  
 3 - MINOR INJURY SUSPECTED  
 4 - INJURY POSSIBLE  
 5 - PROPERTY DAMAGE ONLY

LOCATION  
 ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH  
 2 - SOUTH  
 3 - EAST  
 4 - WEST  
 LOCATION ROAD NAME  
 PORTAGE ROAD TYPE  
ST

LATITUDE DECIMAL DEGREES  
 LONGITUDE DECIMAL DEGREES

REFERENCE  
 ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH  
 2 - SOUTH  
 3 - EAST  
 4 - WEST  
 REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)  
 4450 ROAD TYPE

REFERENCE POINT  
3  
 1 - INTERSECTION  
 2 - MILE POST  
 3 - HOUSE #  
 DIRECTION FROM REFERENCE  
 1 - NORTH  
 2 - SOUTH  
 3 - EAST  
 4 - 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 HW - HIGHWAY RD - ROAD  
 AV - AVENUE LA - LANE SQ - SQUARE  
 BL - BOULEVARD MP - MILEPOST ST - STREET  
 CR - CIRCLE OV - OVAL TE - TERRACE  
 CT - COURT PK - PARKWAY TL - TRAIL  
 DR - DRIVE PI - PIKE WA - WAY  
 HE - HEIGHTS PL - PLACE

INTERSECTION RELATED  
 WITHIN INTERSECTION OR ON APPROACH  
 WITHIN INTERCHANGE AREA NUMBER OF APPROACHES  
 ROADWAY  
 ROADWAY DIVIDED

DISTANCE FROM REFERENCE  
 DISTANCE UNIT OF MEASURE  
 1 - MILES  
 2 - FEET  
 3 - YARDS

LOCATION OF FIRST HARMFUL EVENT  
06  
 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  
 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

MANNER OF CRASH COLLISION/IMPACT  
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 - OTHER / UNKNOWN

DIRECTION OF TRAVEL  
 1 - NORTH  
 2 - SOUTH  
 3 - EAST  
 4 - 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

WORK ZONE RELATED  
 WORKERS PRESENT  
 LAW ENFORCEMENT PRESENT  
 ACTIVE SCHOOL ZONE

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 - STRAIGHT LEVEL  
 2 - STRAIGHT GRADE  
 3 - CURVE LEVEL  
 4 - CURVE GRADE  
 9 - OTHER/UNKNOWN

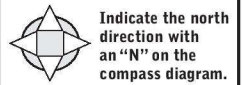
CONDITIONS  
 1 - DRY  
 2 - WET  
 3 - SNOW  
 4 - ICE  
 5 - SAND, MUD, DIRT, OIL, GRAVEL  
 6 - WATER (STANDING, MOVING)  
 7 - SLUSH  
 9 - OTHER/UNKNOWN

SURFACE  
 1 - CONCRETE  
 2 - BLACKTOP, BITUMINOUS, ASPHALT  
 3 - BRICK/BLOCK  
 4 - SLAG, GRAVEL, STONE  
 5 - DIRT  
 9 - OTHER/UNKNOWN

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  
 6 - SNOW  
 7 - SEVERE CROSSWINDS  
 8 - BLOWING SAND, SOIL, DIRT, SNOW  
 9 - FREEZING RAIN OR FREEZING DRIZZLE  
 99 - OTHER / UNKNOWN

NARRATIVE  
 UNIT ONE WAS PARKED REAR IN FACING NORTH. UNIT TWO WAS BACKING INTO THE SPOT TO THE WEST OF UNIT ONE. UNIT TWO'S TRAILER STRUCK UNIT ONE. UNIT TWO IS AT FAULT.  
 MD



CRASH REPORTED DATE / TIME: 12202022 1901  
 DISPATCH DATE / TIME: 12202022 1902  
 ARRIVAL DATE / TIME: 12202022 1905  
 SCENE CLEARED DATE / TIME: 12202022 1931  
 REPORT TAKEN BY:  POLICE AGENCY  
 MOTORIST  
 SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)  
 TOTAL TIME ROADWAY CLOSED: 0  
 OTHER INVESTIGATION TIME: 0  
 TOTAL MINUTES: 29  
 OFFICER'S NAME\*: GRIMMETT, WILLIAM  
 OFFICER'S BADGE NUMBER\*: 9 2  
 CHECKED BY OFFICER'S NAME\*: JOHNSON, STEVEN  
 CHECKED BY OFFICER'S BADGE NUMBER\*: 2 2

**OWNER**

UNIT # **01** OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) **T.T.I. INC** OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER)

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)  
**PO BOX 31 EDEN WI 53019**

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**DAMAGE**

**DAMAGE SCALE**

**3** 1 - NONE 3 - FUNCTIONAL DAMAGE  
2 - MINOR DAMAGE 4 - DISABLING DAMAGE  
9 - UNKNOWN

**VEHICLE**

LP STATE **WI** LICENSE PLATE # **T94389X** VEHICLE IDENTIFICATION # \_\_\_\_\_ VEHICLE YEAR **2020** VEHICLE MAKE **PTR**

INSURANCE VERIFIED \_\_\_\_\_ INSURANCE COMPANY **RLI INSURANCE CO** INSURANCE POLICY # \_\_\_\_\_ COLOR **BLU** VEHICLE MODEL **TRUCK**

TYPE OF USE: COMMERCIAL \_\_\_\_\_ GOVERNMENT \_\_\_\_\_ IN EMERGENCY RESPONSE \_\_\_\_\_ US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME \_\_\_\_\_

INTERLOCK DEVICE EQUIPPED \_\_\_\_\_ HIT/SKIP UNIT \_\_\_\_\_ #OCCUPANTS **01** VEHICLE WEIGHT GVWR/GCWR **3** HAZARDOUS MATERIAL: MATERIAL RELEASED \_\_\_\_\_ CLASS # \_\_\_\_\_ PLACARD ID # \_\_\_\_\_

UNIT TYPE **15** 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER  
2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)  
3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST  
4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE  
5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN  
6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP

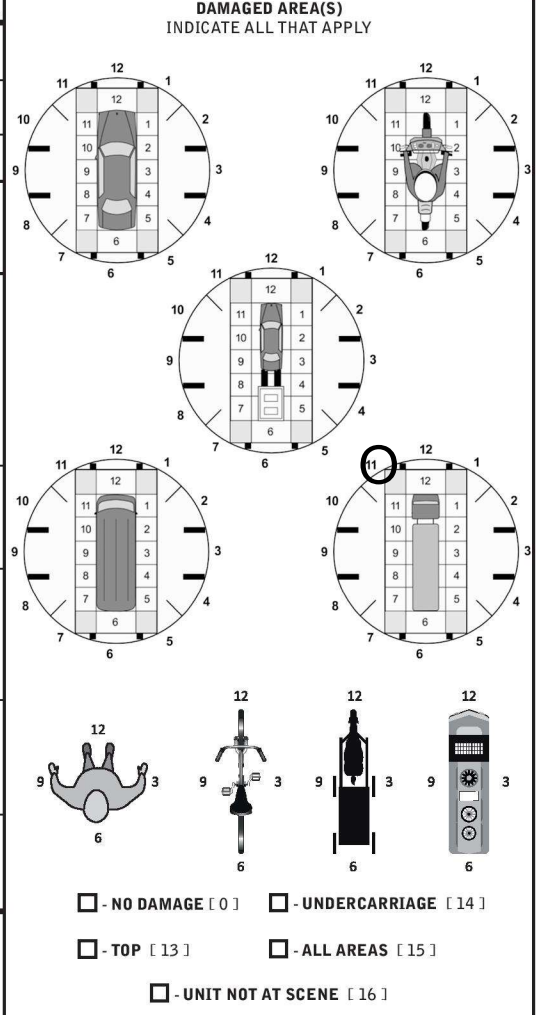
# OF TRAILING UNITS \_\_\_\_\_

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN  
1 - YES 2 - NO 9 - OTHER / UNKNOWN 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 5 - FULL AUTOMATION

SPECIAL FUNCTION: 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER  
2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN  
3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL  
4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING  
5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL

CARGO BODY TYPE: 1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER  
2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10 - FLAT BED 13 - AUTO TRANSPORTER  
7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN

VEHICLE DEFECTS: 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN  
2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT  
3 - TAIL LAMPS 6 - TIRE BLOWOUT



**NON-MOTORIST LOCATION AT IMPACT**

**4** 1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE  
2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDDLEBLOCK - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN  
5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS

**10** 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE  
2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING  
3 - STRIKING 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST  
4 - STRUCK 4 - OVERTAKING/PASSING 10 - PARKED 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE  
5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN  
9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS

**INITIAL POINT OF CONTACT**

**11** 0 - NO DAMAGE 14 - UNDERCARRIAGE  
1 - 12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
99 - UNKNOWN  
13 - TOP

**CONTRIBUTING CIRCUMSTANCES**

**01** 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY  
2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE  
3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY  
4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION  
5 - UNSAFE SPEED 11 - DROVE OFF ROAD 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY  
6 - IMPROPER TURN 12 - IMPROPER BACKING

**TRAFFIC**

**TRAFFICWAY FLOW** 1 - ONE-WAY 2 - TWO-WAY

**TRAFFIC CONTROL** 1 - ROUNDABOUT 4 - STOP SIGN  
2 - SIGNAL 5 - YIELD SIGN  
3 - FLASHER 6 - NO CONTROL

**# OF THROUGH LANES ON ROAD**

**RAIL GRADE CROSSING** 1 - NOT INVOLVED  
2 - INVOLVED-ACTIVE CROSSING  
3 - INVOLVED-PASSIVE CROSSING

**SEQUENCE OF EVENTS**

**20** 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT  
2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE  
3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT  
4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 20 - MOTOR VEHICLE IN TRANSPORT  
5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE

**UNIT / NON-MOTORIST DIRECTION**

FROM **2** TO **1**

1 - NORTH 5 - NORTHEAST  
2 - SOUTH 6 - NORTHWEST  
3 - EAST 7 - SOUTHEAST  
4 - WEST 8 - SOUTHWEST  
9 - OTHER / UNKNOWN

**COLLISION WITH FIXED OBJECT - STRUCK**

25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT  
26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL  
27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING  
28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL  
29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT  
30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 99 - OTHER / UNKNOWN  
49 - FIRE HYDRANT

**1** FIRST HARMFUL EVENT **1** MOST HARMFUL EVENT

**UNIT SPEED** **000**

**DETECTED SPEED** 1 - STATED / ESTIMATED SPEED  
2 - CALCULATED / EDR  
3 - UNDETERMINED

**POSTED SPEED** **00**

**OWNER**

UNIT # **02** OWNER NAME: LAST, FIRST, MIDDLE (  SAME AS DRIVER )  
**SAFE TRUCKING INC**

OWNER ADDRESS: STREET, CITY, STATE, ZIP (  SAME AS DRIVER )

OWNER PHONE: INCLUDE AREA CODE (  SAME AS DRIVER )

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**VEHICLE**

LP STATE **OH** LICENSE PLATE # **PWU9265** VEHICLE IDENTIFICATION # \_\_\_\_\_ VEHICLE YEAR **2017** VEHICLE MAKE **VOLV**

INSURANCE VERIFIED INSURANCE COMPANY **MARQUEE INSURANCE** INSURANCE POLICY # \_\_\_\_\_ COLOR **WHI** VEHICLE MODEL **OTH**

COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE TYPE OF USE US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME

INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT #OCCUPANTS **01** VEHICLE WEIGHT GVWR/GCWR **3** HAZARDOUS MATERIAL  MATERIAL RELEASED  PLACARD CLASS # \_\_\_\_\_ PLACARD ID # \_\_\_\_\_

**15** UNIT TYPE 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER  
2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)  
3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST  
4 - PICK UP 10 - MOPEL OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE  
5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN  
6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP

**0** # OF TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN  
1 - YES 2 - NO 9 - OTHER / UNKNOWN 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 2 - PARTIAL AUTOMATION

**SPECIAL FUNCTION**  
1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER  
2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN  
3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL  
4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING  
5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL

**CARGO BODY TYPE**  
1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER  
2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10 - FLAT BED 13 - AUTO TRANSPORTER  
7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN

**VEHICLE DEFECTS**  
1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN  
2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT  
3 - TAIL LAMPS 6 - TIRE BLOWOUT

**NON-MOTORIST LOCATION AT IMPACT**  
1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE  
2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDDLEBLOCK - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 13 - AUTO TRANSPORTER  
5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS 99 - OTHER / UNKNOWN

**ACTION** **02** PRE-CRASH ACTIONS  
1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE  
2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING  
3 - STRIKING 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST  
4 - STRUCK 4 - OVERTAKING/PASSING 10 - PARKED 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE  
5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN  
9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS

**CONTRIBUTING CIRCUMSTANCES** **12**  
1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY  
2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE  
3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY  
4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION  
5 - UNSAFE SPEED 11 - DROVE OFF ROAD  
6 - IMPROPER TURN 12 - IMPROPER BACKING

**SEQUENCE OF EVENTS** **21**

1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT  
2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE  
3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT  
4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT  
5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE

**COLLISION WITH FIXED OBJECT - STRUCK**

25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT  
26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL  
27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING  
28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL  
29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT  
30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 99 - OTHER / UNKNOWN  
49 - FIRE HYDRANT

**FIRST HARMFUL EVENT** **1** **MOST HARMFUL EVENT** **1**

**DAMAGE**

**DAMAGE SCALE**  
**3** 1 - NONE 3 - FUNCTIONAL DAMAGE  
2 - MINOR DAMAGE 4 - DISABLING DAMAGE  
9 - UNKNOWN

**DAMAGED AREA(S)**  
INDICATE ALL THAT APPLY

NO DAMAGE [ 0 ]  UNDERCARRIAGE [ 14 ]  
 TOP [ 13 ]  ALL AREAS [ 15 ]  
 UNIT NOT AT SCENE [ 16 ]

**INITIAL POINT OF CONTACT**  
**7** 0 - NO DAMAGE 14 - UNDERCARRIAGE  
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
99 - UNKNOWN  
13 - TOP

**TRAFFIC**

**TRAFFICWAY FLOW**  
1 - ONE-WAY  
2 - TWO-WAY

**TRAFFIC CONTROL**  
1 - ROUNDABOUT 4 - STOP SIGN  
2 - SIGNAL 5 - YIELD SIGN  
3 - FLASHER 6 - NO CONTROL

**# OF THROUGH LANES ON ROAD**

**RAIL GRADE CROSSING**  
1 - NOT INVOLVED  
2 - INVOLVED-ACTIVE CROSSING  
3 - INVOLVED-PASSIVE CROSSING

**UNIT / NON-MOTORIST DIRECTION**

FROM **2** TO **1**

1 - NORTH 5 - NORTHEAST  
2 - SOUTH 6 - NORTHWEST  
3 - EAST 7 - SOUTHEAST  
4 - WEST 8 - SOUTHWEST  
9 - OTHER / UNKNOWN

**UNIT SPEED**  
**000**

**POSTED SPEED**  
**00**

**DETECTED SPEED**  
1 - STATED / ESTIMATED SPEED  
2 - CALCULATED / EDR  
3 - UNDETERMINED

# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
**22-63528**

|                                   |                                |                                   |  |  |
|-----------------------------------|--------------------------------|-----------------------------------|--|--|
| <b>UNIT #</b>                     | NAME: LAST, FIRST, MIDDLE      | DATE OF BIRTH                     | AGE  | GENDER   |
| <b>01</b>                         | PARKED, UNOCCUPIED             |                                   |  | <b>N</b>   |
| ADDRESS: STREET, CITY, STATE, ZIP |                                | CONTACT PHONE - INCLUDE AREA CODE |  |  |
| <b>INJURIES</b>                   | <b>INJURED TAKEN BY</b>        | <b>EMS AGENCY (NAME)</b>          | <b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> | <b>SAFETY EQUIPMENT USED</b>   |
|                                   |                                |                                   |  | <input type="checkbox"/> DOT-Compliant MC HELMET   |
| <b>OL STATE</b>                   | <b>OPERATOR LICENSE NUMBER</b> | <b>OFFENSE CHARGED</b>            | <b>LOCAL CODE</b>                                      | <b>OFFENSE DESCRIPTION</b>   |
|                                   |                                |                                   | <input type="checkbox"/>                               |  |
| <b>OL CLASS</b>                   | <b>ENDORSEMENT</b>             | <b>RESTRICTION</b> SELECT UP TO 3 | <b>DRIVER DISTRACTED BY</b>                            | <b>ALCOHOL / DRUG SUSPECTED</b>  |
|                                   |                                |                                   |  | <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA<br><input type="checkbox"/> OTHER DRUG |
|                                   |                                | <b>CONDITION</b>                  | <b>ALCOHOL TEST</b>                                    |  |
|                                   |                                |                                   | <b>STATUS</b> <b>TYPE</b> <b>VALUE</b>                 |  |
|                                   |                                |                                   | <b>STATUS</b> <b>TYPE</b> <b>RESULT</b> SELECT UP TO 4 |  |

|   |                                |                                   |  |  |
|---|--------------------------------|-----------------------------------|--|--|
| <b>UNIT #</b>                           | NAME: LAST, FIRST, MIDDLE      | DATE OF BIRTH                     | AGE  | GENDER   |
| <b>02</b>                               | BONYADI, GHULAM ABBAS          | 01011965                          | 57   | <b>M</b>   |
| ADDRESS: STREET, CITY, STATE, ZIP       |                                | CONTACT PHONE - INCLUDE AREA CODE |  |  |
| 19824 KYLEMORE DR STRONGSVILLE OH 44149 |                                |                                   |  |  |
| <b>INJURIES</b>                         | <b>INJURED TAKEN BY</b>        | <b>EMS AGENCY (NAME)</b>          | <b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> | <b>SAFETY EQUIPMENT USED</b>   |
|   |                                |                                   |  | 99 <input type="checkbox"/> DOT-Compliant MC HELMET  |
| <b>OL STATE</b>                         | <b>OPERATOR LICENSE NUMBER</b> | <b>OFFENSE CHARGED</b>            | <b>LOCAL CODE</b>                                      | <b>OFFENSE DESCRIPTION</b>   |
| **                                      | *****                          |                                   | <input type="checkbox"/>                               |  |
| <b>OL CLASS</b>                         | <b>ENDORSEMENT</b>             | <b>RESTRICTION</b> SELECT UP TO 3 | <b>DRIVER DISTRACTED BY</b>                            | <b>ALCOHOL / DRUG SUSPECTED</b>  |
|   |                                |                                   |  | <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA<br><input type="checkbox"/> OTHER DRUG |
|   |                                | <b>CONDITION</b>                  | <b>ALCOHOL TEST</b>                                    |  |
|   |                                |                                   | <b>STATUS</b> <b>TYPE</b> <b>VALUE</b>                 |  |
|   |                                |                                   | <b>STATUS</b> <b>TYPE</b> <b>RESULT</b> SELECT UP TO 4 |  |

|                                   |                                |                                   |  |  |
|-----------------------------------|--------------------------------|-----------------------------------|--|--|
| <b>UNIT #</b>                     | NAME: LAST, FIRST, MIDDLE      | DATE OF BIRTH                     | AGE  | GENDER   |
|                                   |                                |                                   |  |  |
| ADDRESS: STREET, CITY, STATE, ZIP |                                | CONTACT PHONE - INCLUDE AREA CODE |  |  |
|                                   |                                |                                   |  |  |
| <b>INJURIES</b>                   | <b>INJURED TAKEN BY</b>        | <b>EMS AGENCY (NAME)</b>          | <b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> | <b>SAFETY EQUIPMENT USED</b>   |
|                                   |                                |                                   |  | <input type="checkbox"/> DOT-Compliant MC HELMET   |
| <b>OL STATE</b>                   | <b>OPERATOR LICENSE NUMBER</b> | <b>OFFENSE CHARGED</b>            | <b>LOCAL CODE</b>                                      | <b>OFFENSE DESCRIPTION</b>   |
|                                   |                                |                                   | <input type="checkbox"/>                               |  |
| <b>OL CLASS</b>                   | <b>ENDORSEMENT</b>             | <b>RESTRICTION</b> SELECT UP TO 3 | <b>DRIVER DISTRACTED BY</b>                            | <b>ALCOHOL / DRUG SUSPECTED</b>  |
|                                   |                                |                                   |  | <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA<br><input type="checkbox"/> OTHER DRUG |
|                                   |                                | <b>CONDITION</b>                  | <b>ALCOHOL TEST</b>                                    |  |
|                                   |                                |                                   | <b>STATUS</b> <b>TYPE</b> <b>VALUE</b>                 |  |
|                                   |                                |                                   | <b>STATUS</b> <b>TYPE</b> <b>RESULT</b> 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 - FRONT - MIDDLE   | 2 - DEPLOYED FRONT                 | 2 - CLASS B                  | 2 - CDL INTRASTATE ONLY  | 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING) | 2 - TEST REFUSED                               |
| 3 - SUSPECTED MINOR INJURY                    | 3 - FRONT - RIGHT SIDE   | 3 - DEPLOYED SIDE                  | 3 - CLASS C                  | 3 - CORRECTIVE LENSES  | 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE                                       | 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE |
| 4 - POSSIBLE INJURY                           | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)  | 4 - DEPLOYED BOTH FRONT / SIDE     | 4 - REGULAR CLASS (OHIO = D) | 4 - FARM WAIVER  | 4 - TALKING ON HAND-HELD COMMUNICATION DEVICE  | 4 - TEST GIVEN, RESULTS KNOWN                  |
| 5 - NO APPARENT INJURY                        | 5 - SECOND - MIDDLE  | 5 - NOT APPLICABLE                 | 5 - M/C MOPED ONLY           | 5 - EXCEPT CLASS A & CLASS B BUS   | 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE   | 5 - TEST GIVEN, RESULTS UNKNOWN                |
| <b>INJURED TAKEN BY</b>                       | 6 - SECOND - RIGHT SIDE  | 9 - DEPLOYMENT UNKNOWN             | 6 - NO VALID OL              | 6 - EXCEPT CLASS A & CLASS B BUS   | 6 - PASSENGER  | <b>ALCOHOL TEST TYPE</b>                       |
| 1 - NOT TRANSPORTED / TREATED AT SCENE        | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)  | <b>EJECTION</b>                    |                              | 7 - EXCEPT TRACTOR-TRAILER   | 7 - OTHER DISTRACTION INSIDE THE VEHICLE   | 1 - NONE                                       |
| 2 - EMS                                       | 8 - THIRD - MIDDLE   | 1 - NOT EJECTED                    | <b>OL ENDORSEMENT</b>        | 8 - INTERMEDIATE LICENSE RESTRICTIONS  | 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE  | 2 - BLOOD                                      |
| 3 - POLICE                                    | 9 - THIRD - RIGHT SIDE   | 2 - PARTIALLY EJECTED              | H - HAZMAT                   | 9 - LEARNER'S PERMIT RESTRICTIONS  | 9 - OTHER / UNKNOWN  | 3 - URINE                                      |
| 9 - OTHER / UNKNOWN                           | 10 - SLEEPER SECTION OF TRUCK CAB  | 3 - TOTALLY EJECTED                | M - MOTORCYCLE               | 10 - LIMITED TO DAYLIGHT ONLY  |  | 4 - BREATH                                     |
| <b>SAFETY EQUIPMENT</b>                       | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | 4 - NOT APPLICABLE                 | P - PASSENGER                | 11 - LIMITED TO EMPLOYMENT   | <b>CONDITION</b>   | 5 - OTHER                                      |
| 1 - NONE USED                                 | 12 - PASSENGER IN UNENCLOSED CARGO AREA  | <b>TRAPPED</b>                     | N - TANKER                   | 12 - LIMITED - OTHER   | 1 - APPARENTLY NORMAL  | <b>DRUG TEST TYPE</b>                          |
| 2 - SHOULDER BELT ONLY USED                   | 13 - TRAILING UNIT   | 1 - NOT TRAPPED                    | Q - MOTOR SCOOTER            | 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) | 2 - PHYSICAL IMPAIRMENT  | 1 - NONE                                       |
| 3 - LAP BELT ONLY USED                        | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)                                    | 2 - EXTRICATED BY MECHANICAL MEANS | R - THREE-WHEEL MOTORCYCLE   | 14 - MILITARY VEHICLES ONLY  | 3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)                                    | 2 - BLOOD                                      |
| 4 - SHOULDER & LAP BELT USED                  | 99 - OTHER / UNKNOWN   | 3 - FREED BY NON-MECHANICAL MEANS  | S - SCHOOL BUS               | 15 - MOTOR VEHICLES WITHOUT AIR BRAKES   | 4 - ILLNESS  | 3 - URINE                                      |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING   |  |                                    | T - DOUBLE & TRIPLE TRAILERS | 16 - OUTSIDE MIRROR  | 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.   | 4 - OTHER                                      |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING      |  |                                    | X - TANKER / HAZMAT          | 17 - PROSTHETIC AID  | 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL                             | <b>DRUG TEST RESULT(S)</b>                     |
| 7 - BOOSTER SEAT                              |  |                                    | <b>GENDER</b>                | 18 - OTHER   | 9 - OTHER / UNKNOWN  | 1 - AMPHETAMINES                               |
| 8 - HELMET USED                               |  |                                    | F - FEMALE                   |  |  | 2 - BARBITURATES                               |
| 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) |  |                                    | M - MALE                     |  |  | 3 - BENZODIAZEPINES                            |
| 10 - REFLECTIVE CLOTHING                      |  |                                    | U - OTHER / UNKNOWN          |  |  | 4 - CANNABINOIDS                               |
| 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY     |  |                                    |                              |  |  | 5 - COCAINE                                    |
| 99 - OTHER / UNKNOWN                          |  |                                    |                              |  |  | 6 - OPIATES / OPIOIDS                          |
|   |  |                                    |                              |  |  | 7 - OTHER                                      |
|   |  |                                    |                              |  |  | 8 - NEGATIVE RESULTS                           |