

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

2 0 2 2 - 0 0 0 1 4 8 6 8

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
0 2

NUMBER OF UNITS
0 2

UNIT IN ERROR
98 - ANIMAL
99 - UNKNOWN
0 1

COUNTY* **LOCALITY***
1 - CITY
2 - VILLAGE
3 - TOWNSHIP
1
Stow

LOCATION: CITY, VILLAGE, TOWNSHIP*

CRASH DATE / TIME*
09 21 20 22 / 16 08

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** 1 - NORTH
2 - SOUTH
3 - EAST
4 - WEST
FISHCREEK

LOCATION ROAD NAME **ROAD TYPE**
R D

LATITUDE DECIMAL DEGREES
4 1 . 1 5 4 8 1 9

ROUTE TYPE **ROUTE NUMBER** **PREFIX** 1 - NORTH
2 - SOUTH
3 - EAST
4 - WEST
3645

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)

ROAD TYPE

LONGITUDE DECIMAL DEGREES
- 8 1 . 3 9 8 6 7 1

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

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

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

DISTANCE FROM REFERENCE
1 0 .

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

INTERSECTION RELATED
 WITHIN INTERSECTION OR ON APPROACH
 WITHIN INTERCHANGE AREA
NUMBER OF APPROACHES
3

ROADWAY
 ROADWAY DIVIDED

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
0 1

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
7

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 (ANY TYPE)
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
2

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

SURFACE
2

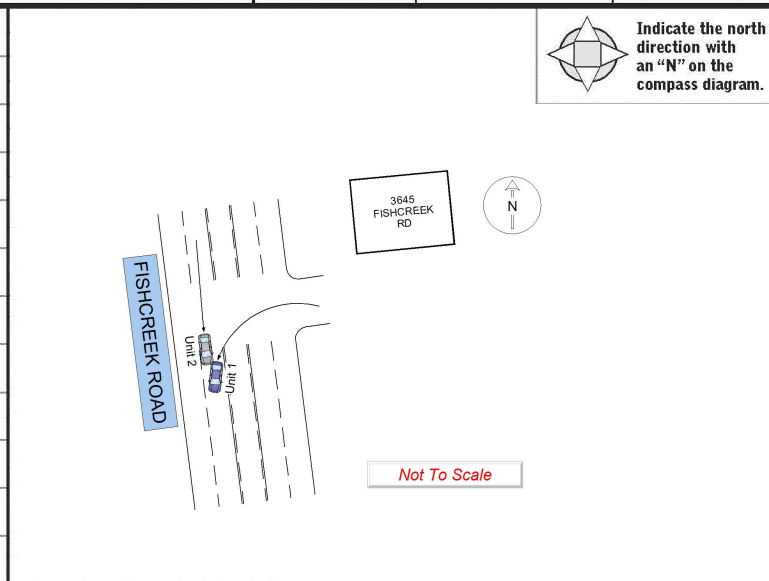
1 - CONCRETE
2 - BLACKTOP, BITUMINOUS, ASPHALT
3 - BRICK/BLOCK
4 - SLAG, GRAVEL, STONE
5 - DIRT
9 - OTHER/UNKNOWN

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

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
0 1

NARRATIVE

UNIT 1 WAS EXITING 3645 FISHCREEK ROAD AND MAKING A LEFT TURN. UNIT 2 WAS TRAVELING SOUTHBOUND ON FISHCREEK ROAD IN THE INSIDE LANE. UNIT 2 STRUCK UNIT 1 CAUSING FUNCTIONAL DAMAGE.



CRASH REPORTED DATE / TIME **DISPATCH DATE / TIME** **ARRIVAL DATE / TIME** **SCENE CLEARED DATE / TIME**
0 9 2 1 2 0 2 2 / 1 6 0 8 **0 9 2 1 2 0 2 2 / 1 6 1 0** **0 9 2 1 2 0 2 2 / 1 6 2 2** **0 9 2 1 2 0 2 2 / 1 7 0 6**

TOTAL TIME ROADWAY CLOSED **OTHER INVESTIGATION TIME** **TOTAL MINUTES**
0 0 5 **0 3 8** **0 9 4**

OFFICER'S NAME*
WONNER, EDWARD

OFFICER'S BADGE NUMBER*
0 0 0 7 4 5

CHECKED BY OFFICER'S NAME*
GINTHER, JOHN

CHECKED BY OFFICER'S BADGE NUMBER*
0 0 0 7 1 5

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

OWNER

UNIT # **0 1** OWNER NAME: LAST, FIRST, MIDDLE () (SAME AS DRIVER)
CARRUTHERS, CAROL ANN

OWNER ADDRESS: STREET, CITY, STATE, ZIP () (SAME AS DRIVER)
6562 INDIANA AVE KENT OH 44240

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

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

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 # **JXA2990** VEHICLE IDENTIFICATION # **2 T 1 KR 3 2 E 4 4 C 2 3 4 1 3 1** VEHICLE YEAR **2 0 0 4** VEHICLE MAKE **Toyota**

INSURANCE VERIFIED INSURANCE COMPANY **PROGRESSIVE** INSURANCE POLICY # **945516283** COLOR **Blu** VEHICLE MODEL **MATRIX**

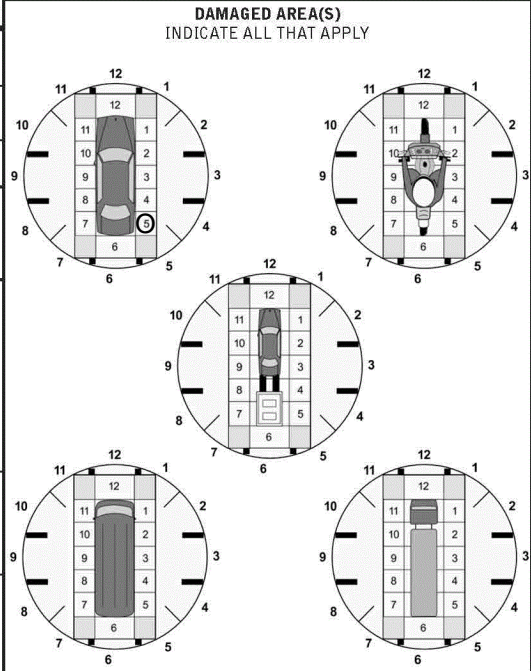
COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE TYPE OF USE

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



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

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 **0 1**

1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER
2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 18 - 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 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 - 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 **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
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 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

CONTRIBUTING CIRCUMSTANCES **0 2**

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

INITIAL POINT OF CONTACT

0 5

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

SEQUENCE OF EVENTS

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 - 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
5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE IN TRANSPORT
3

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

OF THROUGH LANES ON ROAD **4**

RAIL GRADE CROSSING

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

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 / NON-MOTORIST DIRECTION

FROM **3** TO **2**

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

UNIT SPEED

0 1 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)
DORNETTA, CHRISTOPHER JOSEPH

OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)
11651 WEBSTER RD STRONGSVILLE OH 44136

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

OWNER PHONE: INCLUDE AREA CODE (X SAME AS DRIVER)
[REDACTED]

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LOCAL REPORT NUMBER
2 0 2 2 - 0 0 0 1 4 8 6 8

DAMAGE

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

VEHICLE

LP STATE OH LICENSE PLATE # JVN5206 VEHICLE IDENTIFICATION # 1 N X B U 4 E E 3 A Z 2 5 6 5 0 4 VEHICLE YEAR 2 0 1 0 VEHICLE MAKE Toyota

INSURANCE VERIFIED INSURANCE COMPANY PROGRESSIVE INSURANCE POLICY # 958725193 COLOR Sil VEHICLE MODEL COROLLA

COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT #OCCUPANTS 0 2 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
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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? 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
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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
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NON-MOTORIST LOCATION AT IMPACT

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5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS

ACTION 3 **PRE-CRASH ACTIONS** 0 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 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

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

CONTRIBUTING CIRCUMSTANCES 0 1

1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY
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5 - UNSAFE SPEED 11 - DROVE OFF ROAD
6 - IMPROPER TURN 12 - IMPROPER BACKING

TRAFFIC

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

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

OF THROUGH LANES ON ROAD
4

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

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 - 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
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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
3

EVENTS

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
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49 - FIRE HYDRANT

COLLISION WITH FIXED OBJECT - STRUCK

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

UNIT / NON-MOTORIST DIRECTION

FROM 1 TO 2

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

UNIT SPEED
0 2 0

POSTED SPEED
3 5

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

OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER
2 0 2 2 - 0 0 0 1 4 8 6 8

| | | | | | | | | | |
|----------------------|--|---|--|-------------------------------------|---|--------------------------------|---------------------------|----------------------|---------------------|
| OCCUPANT | UNIT # 0 2 | NAME: LAST, FIRST, MIDDLE SCHWARTZ, EVELYNN A | | | DATE OF BIRTH 0 8 1 2 2 0 2 0 | | AGE 0 0 2 | GENDER F | |
| | ADDRESS: STREET, CITY, STATE, ZIP 1592 E SUMMIT ST KENT OH 44240 | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | |
| INJURIES 5 | INJURED TAKEN BY | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED 0 5 | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | SEATING POSITION 0 9 | AIR BAG USAGE 1 | EJECTION 1 | TRAPPED 1 |

| | | | | | | | | | |
|-----------------|--|----------------------------------|--|------------------------------|---|-------------------------|----------------------|-----------------|----------------|
| OCCUPANT | 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 | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED |

| | | | | | | | | | |
|-----------------|--|----------------------------------|--|------------------------------|---|-------------------------|----------------------|-----------------|----------------|
| OCCUPANT | UNIT # | NAME: LAST, FIRST, MIDDLE | | | DATE OF BIRTH | | AGE | GENDER | |
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| INJURIES | INJURED TAKEN BY | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED |

| | | | | | | | | | |
|-----------------|--|----------------------------------|--|------------------------------|---|-------------------------|----------------------|-----------------|----------------|
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| INJURIES | INJURED TAKEN BY | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED |

| INJURIES | SAFETY EQUIPMENT USED | SEATING POSITION | AIR BAG USAGE |
|---------------------------------------|---|--|------------------------------------|
| 1 - FATAL | 1 - NONE USED - VEHICLE OCCUPANT | 1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) | 1 - NOT DEPLOYED |
| 2 - SUSPECTED SERIOUS INJURY | 2 - SHOULDER BELT ONLY USED | 2 - FRONT - MIDDLE | 2 - DEPLOYED FRONT |
| 3 - SUSPECTED MINOR INJURY | 3 - LAP BELT ONLY USED | 3 - FRONT - RIGHT SIDE | 3 - DEPLOYED SIDE |
| 4 - POSSIBLE INJURY | 4 - SHOULDER & LAP BELT USED | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) | 4 - DEPLOYED BOTH FRONT/SIDE |
| 5 - NO APPARENT INJURY | 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING | 5 - SECOND - MIDDLE | 5 - NOT APPLICABLE |
| INJURED TAKEN BY | | 6 - SECOND - RIGHT SIDE | 9 - DEPLOYMENT UNKNOWN |
| 1 - NOT TRANSPORTED /TREATED AT SCENE | 6 - CHILD RESTRAINT SYSTEM - REAR FACING | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) | EJECTION |
| 2 - EMS | 7 - BOOSTER SEAT | 8 - THIRD - MIDDLE | 1 - NOT EJECTED |
| 3 - POLICE | 8 - HELMET USED | 9 - THIRD - RIGHT SIDE | 2 - PARTIALLY EJECTED |
| 9 - OTHER / UNKNOWN | 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) | 10 - SLEEPER SECTION OF TRUCK CAB | 3 - TOTALLY EJECTED |
| GENDER | | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | 4 - NOT APPLICABLE |
| F - FEMALE | 10 - REFLECTIVE CLOTHING | 12 - PASSENGER IN UNENCLOSED CARGO AREA | TRAPPED |
| M - MALE | 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY | 13 - TRAILING UNIT | 1 - NOT TRAPPED |
| U - OTHER / UNKNOWN | 99 - OTHER / UNKNOWN | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | 2 - EXTRICATED BY MECHANICAL MEANS |
| | | 15 - NON-MOTORIST | 3 - FREED BY NON-MECHANICAL MEANS |
| | | 99 - OTHER / UNKNOWN | |

| | | | | | |
|----------------|--|---|--|---------------------|--|
| WITNESS | NAME: LAST, FIRST, MIDDLE REED, MATHEW J | DATE OF BIRTH 0 9 2 4 2 0 0 0 | | AGE 0 2 1 | GENDER M |
| | ADDRESS: STREET, CITY, STATE, ZIP 926 E 348th ST Eastlake OH 44095 | | | | CONTACT PHONE - INCLUDE AREA CODE |

| | | | | | |
|----------------|--|----------------------|--|------------|--|
| WITNESS | NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | | AGE | GENDER |
| | ADDRESS: STREET, CITY, STATE, ZIP | | | | CONTACT PHONE - INCLUDE AREA CODE |

| | | | | | |
|----------------|--|----------------------|--|------------|--|
| WITNESS | NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | | AGE | GENDER |
| | ADDRESS: STREET, CITY, STATE, ZIP | | | | CONTACT PHONE - INCLUDE AREA CODE |

22-14868 On 9/23/22 at approximately 1839 hours, Lisa Clement came to the lobby of the police department to provide additional witness information. I spoke with the male, Mathew Reed, who confirmed he observed the traffic accident. His information has been included in this report. Sgt. Corfman 716

| | | |
|---------------------------------|-----------------------------|------------------------------------|
| LOCAL REPORT NUMBER 22-14868 | REPORTING AGENCY Stow PD | DATE OF CRASH M 9 D 21 Y 22 |
|---------------------------------|-----------------------------|------------------------------------|

FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, Christopher Donath PRINTED
 HEREBY MAKE THIS VOLUNTARY STATEMENT TO
Ptz E. Wanner #745 OFFICER'S NAME AT 3645 Fishers Rd Stow OH
Fishers Rd LOCATION

I was switching to the other lane and the other vehicle was pulling out and pulled out in front into the lane I was in at that moment I tried to stop but collided with the car.

| | |
|--|---|
| ADDRESS OF WITNESS 11651 Webster Rd | PHONE [REDACTED] |
| SIGNATURE OF WITNESS X | OFFICER'S SIGNATURE X Ptz E. Wanner #745 |

| | | |
|---------------------------------|-----------------------------|------------------------------------|
| LOCAL REPORT NUMBER 22-14868 | REPORTING AGENCY Stow PD | DATE OF CRASH M 9 D 21 Y 22 |
|---------------------------------|-----------------------------|------------------------------------|

FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, LISA CLEMENT PRINTED _____ HEREBY MAKE THIS VOLUNTARY STATEMENT TO

Pt E. Wanner #745 OFFICER'S NAME AT 3645 Fishcreek Rd LOCATION
(Fishcreek Rd in Stow, OH)

I was turning left out of Dairy Queen parking lot into the left-hand lane to go left back to Kent. I checked to make sure no one was coming ~~or in the lane~~, and within a few seconds ^(after I was in the lane), someone hit the back corner of the car, passenger side of back bumper. I was surprised, as I hadn't seen anyone coming behind me. It felt like bumper cars at the amusement park. I was already in the lane to turn left when he hit my car.

| | |
|--|---|
| ADDRESS OF WITNESS 6562 INDIANA AVE KENT OH 44240 | PHONE [REDACTED] |
| SIGNATURE OF WITNESS X <u>Lisa Clement</u> | OFFICER'S SIGNATURE X <u>Pt E. Wanner #745</u> |

Statement from Lisa Clement regarding 9.21.2022 accident:

The Narrative section in the police report is incorrect. I was already in the southbound left LEFT HAND LEFT TURN lane when the other party hit the back and corner of the car. The witness, Mathew Reed, at the Tire Choice store at 4541 Kent Rd., Stow Oh 44224, witnessed the accident and told me that the other party came up too fast behind me and tried to swerve out of the way. I attached his statement, but someone should probably contact him for additional details. My first and second questions to the other party when we pulled over at the Tire Choice store was, "Are you okay?" and secondly, "Did you not see me?" and Dornetta said I sideswiped him, which I did not. He hit me, I did not hit him. I was already in the lane for a couple of seconds moving slowly (waiting for the traffic to continue through the light) when he hit me. Upon reflection, I thought he was changing from the right hand left turn lane to the left hand left turn lane (there are two (2) left hand turn lanes with a WHITE LINE between them, crossing the solid white line, because I looked before I turned left, and there was no one in the left hand left turn lane, and there was quite a stretch of that left hand left turn lane as it began further north. I took a video where I describe how much room there was in that lane to prove that I would have seen him coming if he had been in the left hand left turn lane. I am not the one who failed to yield, it was he.

The definition of sideswipe is: "to strike with a glancing blow along the side" according to Merriam-Webster Dictionary. First of all, if anyone did any sideswiping, that would be Dornetta, not me, as he hit me, and I did not hit him. Secondly, there is damage to the back bumper and the corner of the back bumper, and it was not a glancing blow.

Additionally, the speed of my car was closer to 5 miles/hour, I said 5-10 because I really didn't know, but was creeping along waiting for the traffic to continue to move through the light. It could have been less than 5 miles per hour, it was not fast.

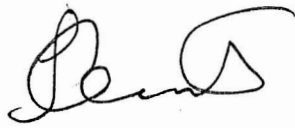
Regarding the police report:

There were definitely contributing circumstances with the other party's vehicle. The police officer cited "none" on his part. He should have been cited with failure to yield, as he is the one who hit my car in the back and back corner. He should have been cited with unsafe speed, as according to the witness, he was going too fast to stop from hitting my car. He may have also made an improper lane change from the adjacent right hand left turn lane to the left hand left turn lane, as there was a white line between them. The police officer included information that the pre-crash action of changing lanes did occur by Dornetta, from what I see in the report, and according to Doretta's statement. The police officer could have cited swerving to avoid on the part of Dornetta, but he did not, as that is what the witness stated occurred. Also, according to the diagram in the police report, it appears the officer placed my vehicle in the right hand left turn lane, not the left hand left turn lane. That is incorrect. I was in the left hand left turn lane only. He is stating that I crossed three lanes of traffic to sideswipe Dornetta—FALSE. I have a video but am having trouble uploading it.

Dornetta called his mother (as it was her policy) and she did arrive after the accident. Also suspicious, the officer spent a lot of time with Dornetta and his mother (at least a half hour or more. I am not sure why it took so long, it was an hour before I was free to go from the whole event. Dornetta originally did

not seem to want to report the accident, but my insurance card advised to call the police, so I am the one who called the police. You can imagine my shock when I was the one who was charged.

The police officer never clarified with me which lane I was claiming to be heading south in. According to the report, he placed me in the incorrect lane. He should have clarified that with me. The report does not even match what Dornetta states in his witness statement. Dornetta states, "I was switching to the other lane," and he states that I pulled out into the lane that he was in, but that is not true. From my estimation, he illegally changed lanes and did not have time to recover because he was going too fast to stop in time. There were white no-passing lines between the lanes at the point where he hit me. He was the one in error- he should not have been changing lanes at that point.

 9/23/2022

I Mathew Reed

Witnessed a motor vehicle accident
at the intersection of Fish Creek Rd
and Kent Rd. The driver of the silver
toyota hit the ~~woman~~ woman in the
blue toyota then pulled into the tire choice
@ 4541 Kent Rd on 9/21/2022

Mathew Reed

Handwritten signature of Mathew Reed



Sgt. *Corrado* Spoke
with Mathew and he confirmed
he witnessed the accident.
9-23-22
LT Titus reviewed
this statement on
9-23-22. He did not speak
to the witness.
LT. *[Signature]* 703