

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH		<input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> PRIVATE PROPERTY	<input checked="" type="checkbox"/> OH-3 <input type="checkbox"/> OTHER	LOCAL INFORMATION REPORTING AGENCY NAME* STPD		NCIC* 07712		2025-00004293	
COUNTY* 77	LOCALITY* 1-CITY 2-VILLAGE 3-TOWNSHIP 1	LOCATION: CITY, VILLAGE, TOWNSHIP* Stow		CRASH DATE / TIME* 03042025/1740		CRASH SEVERITY 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY 5			
ROUTE TYPE <input type="checkbox"/>	ROUTE NUMBER <input type="checkbox"/>	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST <input type="checkbox"/>	LOCATION ROAD NAME FISHCREEK		ROAD TYPE R D	LATITUDE DECIMAL DEGREES 41.184657			
ROUTE TYPE <input type="checkbox"/>	ROUTE NUMBER <input type="checkbox"/>	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST <input type="checkbox"/>	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 4936		ROAD TYPE <input type="checkbox"/>	LONGITUDE DECIMAL DEGREES -81.422944			
REFERENCE POINT 1-INTERSECTION 2-MILE POST 3-HOUSE # 3		DIRECTION FROM REFERENCE 1-NORTH 2-SOUTH 3-EAST 4-WEST <input type="checkbox"/>		ROUTE TYPE IR-INTERSTATE ROUTE(TP) US-FEDERAL US ROUTE SR-STATE ROUTE CR-NUMBERED COUNTY ROUTE TR-NUMBERED TOWNSHIP ROUTE <input type="checkbox"/>		ROAD TYPE AL-ALLEY AV-AVENUE BL-BOULEVARD CR-CIRCLE CT-COURT DR-DRIVE HE-HEIGHTS HW-HIGHWAY LA-LANE MP-MILEPOST OV-OVAL PK-PARKWAY PI-PIKE PL-PLACE RD-ROAD SQ-SQUARE ST-STREET TE-TERRACE TL-TRAIL WA-WAY <input type="checkbox"/>		INTERSECTION RELATED <input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES 04	
DISTANCE FROM REFERENCE <input type="checkbox"/>		DISTANCE UNIT OF MEASURE 1-MILES 2- FEET 3-YARDS <input type="checkbox"/>		LOCATION OF FIRST HARMFUL EVENT 1-ON ROADWAY 2-ON SHOULDER 3-IN MEDIAN 4-ON ROADSIDE 5-ON GORE 6-OUTSIDE TRAFFIC WAY 7-ON RAMP 8-OFF RAMP 01		MANNER OF CRASH COLLISION/IMPACT 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 2		DIRECTION OF TRAVEL 1-NORTH 2-SOUTH 3-EAST 4-WEST <input type="checkbox"/>	
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> 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 <input type="checkbox"/>		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 <input type="checkbox"/>		CONTOUR 1 1-STRAIGHT LEVEL 2-STRAIGHT GRADE 3-CURVE LEVEL 4-CURVE GRADE 9-OTHER/UNKNOWN		CONDITIONS 1 1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN	
LIGHT CONDITION 1 1-DAYLIGHT 2-DAWN/DUSK 3-DARK-LIGHTED ROADWAY 4-DARK-ROADWAY NOT LIGHTED 5-DARK-UNKNOWN ROADWAY LIGHTING 9-OTHER/ UNKNOWN		WEATHER 01 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		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		SURFACE 2 1-CONCRETE 2-BLACKTOP, BITUMINOUS, ASPHALT 3-BRICK/BLOCK 4-SLAG, GRAVEL, STONE 5-DIRT 9-OTHER/UNKNOWN			
NARRATIVE Units #3 and #2 were northbound at the red light on Stow Road and Fishcreek Road. The light changed, and Unit #3 and Unit #2 began to travel forward. Unit #1 failed to maintain the appropriate speed to give her time to stop. Unit #1 rear-ended Unit #2, pushing Unit #2 forward and striking Unit #3. Unit #1 was cited with assured cleared distance.									
CRASH REPORTED DATE / TIME 03112025/1740		DISPATCH DATE / TIME 03112025/1754		ARRIVAL DATE / TIME 03112025/1756		SCENE CLEARED DATE / TIME 03112025/1815		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	
TOTAL TIME ROADWAY CLOSED 000		OTHER INVESTIGATION TIME 060		TOTAL MINUTES 081		OFFICER'S NAME* DAVIDSON, ELLIE		CHECKED BY OFFICER'S NAME* CORFMAN, JACOB	
000		060		081		OFFICER'S BADGE NUMBER* 000776		CHECKED BY OFFICER'S BADGE NUMBER* 000716	
<input type="checkbox"/> SUPPLEMENT (CORRECTION IN ADDITION TO AN EXISTING REPORT SENT TO IDPS)									

OWNER

VEHICLE

EVENT(S)

UNIT # 01	OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) CROY, KIMBERLY A	OWNER PHONE: INCLUDE AREA CODE (X SAME AS DRIVER) 3303226731
OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 2446 SHERWOOD DR Stow OH 44224		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		

LP STATE OH	LICENSE PLATE # JLW6397	VEHICLE IDENTIFICATION # 1GNALBEK7FZ144724	VEHICLE YEAR 2015	VEHICLE MAKE Chevrolet
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY State Farm	INSURANCE POLICY # 2447768-SFP-35	COLOR GRY	VEHICLE MODEL EQUINOX
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	US DOT #	
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS 01	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		TOWED BY: COMPANY NAME		
UNIT TYPE 01		HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD <input type="checkbox"/> PLACARD ID #		
# OF TRAILING UNITS		VEHICLE YEAR 2015		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2		AUTONOMOUS MODE LEVEL 0		
SPECIAL FUNCTION 01		VEHICLE YEAR 2015		
CARGO BODY TYPE 01		VEHICLE YEAR 2015		
VEHICLE DEFECTS		VEHICLE YEAR 2015		

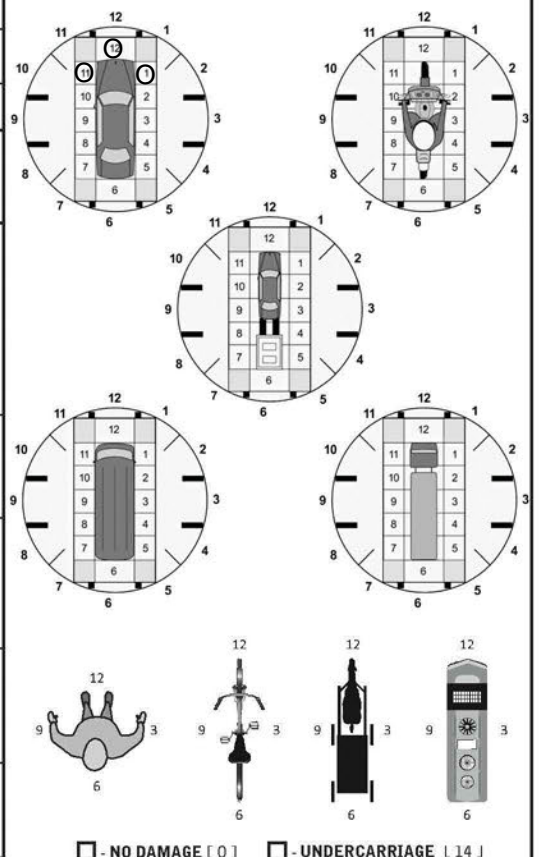
NON-MOTORIST LOCATION AT IMPACT	VEHICLE YEAR 2015	VEHICLE YEAR 2015	VEHICLE YEAR 2015
ACTION 3	VEHICLE YEAR 2015	VEHICLE YEAR 2015	VEHICLE YEAR 2015
CONTRIBUTING CIRCUMSTANCES 08	VEHICLE YEAR 2015	VEHICLE YEAR 2015	VEHICLE YEAR 2015
SEQUENCE OF EVENTS	VEHICLE YEAR 2015	VEHICLE YEAR 2015	VEHICLE YEAR 2015

EVENT(S) 1 20	EVENT(S) 1	EVENT(S) 1	EVENT(S) 1
SEQUENCE OF EVENTS	EVENT(S) 1	EVENT(S) 1	EVENT(S) 1
CONTRIBUTING CIRCUMSTANCES 08	EVENT(S) 1	EVENT(S) 1	EVENT(S) 1
SEQUENCE OF EVENTS	EVENT(S) 1	EVENT(S) 1	EVENT(S) 1

LOCAL REPORT NUMBER
2025-00004293

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

DAMAGED AREA(S)
INDICATE ALL THAT APPLY



INITIAL POINT OF CONTACT
1 2 0 - NO DAMAGE 14 - UNDERCARRIAGE
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
13 - TOP 99 - UNKNOWN

TRAFFIC
TRAFFICWAY FLOW
2 1 - ONE-WAY
2 - TWO-WAY
TRAFFIC CONTROL
2 1 - ROUNDABOUT 4 - STOP SIGN
2 - SIGNAL 5 - YIELD SIGN
3 - FLASHER 6 - NO CONTROL

OF THROUGH LANES ON ROAD
2
RAIL GRADE CROSSING
1 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
0 2 0
DETECTED SPEED
1 1 - STATED / ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED
POSTED SPEED
3 5

OWNER

UNIT # 0 2 OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER)
STROH, DANA ALYSSA

OWNER PHONE: INCLUDE AREA CODE (X SAME AS DRIVER)
3 3 0 5 7 2 9 1 3 9

OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)
2455 SILVER SPRINGS DR Stow OH 44224

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 OH LICENSE PLATE # JFG8498 VEHICLE IDENTIFICATION # 1 9 XFC2 F 5 8 HE 0 3 4 3 8 3 VEHICLE YEAR 2 0 1 7 VEHICLE MAKE Honda

INSURANCE VERIFIED INSURANCE COMPANY Erie Insurance INSURANCE POLICY # Q057109162 COLOR WHI VEHICLE MODEL CIVIC

COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT #OCCUPANTS 0 1 US DOT #

VEHICLE WEIGHT GVWR/GCWR
1 - ≤10K LBS.
2 - 10,001 - 26K LBS.
3 - >26K LBS.

HAZARDOUS MATERIAL
 MATERIAL RELEASED CLASS # PLACARD ID #
 PLACARD

TOWED BY: COMPANY NAME

DAMAGED AREA(S)
INDICATE ALL THAT APPLY

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

UNIT TYPE

0 1

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?

2 1 - YES 2 - NO 9 - OTHER / UNKNOWN

AUTONOMOUS MODE LEVEL

0 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION
2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

SPECIAL FUNCTION

0 1

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

0 1

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 9 - CARGO TANK 13 - AUTOTRANSPORTER
7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN

VEHICLE DEFECTS

1

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

INITIAL POINT OF CONTACT

0 6 0 - NO DAMAGE 14 - UNDERCARRIAGE
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
13 - TOP 99 - UNKNOWN

NON-MOTORIST LOCATION AT IMPACT

5

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 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS
5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS 99 - OTHER / UNKNOWN

ACTION

5

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 PRE-CRASH ACTIONS 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

0 1

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 99 - OTHER IMPROPER ACTION
4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING
5 - UNSAFE SPEED 11 - DROVE OFF ROAD
6 - IMPROPER TURN 12 - IMPROPER BACKING

TRAFFIC

TRAFFICWAY FLOW

2 1 - ONE-WAY
2 - TWO-WAY

TRAFFIC CONTROL

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

OF THROUGH LANES ON ROAD

3

RAIL GRADE CROSSING

1 1 - NOT INVOLVED
2 - INVOLVED-ACTIVE CROSSING
3 - INVOLVED-PASSIVE CROSSING

EVENT(S)

1

SEQUENCE OF EVENTS

1 2 0 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT
2 2 0 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 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
5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE IN TRANSPORT
6 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT

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 STRUCTURE 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

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

0 0 5

DETECTED SPEED

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

POSTED SPEED

3 5

OWNER

UNIT # 03 OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) **FLINT, MEGHAN AUDRA**

OWNER PHONE: INCLUDE AREA CODE (X SAME AS DRIVER) 7408922055

OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) **2525 COLONY PARK PL A Stow OH 44224**

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

VEHICLE

LP STATE OH LICENSE PLATE # JTX7704 VEHICLE IDENTIFICATION # 3CZRU6H56JG713538 VEHICLE YEAR 2018 VEHICLE MAKE **Honda**

INSURANCE VERIFIED INSURANCE COMPANY **State Farm** INSURANCE POLICY # 2570416-SFP-35 COLOR **GRY** VEHICLE MODEL **HRV**

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 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS. HAZARDOUS MATERIAL MATERIAL RELEASED CLASS # _____ PLACARD ID # _____ PLACARD

UNIT TYPE 01 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
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 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS _____

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

SPECIAL FUNCTION 01 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 01 1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER
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 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 10 - FLAT BED 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN

VEHICLE DEFECTS 01 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 01 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 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN
 5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS

ACTION 4 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 01 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST
 4 - STRUCK PRE-CRASH ACTIONS 4 - OVERTAKING/PASSING 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE
 5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE
 9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN

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
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 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

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
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 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER
 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE IN TRANSPORT
 6 - _____

COLLISION WITH FIXED OBJECT - STRUCK 1 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

LOCAL REPORT NUMBER 2025-00004293

DAMAGE 3 DAMAGE SCALE 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 06 0 - NO DAMAGE 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE
 1-12 - REFER TO UNIT DIAGRAM 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - UNKNOWN
 13 - TOP

TRAFFIC TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY TRAFFIC CONTROL 2 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL

OF THROUGH LANES ON ROAD 3 RAIL GRADE CROSSING 1 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 005 POSTED SPEED 35 DETECTED SPEED 1 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED

MOTORIST / Non-MOTORIST

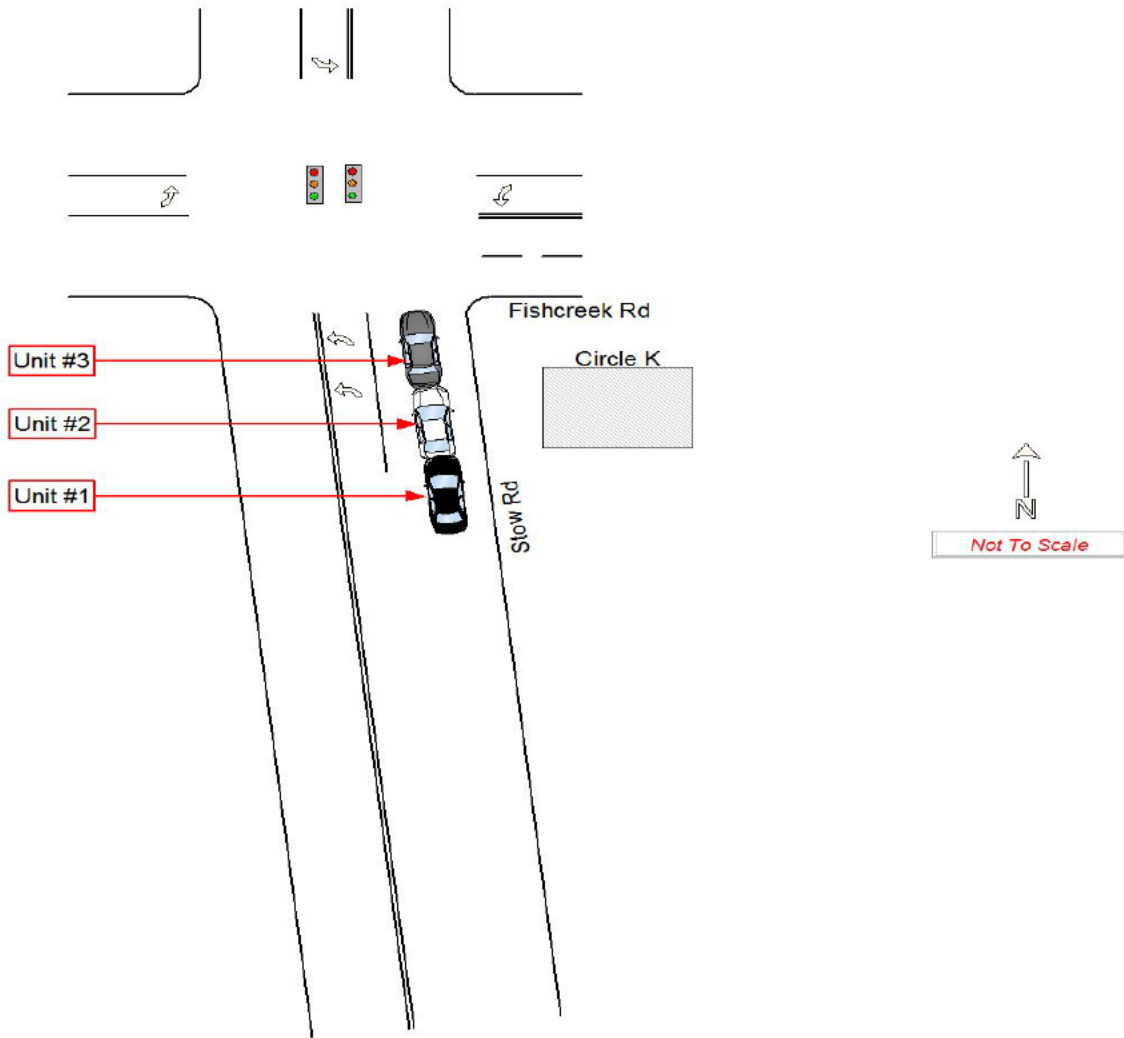
LOCAL REPORT NUMBER
 2 0 2 5 - 0 0 0 0 4 2 9 3

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
0 1	CROY, KIMBERLY A	0 7 0 6 1 9 6 2	0 6 2	F
ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
2446 SHERWOOD DR Stow OH 44224		3 3 0 3 2 2 6 7 3 1		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED
5				0 4
<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
<input type="checkbox"/>	0 1	1	1	1
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
O H		333.03A	X	Assured Clear Distance
				CITATION NUMBER
				SC0006116
OL CLASS	ENDORSEMENT	RESTRICTION	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED
4			1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
CONDITION	ALCOHOL TEST		DRUG TEST(S)	
1	STATUS	TYPE	VALUE	STATUS TYPE RESULT
	1	1		1 1

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
0 2	STROH, DANA ALYSSA	0 5 1 2 2 0 0 0	0 2 4	F
ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
2455 SILVER SPRINGS DR Stow OH 44224		3 3 0 5 7 2 9 1 3 9		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED
5				0 4
<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
<input type="checkbox"/>	0 1	1	1	1
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
O H				
OL CLASS	ENDORSEMENT	RESTRICTION	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED
4			1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
CONDITION	ALCOHOL TEST		DRUG TEST(S)	
1	STATUS	TYPE	VALUE	STATUS TYPE RESULT
	1	1		1 1

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
0 3	FLINT, MEGHAN AUDRA	0 6 0 4 1 9 9 0	0 3 0	F
ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
2525 COLONY PARK PL A Stow OH 44224		7 4 0 8 9 2 2 0 5 5		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED
5				0 4
<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
<input type="checkbox"/>	0 1	1	1	1
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
O H				
OL CLASS	ENDORSEMENT	RESTRICTION	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED
4			1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
CONDITION	ALCOHOL TEST		DRUG TEST(S)	
1	STATUS	TYPE	VALUE	STATUS TYPE RESULT
	1	1		1 1

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



LOCAL REPORT NUMBER 25-4293	REPORTING AGENCY Stow PD	DATE OF CRASH M 3 D 11 Y 25
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, Kimberly HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED
DAVIDSON AT 4936 Fishcreek RD / Circle K
OFFICER'S NAME LOCATION

I was driving down Stow Rd next to Circle K. moving slowly (not sure if light had just changed to Green) All of a sudden car in front of stopped quickly and I was into their rear end.

ADDRESS OF WITNESS

SIGNATURE OF WITNESS X Ken A. Cy

OFFICER'S SIGNATURE X off. Davidson #776