OHIO DEPARTMENT OF PUBLIC SAFETY

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*: 2020-00006084

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

LOCAL INFORMATION

REPORTING AGENCY NAME*: Stow Police

NCIC*: 07712

HIT/SKIP (1 - SOLVED, 2 - UNSOLVED):

NUMBER OF UNITS: 01

UNIT IN ERROR (98 - ANIMAL, 99 - UNKNOWN): 01

COUNTY*: 77

LOCALITY* (1 - CITY, 2 - VILLAGE, 3 - TOWNSHIP): 1

LOCATION: CITY, VILLAGE, TOWNSHIP*: Stow

CRASH DATE / TIME*: 04182020 / 0717

CRASH SEVERITY: 5
1 - FATAL
2 - SERIOUS INJURY SUSPECTED
3 - MINOR INJURY SUSPECTED
4 - INJURY POSSIBLE
5 - PROPERTY DAMAGE ONLY

LOCATION

ROUTE TYPE: SR
ROUTE NUMBER: 8
PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST):
LOCATION ROAD NAME:
ROAD TYPE:

LATITUDE DECIMAL DEGREES: 41.188134

REFERENCE

ROUTE TYPE:
ROUTE NUMBER:
PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST):
REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #): 9.6
ROAD TYPE:

LONGITUDE DECIMAL DEGREES: -81.479715

REFERENCE POINT: 2
1 - INTERSECTION
2 - MILE POST
3 - HOUSE #

DIRECTION FROM REFERENCE:
1 - NORTH
2 - SOUTH
3 - EAST
4 - WEST

DISTANCE FROM REFERENCE:

DISTANCE UNIT OF MEASURE:
1 - MILES
2 - FEET
3 - YARDS

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

LOCATION OF FIRST HARMFUL EVENT: 01
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: 1
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: 2
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: 3
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: 4
1 - BEFORE THE 1ST WORK ZONE WARNING SIGN
2 - ADVANCE WARNING AREA
3 - TRANSITION AREA
4 - ACTIVITY AREA
5 - TERMINATION AREA

CONTOUR: 1
1 - STRAIGHT LEVEL
2 - STRAIGHT GRADE
3 - CURVE LEVEL
4 - CURVE GRADE
9 - OTHER/UNKNOWN

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

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

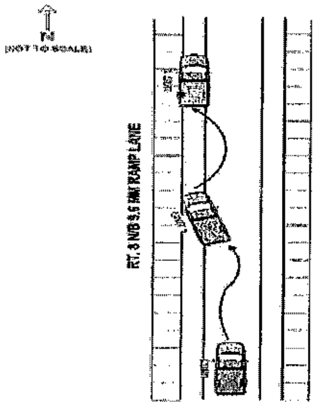
LIGHT CONDITION: 1
1 - DAYLIGHT
2 - DAWN/DUSK
3 - DARK – LIGHTED ROADWAY
4 - DARK – ROADWAY NOT LIGHTED
5 - DARK – UNKNOWN ROADWAY LIGHTING
9 - OTHER / UNKNOWN

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

NARRATIVE

Unit 1 was n/b on Rt. 8 in the ramp lane of the contruction zone. Lane had concrete barriers to the left and to the right. There was an ice patch near the 9.6mm which caused Unit 1 to lose control and swerve to the left into the concrete mediam barrier. Unit 1 bounced off the median wall causing damage to the left side of the vehicle.

Indicate the north direction with an "N" on the compass diagram.



CRASH REPORTED DATE / TIME: 04182020 / 0717

DISPATCH DATE / TIME: 04182020 / 0718

ARRIVAL DATE / TIME: 04182020 / 0719

SCENE CLEARED DATE / TIME: 04182020 / 0747

REPORT TAKEN BY
☒ POLICE AGENCY
☐ MOTORIST
☐ SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

TOTAL TIME ROADWAY CLOSED: 030

OTHER INVESTIGATION TIME: 010

TOTAL MINUTES: 039

OFFICER'S NAME*: Myers, Patrick R

OFFICER'S BADGE NUMBER*: 747

CHECKED BY OFFICER'S NAME*: Breznak, Jeffrey A

CHECKED BY OFFICER'S BADGE NUMBER*: 710

UNIT

LOCAL REPORT NUMBER 2020-00006084

OWNER

UNIT # 01

OWNER NAME: LAST, FIRST, MIDDLE (☒ SAME AS DRIVER) STRIZZI, WILLIAM, SAMUEL

OWNER PHONE: INCLUDE AREA CODE (☒ SAME AS DRIVER) [redacted]

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☒ SAME AS DRIVER) 7765 VICTORIA CIR ,INDEPENDENCE ,OH 44131

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

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	PKM5879	5TELU42N38Z562326	2008	Toyota

☒ INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
	ERIE	Q 02 6907692	GRY	TACOMA

TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #

TOWED BY: COMPANY NAME Joes Auto

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

# OCCUPANTS 01

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

HAZARDOUS MATERIAL ☐ MATERIAL RELEASED ☐ PLACARD CLASS # PLACARD ID #

UNIT TYPE 01
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 6 - VAN (9-15 SEATS), 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN / SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 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, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT/COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER / UNKNOWN

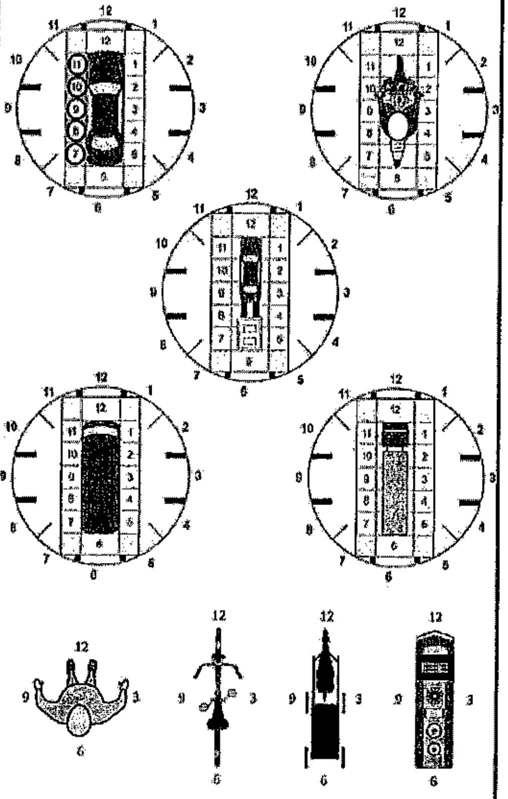
CARGO BODY TYPE 01
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER / UNKNOWN

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

DAMAGE

DAMAGE SCALE 3 — 1 - NONE, 2 - MINOR DAMAGE, 3 - FUNCTIONAL 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 11 — 0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

EVENT(S)

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

ACTION 3 — 1 - NON-CONTACT, 2 - NON-COLLISION, 3 - STRIKING, 4 - STRUCK, 5 - BOTH STRIKING & STRUCK, 9 - OTHER / UNKNOWN

PRE-CRASH ACTIONS 01
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER / UNKNOWN

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

SEQUENCE OF EVENTS

1 09
2 35
3
4
5
6

EVENTS
1 - OVERTURN/ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO / EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 16 - RAILWAY VEHICLE, 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

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER / UNKNOWN

FIRST HARMFUL EVENT 2 **MOST HARMFUL EVENT** 2

TRAFFIC

TRAFFICWAY FLOW 1 — 1 - ONE-WAY, 2 - TWO-WAY

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

# OF THROUGH LANES ON ROAD 1

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

UNIT SPEED 055

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

POSTED SPEED 55

OHIO DEPARTMENT OF PUBLIC SAFETY

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER 2020-00006084

MOTORIST / NON-MOTORIST

UNIT # 01
NAME: LAST, FIRST, MIDDLE STRIZZI, WILLIAM, SAMUEL
DATE OF BIRTH 02211996
AGE 24
GENDER M
ADDRESS: STREET, CITY, STATE, ZIP 7765 VICTORIA CIR ,INDEPENDENCE ,OH 44131
CONTACT PHONE - INCLUDE AREA CODE [redacted]
INJURIES 5
INJURED TAKEN BY
EMS AGENCY (NAME)
INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)
SAFETY EQUIPMENT USED 04
☐ **DOT-COMPLIANT MC HELMET**
SEATING POSITION 01
AIR BAG USAGE 1
EJECTION 1
TRAPPED 1
OL STATE OH
OPERATOR LICENSE NUMBER [redacted]
OFFENSE CHARGED 331.34
LOCAL CODE ☒
OFFENSE DESCRIPTION Failure to Control;
CITATION NUMBER 143511
OL CLASS 4
ENDORSEMENT SELECT UP TO 2
RESTRICTION SELECT UP TO 3
DRIVER DISTRACTED BY 1
ALCOHOL / DRUG SUSPECTED ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG
CONDITION 1
ALCOHOL TEST STATUS 1 TYPE 1 VALUE
DRUG TEST(S) STATUS 1 TYPE RESULT SELECT UP TO 4

MOTORIST / NON-MOTORIST

UNIT #
NAME: LAST, FIRST, MIDDLE
DATE OF BIRTH
AGE
GENDER
ADDRESS: STREET, CITY, STATE, ZIP
CONTACT PHONE - INCLUDE AREA CODE
INJURIES
INJURED TAKEN BY
EMS AGENCY (NAME)
INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)
SAFETY EQUIPMENT USED
☐ **DOT-COMPLIANT MC HELMET**
SEATING POSITION
AIR BAG USAGE
EJECTION
TRAPPED
OL STATE
OPERATOR LICENSE NUMBER
OFFENSE CHARGED
LOCAL CODE ☐
OFFENSE DESCRIPTION
CITATION NUMBER
OL CLASS
ENDORSEMENT SELECT UP TO 2
RESTRICTION SELECT UP TO 3
DRIVER DISTRACTED BY
ALCOHOL / DRUG SUSPECTED ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG
CONDITION
ALCOHOL TEST STATUS TYPE VALUE
DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4

MOTORIST / NON-MOTORIST

UNIT #
NAME: LAST, FIRST, MIDDLE
DATE OF BIRTH
AGE
GENDER
ADDRESS: STREET, CITY, STATE, ZIP
CONTACT PHONE - INCLUDE AREA CODE
INJURIES
INJURED TAKEN BY
EMS AGENCY (NAME)
INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)
SAFETY EQUIPMENT USED
☐ **DOT-COMPLIANT MC HELMET**
SEATING POSITION
AIR BAG USAGE
EJECTION
TRAPPED
OL STATE
OPERATOR LICENSE NUMBER
OFFENSE CHARGED
LOCAL CODE ☐
OFFENSE DESCRIPTION
CITATION NUMBER
OL CLASS
ENDORSEMENT SELECT UP TO 2
RESTRICTION SELECT UP TO 3
DRIVER DISTRACTED BY
ALCOHOL / DRUG SUSPECTED ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG
CONDITION
ALCOHOL TEST STATUS TYPE VALUE
DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4

INJURIES
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED /TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

SAFETY EQUIPMENT
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

SEATING POSITION
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

AIR BAG
1 - NOT DEPLOYED
2 - DEPLOYED FRONT
3 - DEPLOYED SIDE
4 - DEPLOYED BOTH FRONT / SIDE
5 - NOT APPLICABLE
9 - DEPLOYMENT UNKNOWN

EJECTION
1 - NOT EJECTED
2 - PARTIALLY EJECTED
3 - TOTALLY EJECTED
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

OL CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/C MOPED ONLY
6 - NO VALID OL

OL ENDORSEMENT
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

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

OL RESTRICTION(S)
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

DRIVER DISTRACTION
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

CONDITION
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

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 TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - OTHER

DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

OHIO DEPARTMENT OF PUBLIC SAFETY
EDUCATION • SERVICE • PROTECTION

OHIO TRAFFIC CRASH REPORT
DIAGRAM/NARRATIVE CONTINUATION

OH-2

LOCAL REPORT NUMBER 20-06084	REPORTING AGENCY STOW P.D	DATE OF CRASH M 4 D 18 Y 20
IN COUNTY OF SUMMIT	CRASH LOCATION RT 8 N/B 9.6 MM	

DAMAGED PROPERTY:

CONCRETE MEDIAN BARRIER

PROPERTY OWNER:

CITY OF STOW
3760 DARROW RD
STOW. OH 44224
330-689-2749

OFFICER'S SIGNATURE X #747	BADGE NUMBER 747

HSY 7002 7/12 [760-0820]

PUBLIC