

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

2 0 2 2 - 0 0 0 1 5 6 3 1

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 1
 UNIT IN ERROR
 98 - ANIMAL
 99 - UNKNOWN
0 1

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

CRASH DATE / TIME*
01042022 / 1107
 CRASH SEVERITY
 1 - FATAL
 2 - SERIOUS INJURY SUSPECTED
 3 - MINOR INJURY SUSPECTED
 4 - INJURY POSSIBLE
 5 - PROPERTY DAMAGE ONLY
3

ROUTE TYPE ROUTE NUMBER PREFIX
1 - NORTH
2 - SOUTH
3 - EAST
4 - WEST
 LOCATION ROAD NAME
GRAY
 ROAD TYPE
L A

LATITUDE DECIMAL DEGREES
41.200922

ROUTE TYPE ROUTE NUMBER PREFIX
1 - NORTH
2 - SOUTH
3 - EAST
4 - WEST
 REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)
4847 GRAY LN
 ROAD TYPE

LONGITUDE DECIMAL DEGREES
-81.488268

REFERENCE POINT
3
 1 - INTERSECTION
 2 - MILE POST
 3 - HOUSE #
 DIRECTION FROM REFERENCE
1 - NORTH
2 - SOUTH
3 - EAST
4 - WEST
 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
0 1
 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
 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
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

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

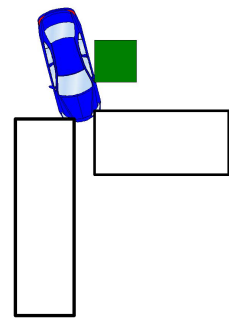
LIGHT CONDITION
1
 1 - DAYLIGHT
 2 - DAWN/DUSK
 3 - DARK - LIGHTED ROADWAY
 4 - DARK - ROADWAY NOT LIGHTED
 5 - DARK - UNKNOWN ROADWAY LIGHTING
 9 - OTHER / UNKNOWN

WEATHER
0 1
 1 - CLEAR 6 - SNOW
 2 - CLOUDY 7 - SEVERE CROSSWINDS
 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT, SNOW
 4 - RAIN 9 - FREEZING RAIN OR FREEZING DRIZZLE
 5 - SLEET, HAIL 99 - OTHER / UNKNOWN

NARRATIVE
Unit #1 was southbound on Gray Ln. from Seasons Rd. Unit #1 failed to maintain control of the vehicle. Unit #1 struck a pallet full of construction materials on the east side of the roadway. Unit #1 continued southbound. Unit #1 struck the curb at the cul-de-sac. Unit #1 continued, lightly sideswiping an electrical box. Unit #1 came to rest when it struck a pile of construction materials and the construction trailer. Unit #1 was transported to the hospital. Follow up investigation determined unit #1 was having medial issues. Unit #1 was submitted for a BMV driver's license re-examination.



SEE OH-2 FOR DETAILS



CRASH REPORTED DATE / TIME 1 0 0 4 2 0 2 2 / 1 1 0 7		DISPATCH DATE / TIME 1 0 0 4 2 0 2 2 / 1 1 0 8		ARRIVAL DATE / TIME 1 0 0 4 2 0 2 2 / 1 1 1 6		SCENE CLEARED DATE / TIME 1 0 0 4 2 0 2 2 / 1 1 3 6		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	
TOTAL TIME ROADWAY CLOSED 0 0 0		OTHER INVESTIGATION TIME 1 5 0		TOTAL MINUTES 1 7 4		OFFICER'S NAME* REEDY, JESSE		CHECKED BY OFFICER'S NAME* TITUS, MICHAEL	
				OFFICER'S BADGE NUMBER* 0 0 0 7 3 7		CHECKED BY OFFICER'S BADGE NUMBER* 0 0 0 7 0 3		<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OSPS)	

OWNER

VEHICLE

EVENT(S)

UNIT # 01 **OWNER NAME:** LAST, FIRST, MIDDLE (X SAME AS DRIVER)
BROOKS, FRANKIE L

OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)
4903 STATE RD 12 PENINSULA OH 44264

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

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

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE OH **LICENSE PLATE #** GPV5618 **VEHICLE IDENTIFICATION #** 1HGCM82223A033810 **VEHICLE YEAR** 2003 **VEHICLE MAKE** Honda

INSURANCE VERIFIED **INSURANCE COMPANY** PROGRESSIVE **INSURANCE POLICY #** 936206636 **COLOR** Blu **VEHICLE MODEL** ACCORD

COMMERCIAL **GOVERNMENT** **IN EMERGENCY RESPONSE** **US DOT #** _____ **TOWED BY:** COMPANY NAME _____

INTERLOCK DEVICE EQUIPPED **HIT/SKIP UNIT** **#OCCUPANTS** 01 **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
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

AUTONOMOUS MODE LEVEL 0

1 - YES	2 - NO	9 - OTHER / UNKNOWN	0 - NO AUTOMATION	1 - DRIVER ASSISTANCE	2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION	4 - HIGH AUTOMATION	5 - FULL AUTOMATION	9 - UNKNOWN
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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	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 3 **PRE-CRASH ACTIONS** 01

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 99

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</u> <u>4</u>	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT
2 <u>0</u> <u>9</u>	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 <u>4</u> <u>3</u>	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION	18 - ANIMAL - DEER	24 - OTHER MOVABLE OBJECT
4 <u>4</u> <u>0</u>	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	19 - ANIMAL - OTHER	
5 <u>2</u> <u>4</u>	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	15 - PEDALCYCLE	20 - MOTOR VEHICLE IN TRANSPORT	
6 <u>5</u> <u>2</u>				21 - PARKED MOTORVEHICLE	

COLLISION WITH FIXED OBJECT - STRUCK

4 <u>4</u> <u>0</u>	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT
5 <u>2</u> <u>4</u>	26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	51 - WALL
6 <u>5</u> <u>2</u>	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** 4

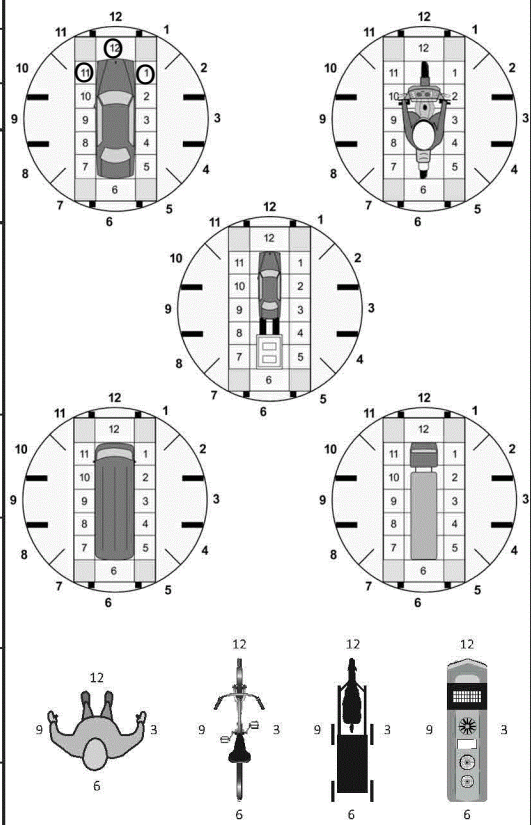
LOCAL REPORT NUMBER
2022-00015631

DAMAGE

DAMAGE SCALE

4 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

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 1 - ONE-WAY <u>2</u> 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
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OF THROUGH LANES ON ROAD 2

RAIL GRADE CROSSING 1

1 - NOT INVOLVED	2 - INVOLVED-ACTIVE CROSSING	3 - INVOLVED-PASSIVE CROSSING
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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 4 5

POSTED SPEED 2 5

DETECTED SPEED 1

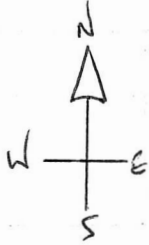
1 - STATED / ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED

OHIO TRAFFIC CRASH - DIAGRAM/NARRATIVE CONTINUATION

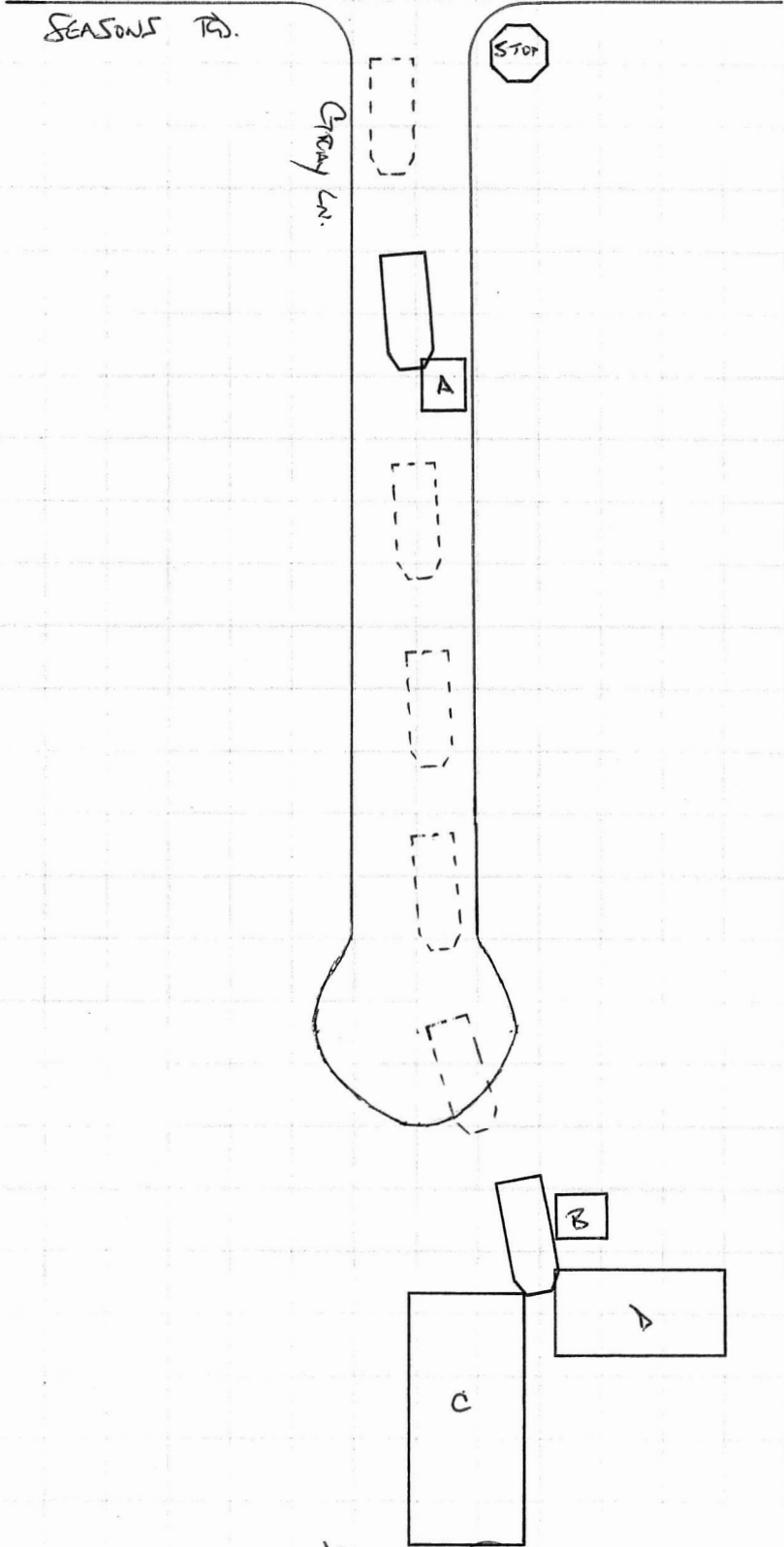
OH - 2

LOCAL REPORT NUMBER 22-15631	REPORTING AGENCY Stow PD	DATE OF CRASH M 10 10 4 1Y22
IN COUNTY OF Summit	CRASH LOCATION Gray Ln. @ 4847 Gray	

NOT TO SCALE



- A = PALLET OF CAULK
- B = ELECTRICAL BOX
- C = CONSTRUCTION TRAILER
- D = PILE OF REBAR



OFFICER'S SIGNATURE X PTL [Signature] 737	BADGE NUMBER
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LOCAL REPORT NUMBER 22-15631	REPORTING AGENCY STOW P.D.	DATE OF CRASH M 10 D 04 Y 22
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FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, John Lonchyna HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

Off J. Bailey 743 AT 4847 GRAY LN.
OFFICER'S NAME LOCATION

At approx. 11:25 a.m., I was in trailer looking north out of window and saw a blue HONDA Accord driving erratic heading south on Gray Lane. I saw him drive through a pallet of caulk along east curb of Gray Lane and then hopped the curb once or multiple times. I ran out of trailer waving hands in the air to get his attention while yelling at him. His speed did not decrease at all. I got out of the way of the moving vehicle as he ran in between the electric CT cabinet & transformer and my Ford truck. I checked on him and he was delusional. He asked what he hit and where he was. I told him to stay in the vehicle and I called 911. I got disconnected and called back into 911 and was told Police + Fire were in route. I took photos of scene and moved my truck out of the way. During accident, other construction workers helped with situation.

ADDRESS OF WITNESS 360 Regal Oaks Circle, Aurora, OH 44202	PHONE [REDACTED]
SIGNATURE OF WITNESS X <i>[Signature]</i>	OFFICER'S SIGNATURE X OFC <i>[Signature]</i> 743

8/13/1984



LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH		
		M	D	Y

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I, DAVID BECK HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

OFFICER'S NAME AT GRAY LN 9th SEASONS
LOCATION

A GREY/BLUE HONDA CAME DOWN THE ROAD AND HIT A PALLET OF CONSTRUCTION MATERIAL AT A HIGH RATE OF SPEED AND NEARLY HITS PEDESTRIAN (SUPERVISOR OF SBSITE) AND PICKUP, AND PROCEEDED TO HIT JOB OFFICE TRAILER AND STACK OF WIRE MESH.

ADDRESS OF WITNESS
15 HOMESTEAD ST. SEVILLE OH. 44273

PHONE
 [REDACTED]

SIGNATURE OF WITNESS

X [Signature]

10/04/22

OFFICER'S SIGNATURE

X



LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH		
		M	D	Y

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I, Michael Mazur HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

OFFICER'S NAME _____ AT _____ LOCATION _____

I was painting on a lift when I heard the Superintendent wave his arms and yell for ~~something~~ to stop. He then dives out of the way, the car climbs the curb, misses the SI's truck and crashes into a stack of metal grates and the SI's trailer. I get off the lift and the driver seemed to be passive.

ADDRESS OF WITNESS <u>7737 Klein Dr. Middleburg Heights OH 44130</u>	PHONE [REDACTED]
SIGNATURE OF WITNESS X <u>Mike Mazur</u>	OFFICER'S SIGNATURE X [REDACTED]



TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH		
		M	D	Y

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

I, Earl Zwisler HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

AT 4847 Gray Lane
LOCATION
Seasons Business Center 6

OFFICER'S NAME

I was on a lift on the south side of Building 6 in the Fogg development when I heard a yell. I looked toward the job trailer just as John jumped out of the way. A blue sedan drove past him, through the end cul-de-sac, between ~~the~~ John's black Pick up and two green transformers, and crashed into the corner of the job trailer, knocking the job trailer back a few feet. I descended to the ground and ran over to help. John was on the phone with 911, so I went to the driver's side of the blue car to check on the driver. The driver was inside wiping a bloody nose with kleenex, I asked if he was alright. He looked up at me and said yes. Then, "What did I hit?" I said, "You almost hit everything, but please stay in the car, help is on the way." His driver's door was pinned by the transformer, so he could only open it a few inches. ~~He~~ He was shaking, but otherwise seemed OK, so I just stayed by the vehicle until the cop showed up. The emergency guys showed up and took the driver away in a stretcher.

ADDRESS OF WITNESS <u>67 Fenton Ave.</u>	PHONE [REDACTED]
SIGNATURE OF WITNESS <u>X Earl Zwisler</u>	OFFICER'S SIGNATURE <u>X</u>

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH M 10 D 04 Y 2022
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FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, Alexandros J. Filippou HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

OFFICER'S NAME _____ AT _____ LOCATION _____

I was on the backside of the Building Painting and All of a sudden I see A car coming down the street with high speed Almost hitting the Superintendent And so close to the transformers. As the Superintendent quickly moved out of the way After waving his hands trying to distract the driver, the driver then hit the cement mesh and the job trailer, After the driver hit the Superintendent rushed over to see if the driver was OK while he was on the phone with 911 the driver did not come out of his vehicle because he was stuck inbetween the cement mesh and the transformer box, Myself and 2 other painters rushed over As soon as we saw the whole thing play out and checked to see if the driver was in any danger, he was very confused and did not know what was going on or what had happened. We waited by the car until EMS arrived at the scene and then after the EMS arrived we went back to painting. The driver was pulled out of the car and seemed to be alert for the most part but was very confused.

983 Supermarkt Ln Brunswick OH 44212

ADDRESS OF WITNESS
 Alexandros J. Filippou

SIGNATURE OF WITNESS X OFFICER'S SIGNATURE X