

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

2020-00012735

<input checked="" type="checkbox"/> PHOTOS TAKEN	<input checked="" type="checkbox"/> OH-2	<input type="checkbox"/> OH-3	LOCAL INFORMATION
<input type="checkbox"/> SECONDARY CRASH	<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME*
<input type="checkbox"/> PRIVATE PROPERTY			Stow Police
			NCIC#
			07712

HITS/SKIP	NUMBER OF UNITS	UNIT IN ERROR
1 - SOLVED	(01)	98 - ANIMAL
2 - UNSOLVED		99 - UNKNOWN
CRASH DATE / TIME*		CRASH SEVERITY
08282020/0751		5
		1 - FATAL
		2 - SERIOUS INJURY SUSPECTED
		3 - MINOR INJURY SUSPECTED
		4 - INJURY POSSIBLE
		5 - PROPERTY DAMAGE ONLY

COUNTY#	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*
7,7	1	Stow

ROUTE TYPE	ROUTE NUMBER	PREFIX	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES
			NORMAN	DR	41,175433

ROUTE TYPE	ROUTE NUMBER	PREFIX	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES
			2510		-81,418959

REFERENCE POINT	DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE
3	1 - NORTH	IR - INTERSTATE ROUTE(TP)	AL - ALLEY
	2 - SOUTH	US - FEDERAL US ROUTE	AV - AVENUE
	3 - EAST	SR - STATE ROUTE	BL - BOULEVARD
	4 - WEST	CR - NUMBERED COUNTY ROUTE	CR - CIRCLE
		TR - NUMBERED TOWNSHIP ROUTE	CT - COURT
			DR - DRIVE
			HE - HEIGHTS
			PL - PLACE
			RD - ROAD
			LA - LANE
			MP - MILEPOST
			PK - PARKWAY
			PI - PIKE
			ST - STREET
			TE - TERRACE
			TL - TRAIL
			WA - WAY

INTERSECTION RELATED
<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH
<input type="checkbox"/> WITHIN INTERCHANGE AREA
NUMBER OF APPROACHES
ROADWAY
<input type="checkbox"/> ROADWAY DIVIDED

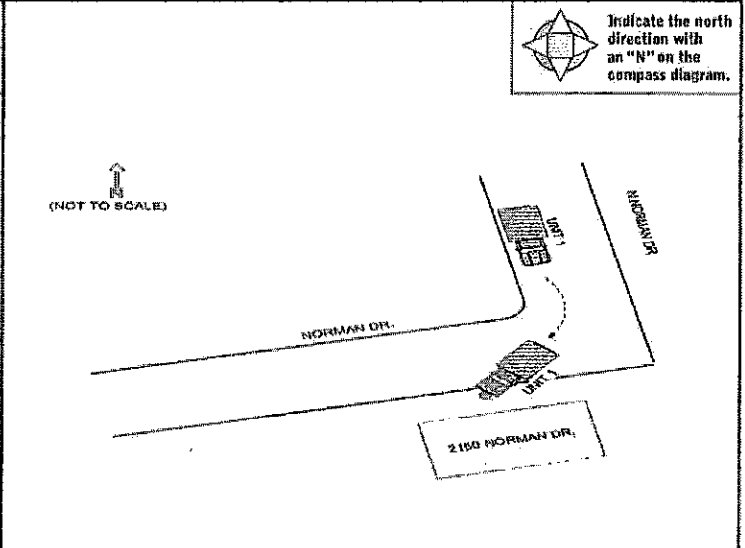
LOCATION OF FIRST HARMFUL EVENT	MANNER OF CRASH COLLISION/IMPACT	DIRECTION OF TRAVEL	MEDIAN TYPE
01	1	1 - NORTH	1 - DIVIDED FLUSH MEDIAN (<4 FEET)
		2 - SOUTH	2 - DIVIDED FLUSH MEDIAN (24 FEET)
		3 - EAST	3 - DIVIDED, DEPRESSED MEDIAN
		4 - WEST	4 - DIVIDED, RAISED MEDIAN (ANY TYPE)
			9 - OTHER/UNKNOWN

WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE
<input type="checkbox"/>	1 - LANE CLOSURE	1 - BEFORE THE 1ST WORK ZONE WARNING SIGN	1	1 - DRY	1 - CONCRETE
<input type="checkbox"/>	2 - LANE SHIFT/CROSSOVER	2 - ADVANCE WARNING AREA	2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP, BITUMINOUS, ASPHALT
<input type="checkbox"/>	3 - WORK ON SHOULDER OR MEDIAN	3 - TRANSITION AREA	3 - CURVE LEVEL	3 - SNOW	3 - BRICK/BLOCK
<input type="checkbox"/>	4 - INTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA	4 - CURVE GRADE	4 - ICE	4 - SLAG, GRAVEL, STONE
<input type="checkbox"/>	5 - OTHER	5 - TERMINATION AREA	9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	5 - DIRT
				6 - WATER (STANDING, MOVING)	9 - OTHER/UNKNOWN
				7 - SLUSH	
				9 - OTHER/UNKNOWN	

LIGHT CONDITION	WEATHER
5	99
1 - DAYLIGHT	1 - CLEAR
2 - DAWN/DUSK	2 - CLOUDY
3 - DARK - LIGHTED ROADWAY	3 - FOG, SMOG, SMOKE
4 - DARK - ROADWAY NOT LIGHTED	4 - RAIN
5 - DARK - UNKNOWN ROADWAY LIGHTING	5 - SLEET, HAIL
9 - OTHER / UNKNOWN	6 - SNOW
	7 - SEVERE CROSSWINDS
	8 - BLOWING SAND, SOIL, DIRT, SNOW
	9 - FREEZING RAIN OR FREEZING DRIZZLE
	99 - OTHER / UNKNOWN

NARRATIVE

Unit 1, A Dodge Ram 5500 Dump Truck, was southbound on N Norman. After making the turn onto Norman, Unit 1 driver reports they were distracted from taking on the phone and went off the roadway striking a telephone pole in the yard of 2150 Norman Drive. Unit 1 driver reports the crash occurred around 0030 hours, but they made it home without reporting the crash. There was a trail of fluids from the telephone pole to where the truck was parked.



CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	SCENE CLEARED DATE / TIME	REPORT TAKEN BY
08282020/0751	08282020/0756	08282020/0759	08282020/0926	<input checked="" type="checkbox"/> POLICE AGENCY
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	<input type="checkbox"/> MOTORIST
000	020	110	Myers, Patrick R	<input type="checkbox"/> SUPPLEMENT CORRECTION (IN ADDITION TO ANY OTHER REPORT MADE TO OPR)
			OFFICER'S BADGE NUMBER*	
			747	
			CHECKED BY OFFICER'S NAME*	
			Breznak, Jeffrey A	
			CHECKED BY OFFICER'S BADGE NUMBER*	
			711	

OWNER
 UNIT # 0, 1 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) **STAMM CONTRACTING**
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
4566 ORCHARD ST, Mantua, OH 44255
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
 COMMERCIAL CARRIER PHONE: (INCLUDE AREA CODE)

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

VEHICLE
 LP STATE OH LICENSE PLATE # PIW5152 VEHICLE IDENTIFICATION # 3C7WRNBL2EG171729 VEHICLE YEAR 2014 VEHICLE MAKE Dodge
 INSURANCE VERIFIED INSURANCE COMPANY AUTO OWNERS INS. INSURANCE POLICY # 60692100 COLOR RED VEHICLE MODEL
 COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE US DOT #
 INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT #OCCUPANTS 0, 1 VEHICLE WEIGHT GVWR/GVWR
 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS. HAZARDOUS MATERIAL
 MATERIAL RELEASED PLACARD
 TOWED BY: COMPANY NAME Fall and Stebbins

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY

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

VEHICLE
 WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?
2 1 - YES 2 - NO 9 - OTHER/UNKNOWN AUTONOMOUS MODE LEVEL
0, 1 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 22 - WHEELCHAIR (ANY TYPE) 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP
 1 - NO CARGO BODY TYPE /NOT APPLICABLE 2 - BUS 3 - VEHICLE TOWING ANOTHER MOTORVEHICLE 4 - LOGGING 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAINCHIPS/TRAVEL 8 - POLE 9 - CARGOTANK 10 - FLAT BED 11 - DUMP 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE REFUSE 99 - OTHER / UNKNOWN
 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS 4 - BRAKES 5 - STEERING 6 - FIRE BLOWOUT 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 99 - OTHER / UNKNOWN
 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

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

VEHICLE
 NON-MOTORIST LOCATION AT IMPACT
3 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN
0, 1 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
 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 / ACCA 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

TRAFFIC
 TRAFFICWAY FLOW
2 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
2
 RAIL GRADE CROSSING
1 1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING

VEHICLE
 SEQUENCE OF EVENTS
1, 1 1 - OVERTURN/ROLL-OVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT
0, 9 6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN
4, 0 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 MOTORVEHICLE 24 - OTHER MOVABLE OBJECT
 25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN
 FIRST HARMFUL EVENT 3 MOST HARMFUL EVENT 3

UNIT / NON-MOTORIST DIRECTION
 FROM 1 TO 8
 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
 UNIT SPEED
0, 3, 0
 POSTED SPEED
2, 5
 DETECTED SPEED
1 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED



MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER
2020-00012735

UNIT # **01** NAME: LAST, FIRST, MIDDLE
WEAKLAND, MARK, ADAM

DATE OF BIRTH **06281984** AGE **36** GENDER **M**

ADDRESS: STREET, CITY, STATE, ZIP
2454 NORMAN DR, Stow, OH 44224

CONTACT PHONE - INCLUDE AREA CODE
[REDACTED]

INJURIES 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 **143523**

OL CLASS ENDORSEMENT SELECT UP TO 2 **N** RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY **4** ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA OTHER DRUG CONDITION **1** ALCOHOL TEST STATUS TYPE VALUE **1 1** DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4 **1 1**

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 STATUS TYPE RESULT SELECT UP TO 4

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 STATUS TYPE RESULT 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 - OUT-OF-STATE 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 - MC MOPED ONLY	5 - EXCEPT CLASS A BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5 - TEST GIVEN, RESULTS UNKNOWN
	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER	
	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE	
	8 - THIRD - MIDDLE			8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	
	9 - THIRD - RIGHT SIDE			9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	
	10 - SLEEPER SECTION OF TRUCK CAB			10 - LIMITED TO DAYLIGHT ONLY		
	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)			11 - LIMITED TO EMPLOYMENT		
	12 - PASSENGER IN UNENCLOSED CARGO AREA			12 - LIMITED - OTHER		
	13 - TRAILING UNIT			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		
	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			14 - MILITARY VEHICLES ONLY		
	15 - NON-MOTORIST			15 - MOTOR VEHICLES WITHOUT AIR BRAKES		
	99 - OTHER / UNKNOWN			16 - OUTSIDE MIRROR		
				17 - PROSTHETIC AID		
				18 - OTHER		

INJURED TAKEN BY	EJECTION	OL ENDORSEMENT	CONDITION
1 - NOT TRANSPORTED / TREATED AT SCENE	1 - NOT EJECTED	H - HAZMAT	1 - APPARENTLY NORMAL
2 - EMS	2 - PARTIALLY EJECTED	M - MOTORCYCLE	2 - PHYSICAL IMPAIRMENT
3 - POLICE	3 - TOTALLY EJECTED	P - PASSENGER	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)
9 - OTHER / UNKNOWN	4 - NOT APPLICABLE	N - TANKER	4 - ILLNESS
		Q - MOTOR SCOOTER	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.
		R - THREE-WHEEL MOTORCYCLE	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL
		S - SCHOOL BUS	9 - OTHER / UNKNOWN
		T - DOUBLE & TRIPLE TRAILERS	
		X - TANKER / HAZMAT	

SAFETY EQUIPMENT	TRAPPED	CONDITION	DRUG TEST TYPE
1 - NONE USED	1 - NOT TRAPPED	1 - APPARENTLY NORMAL	1 - NONE
2 - SHOULDER BELT ONLY USED	2 - EXTRICATED BY MECHANICAL MEANS	2 - PHYSICAL IMPAIRMENT	2 - BLOOD
3 - LAP BELT ONLY USED	3 - FREED BY NON-MECHANICAL MEANS	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	3 - URINE
4 - SHOULDER & LAP BELT USED		4 - ILLNESS	4 - BREATH
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	5 - OTHER
6 - CHILD RESTRAINT SYSTEM - REAR FACING		6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	
7 - BOOSTER SEAT		9 - OTHER / UNKNOWN	
8 - HELMET USED			
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)			
10 - REFLECTIVE CLOTHING			
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY			
99 - 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 20-12735	REPORTING AGENCY STOW P.D.	DATE OF CRASH M 8 D 26 Y 20
IN COUNTY OF SUMMIT	CRASH LOCATION 2150 NORMAN DR	

DAMAGED PROPERTY: UTILITY POLE

PROPERTY OWNER: FIRST ENERGY CORP.
76 S MAIN ST.
AKRON, OH 44308
(800) 633-4766

OFFICER'S SIGNATURE X [Signature]	BADGE NUMBER 747
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