

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER\*

2 0 2 5 - 0 0 0 1 4 5 9 4

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

LOCAL INFORMATION

REPORTING AGENCY NAME\*

STPD

NCIC\*

0 7 7 1 2

HIT/SKIP

1 - SOLVED  
2 - UNSOLVED

NUMBER OF UNITS

0 2

UNIT IN ERROR

98 - ANIMAL  
99 - UNKNOWN

0 1

COUNTY\*    LOCALITY\*  
 7 7    1  
 1 - CITY  
2 - VILLAGE  
3 - TOWNSHIP

LOCATION: CITY, VILLAGE, TOWNSHIP\*

Stow

CRASH DATE / TIME\*

08282025 / 1350

CRASH SEVERITY

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

5

ROUTE TYPE    ROUTE NUMBER    PREFIX  
 S R    0 0 0 9 1    1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

LOCATION ROAD NAME

DARROW

ROAD TYPE

R D

LATITUDE DECIMAL DEGREES

41.164650

ROUTE TYPE    ROUTE NUMBER    PREFIX  
 1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)

3667

ROAD TYPE

LONGITUDE DECIMAL DEGREES

-81.440190

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

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
- 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

INTERSECTION RELATED

- WITHIN INTERSECTION OR ON APPROACH
- WITHIN INTERCHANGE AREA    NUMBER OF APPROACHES

ROADWAY

ROADWAY DIVIDED

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

- 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
  - 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 - 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

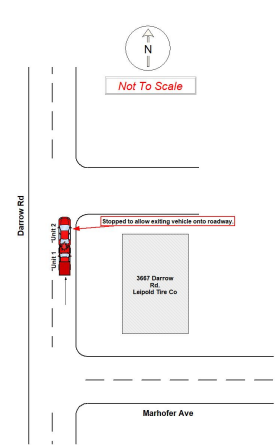
- LIGHT CONDITION
- 1 - DAYLIGHT
  - 2 - DAWN/DUSK
  - 3 - DARK - LIGHTED ROADWAY
  - 4 - DARK - ROADWAY NOT LIGHTED
  - 5 - DARK - UNKNOWN ROADWAY LIGHTING
  - 9 - OTHER / UNKNOWN

- 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 1 was traveling north on Darrow Rd near 3667 Darrow Rd. Unit 2 was also traveling north on Darrow Rd and was ahead of Unit 1. Both Units were in the same lane. Unit 2 stopped to allow an uninvolved vehicle to exit a nearby private drive. Unit 1 struck Unit 2 from behind, causing damage to both vehicles.

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



CRASH REPORTED DATE / TIME  
 0 8 2 8 2 0 2 5 / 1 3 5 2

DISPATCH DATE / TIME  
 0 8 2 8 2 0 2 5 / 1 3 5 6

ARRIVAL DATE / TIME  
 0 8 2 8 2 0 2 5 / 1 4 0 0

SCENE CLEARED DATE / TIME  
 0 8 2 8 2 0 2 5 / 1 4 4 1

REPORT TAKEN BY  
 POLICE AGENCY  
 MOTORIST

TOTAL TIME ROADWAY CLOSED  
 0 2 0

OTHER INVESTIGATION TIME  
 0 0 8

TOTAL MINUTES  
 0 5 3

OFFICER'S NAME\*  
**WILLIAMS, ALONTE**  
 OFFICER'S BADGE NUMBER\*  
 0 0 0 7 6 8

CHECKED BY OFFICER'S NAME\*  
**GINTHER, JOHN**  
 CHECKED BY OFFICER'S BADGE NUMBER\*  
 0 0 0 7 1 5

SUPPLEMENT  
 (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OSPS)

**OWNER**

UNIT # 01 OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) **FERRANTE, LOUIS RUSSELL**  
 OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER) **3307308951**  
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)  
**178 GAYLORD DR Munroe Falls OH 44262**  
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  
 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LOCAL REPORT NUMBER  
2025-00014594

**DAMAGE**

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

**VEHICLE**

LP STATE OH LICENSE PLATE # ETR1584 VEHICLE IDENTIFICATION # 1D7HE32K78S585153 VEHICLE YEAR 2008 VEHICLE MAKE Dodge  
 INSURANCE VERIFIED INSURANCE COMPANY CONNECT INSURANCE POLICY # 41121-50250-41 COLOR RED VEHICLE MODEL DAKOTA  
 COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE 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.  
 MATERIAL RELEASED CLASS # \_\_\_\_\_ PLACARD ID # \_\_\_\_\_  
 PLACARD \_\_\_\_\_

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

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

UNIT TYPE 04  
 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  
 1 - YES 2 - NO 9 - OTHER / UNKNOWN AUTONOMOUS MODE LEVEL  
 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 9 - UNKNOWN  
 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

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  
 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 9 - CARGO TANK 13 - AUTOTRANSPORTER  
 7 - GRAIN/CHIPS/GRAVEL 10 - FLAT BED 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

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

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 - 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 3  
 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  
 3 - STRIKING 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 19 - STANDING  
 4 - STRUCK PRE-CRASH ACTIONS 4 - OVERTAKING/PASSING 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 16 - WORKING 20 - OTHER NON-MOTORIST  
 5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 17 - PUSHING VEHICLE 21 - STANDING OUTSIDE DISABLED VEHICLE  
 9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS 99 - OTHER / UNKNOWN

**TRAFFIC**

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

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

CONTRIBUTING CIRCUMSTANCES 08  
 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 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE

# OF THROUGH LANES ON ROAD 4

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

**EVENT(S)**

SEQUENCE OF EVENTS  
 1 20 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT  
 2 \_\_\_\_\_ 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 \_\_\_\_\_ 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER  
 5 \_\_\_\_\_ 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE IN TRANSPORT  
 6 \_\_\_\_\_

**EVENTS**  
 1 1 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT  
 2 \_\_\_\_\_ 26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL  
 3 \_\_\_\_\_ 27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING  
 4 \_\_\_\_\_ 28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL  
 5 \_\_\_\_\_ 29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT  
 6 \_\_\_\_\_ 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 99 - OTHER / UNKNOWN  
 49 - FIRE HYDRANT

**COLLISION WITH FIXED OBJECT - STRUCK**

1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

**UNIT / NON-MOTORIST DIRECTION**  
 FROM 2 TO 1

UNIT SPEED  
035

POSTED SPEED  
35

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

OWNER

VEHICLE

EVENT(S)

**UNIT #** 0 2 **OWNER NAME:** LAST, FIRST, MIDDLE (  SAME AS DRIVER )  
**ASTRINOS, LILIANE WASSILI**

**OWNER PHONE:** INCLUDE AREA CODE (  SAME AS DRIVER )  
3 3 0 6 2 2 1 9 5 0

**OWNER ADDRESS:** STREET, CITY, STATE, ZIP (  SAME AS DRIVER )  
**1897 KING DR Stow OH 44224**

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

**LP STATE** OH **LICENSE PLATE #** FHL1547 **VEHICLE IDENTIFICATION #** 4 T 4 B F 3 E K 2 B R 1 9 2 1 0 3 **VEHICLE YEAR** 2 0 1 1 **VEHICLE MAKE** Toyota

**INSURANCE VERIFIED** **INSURANCE COMPANY** STATE FARM **INSURANCE POLICY #** 2281094-SFP-35 **COLOR** RED **VEHICLE MODEL** CAMRY

**COMMERCIAL**  **GOVERNMENT**  **IN EMERGENCY RESPONSE** **US DOT #** \_\_\_\_\_ **TOWED BY: COMPANY NAME** Joe's

**INTERLOCK DEVICE EQUIPPED**  **HIT/SKIP UNIT** **#OCCUPANTS** 0 1 **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** 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	10 - FLAT BED	14 - GARBAGE/REFUSE
			11 - DUMP	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 - 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 **PRE-CRASH ACTIONS** 1 1

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** 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
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**

**EVENTS**

1 <u>2 0</u>	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT
2 _____	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 _____	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	19 - ANIMAL - OTHER	
5 _____	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	15 - PEDALCYCLE	20 - MOTOR VEHICLE IN TRANSPORT	

**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

**LOCAL REPORT NUMBER**  
2 0 2 5 - 0 0 0 1 4 5 9 4

**DAMAGE**

**DAMAGE SCALE**

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

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

**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

**TRAFFIC**

<b>TRAFFICWAY FLOW</b> 1 - ONE-WAY <u>2</u> 2 - TWO-WAY	<b>TRAFFIC CONTROL</b> 1 - ROUNDABOUT 4 - STOP SIGN <u>6</u> 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
<b># OF THROUGH LANES ON ROAD</b> <u>4</u>	<b>RAIL GRADE CROSSING</b> 1 - NOT INVOLVED <u>1</u> 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
<b>UNIT / NON-MOTORIST DIRECTION</b>	
FROM <u>2</u> TO <u>1</u>	
<b>UNIT SPEED</b> <u>0 0 0</u>	<b>DETECTED SPEED</b> <u>1</u> 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
<b>POSTED SPEED</b> <u>3 5</u>	

# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
2 0 2 5 - 0 0 0 1 4 5 9 4

<b>UNIT #</b> 0 1	<b>NAME: LAST, FIRST, MIDDLE</b> FERRANTE, JOSEPH DANIEL			<b>DATE OF BIRTH</b> 0 9 2 2 1 9 9 9		<b>AGE</b> 0 2 5	<b>GENDER</b> M			
<b>ADDRESS: STREET, CITY, STATE, ZIP</b> 4287 KENT RD 464 Stow OH 44224				<b>CONTACT PHONE - INCLUDE AREA CODE</b> 3 3 0 5 5 3 4 2 3 8						
<b>INJURIES</b> 5	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>	<b>SAFETY EQUIPMENT USED</b> 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	<b>SEATING POSITION</b> 0 1	<b>AIR BAG USAGE</b> 1	<b>EJECTION</b> 1	<b>TRAPPED</b> 1	
<b>OL STATE</b> O H	<b>OPERATOR LICENSE NUMBER</b>		<b>OFFENSE CHARGED</b> 333.03A	<b>LOCAL CODE</b> <input checked="" type="checkbox"/>	<b>OFFENSE DESCRIPTION</b> Assured Clear Distance		<b>CITATION NUMBER</b> SC0013225			
<b>OL CLASS</b> 4	<b>ENDORSEMENT</b> SELECT UP TO 2	<b>RESTRICTION</b> SELECT UP TO 3	<b>DRIVER DISTRACTED BY</b> 8	<b>ALCOHOL / DRUG SUSPECTED</b> <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b> 1	<b>ALCOHOL TEST</b> STATUS: 1, TYPE: 1, VALUE: .		<b>DRUG TEST(S)</b> STATUS: 1, TYPE: 1, RESULT: SELECT UP TO 4	

<b>UNIT #</b> 0 2	<b>NAME: LAST, FIRST, MIDDLE</b> DOSS, JANE MONICA			<b>DATE OF BIRTH</b> 0 8 2 8 1 9 8 5		<b>AGE</b> 0 4 0	<b>GENDER</b> F			
<b>ADDRESS: STREET, CITY, STATE, ZIP</b> 1897 KING DR Stow OH 44224				<b>CONTACT PHONE - INCLUDE AREA CODE</b> 3 3 0 8 1 0 4 2 7 6						
<b>INJURIES</b> 5	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>	<b>SAFETY EQUIPMENT USED</b> 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	<b>SEATING POSITION</b> 0 1	<b>AIR BAG USAGE</b> 1	<b>EJECTION</b> 1	<b>TRAPPED</b> 1	
<b>OL STATE</b> O H	<b>OPERATOR LICENSE NUMBER</b>		<b>OFFENSE CHARGED</b>	<b>LOCAL CODE</b> <input type="checkbox"/>	<b>OFFENSE DESCRIPTION</b>		<b>CITATION NUMBER</b>			
<b>OL CLASS</b> 4	<b>ENDORSEMENT</b> SELECT UP TO 2	<b>RESTRICTION</b> SELECT UP TO 3	<b>DRIVER DISTRACTED BY</b> 1	<b>ALCOHOL / DRUG SUSPECTED</b> <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b> 1	<b>ALCOHOL TEST</b> STATUS: 1, TYPE: 1, VALUE: .		<b>DRUG TEST(S)</b> STATUS: 1, TYPE: 1, RESULT: SELECT UP TO 4	

<b>UNIT #</b>	<b>NAME: LAST, FIRST, MIDDLE</b>			<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>			
<b>ADDRESS: STREET, CITY, STATE, ZIP</b>				<b>CONTACT PHONE - INCLUDE AREA CODE</b>						
<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>SEATING POSITION</b>	<b>AIR BAG USAGE</b>	<b>EJECTION</b>	<b>TRAPPED</b>	
<b>OL STATE</b>	<b>OPERATOR LICENSE NUMBER</b>		<b>OFFENSE CHARGED</b>	<b>LOCAL CODE</b> <input type="checkbox"/>	<b>OFFENSE DESCRIPTION</b>		<b>CITATION NUMBER</b>			
<b>OL CLASS</b>	<b>ENDORSEMENT</b> SELECT UP TO 2	<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 <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b>	<b>ALCOHOL TEST</b> STATUS: , TYPE: , VALUE: .		<b>DRUG TEST(S)</b> STATUS: , TYPE: , RESULT: SELECT UP TO 4	

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

LOCAL REPORT NUMBER 25-14594	REPORTING AGENCY Stow PD	DATE OF CRASH M 8   D 08   Y 25
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, Jane Doss HEREBY MAKE THIS VOLUNTARY STATEMENT TO  
PRINTED

Plt. A. Williams #768 AT 3667 Darrow Rd  
OFFICER'S NAME LOCATION

I was going north on Darrow Road to my mom's house. I was on the road. I let a vehicle go in front of me. About 30 seconds later I got hit from the driver behind me.

ADDRESS OF WITNESS (330) 810-4276  
1897 King Dr. Stow, OH 44224

SIGNATURE OF WITNESS X Jane Doss OFFICER'S SIGNATURE X Plt. A. Williams #768



TRAFFIC CRASH WITNESS STATEMENT

56013 225

LOCAL REPORT NUMBER 25-14594	REPORTING AGENCY Stow PD	DATE OF CRASH M 8   D 28   Y 25
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, Joseph Ferrante HEREBY MAKE THIS VOLUNTARY STATEMENT TO  
PRINTED

Pt. A. Williams #768 AT 3667 Darrow Rd  
OFFICER'S NAME LOCATION

I was driving on SR 91 North, and it seems like out of nowhere, the woman appeared, I was already slowing down, but could not stop in time.

ADDRESS OF WITNESS 4287 Kent Rd, Stow, Ohio 44224	330-553-4238 8/28/25
SIGNATURE OF WITNESS X	OFFICER'S SIGNATURE X <u>Pt. A. Williams #768</u>