





# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
**21-068867**

<b>UNIT #</b> 1	<b>NAME: LAST, FIRST, MIDDLE</b> ROSAS, DIANA DOYMAR		<b>DATE OF BIRTH</b> 02/23/1984		<b>AGE</b> 37	<b>GENDER</b> F				
<b>ADDRESS: STREET, CITY, STATE, ZIP</b> 4534 SKYLARK DR, ENGLEWOOD, OH, 45322					<b>CONTACT PHONE - INCLUDE AREA CODE</b> redacted per ORC 149.43(A)(1)(mm)					
<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> 04	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	<b>SEATING POSITION</b> 01	<b>AIR BAG USAGE</b> 1	<b>EJECTION</b> 1	<b>TRAPPED</b> 1	
<b>OL STATE</b> OH	<b>OPERATOR LICENSE NUMBER</b> redacted per ORC 4501:1-12		<b>OFFENSE CHARGED</b> 432.16	<b>LOCAL CODE</b> <input type="checkbox"/>	<b>OFFENSE DESCRIPTION</b> Right-of-Way - Turning Left		<b>CITATION NUMBER</b> 208945			
<b>OL CLASS</b> 4	<b>ENDORSEMENT</b> SELECT UPTO 2	<b>RESTRICTION</b> SELECT UPTO 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 TYPE VALUE		<b>DRUG TEST(S)</b> STATUS TYPE RESULT SELECT UPTO 4	

<b>UNIT #</b> 2	<b>NAME: LAST, FIRST, MIDDLE</b> STILES, JO ANN		<b>DATE OF BIRTH</b> 06/03/1942		<b>AGE</b> 79	<b>GENDER</b> F				
<b>ADDRESS: STREET, CITY, STATE, ZIP</b> 422 AMOR PL, VANDALIA, OH, 45377					<b>CONTACT PHONE - INCLUDE AREA CODE</b> redacted per ORC 149.43(A)(1)(mm)					
<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> 04	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	<b>SEATING POSITION</b> 01	<b>AIR BAG USAGE</b> 1	<b>EJECTION</b> 1	<b>TRAPPED</b> 1	
<b>OL STATE</b> OH	<b>OPERATOR LICENSE NUMBER</b> redacted per ORC 4501:1-12		<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 UPTO 2	<b>RESTRICTION</b> SELECT UPTO 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 TYPE VALUE		<b>DRUG TEST(S)</b> STATUS TYPE RESULT SELECT UPTO 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 <input type="checkbox"/> 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 UPTO 2	<b>RESTRICTION</b> SELECT UPTO 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 UPTO 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 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	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
<b>INJURED TAKEN BY</b>		<b>EJECTION</b>	<b>OL ENDORSEMENT</b>			<b>ALCOHOL TEST TYPE</b>
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
<b>SAFETY EQUIPMENT</b>		<b>TRAPPED</b>			<b>CONDITION</b>	<b>DRUG TEST TYPE</b>
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			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	1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER
						<b>DRUG TEST RESULT(S)</b>
						1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS



# OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER

21-068867

<b>OCCUPANT</b>	UNIT # 2	NAME: LAST, FIRST, MIDDLE GUDORF, PATRICIA LOUISE			DATE OF BIRTH 05/22/1941	AGE 80	GENDER F			
	ADDRESS: STREET, CITY, STATE, ZIP 1018 DERRINGER DR, ENGLEWOOD, OH, 45322				CONTACT PHONE - INCLUDE AREA CODE redacted per ORC 149.43(A)(1)(mm)					
	INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 04	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 03	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
<b>OCCUPANT</b>	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
<b>OCCUPANT</b>	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
<b>OCCUPANT</b>	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

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
<b>INJURED TAKEN BY</b>	6 - CHILD RESTRAINT SYSTEM - REAR FACING	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - BOOSTER SEAT	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	<b>EJECTION</b>
2 - EMS	8 - HELMET USED	8 - THIRD - MIDDLE	1 - NOT EJECTED
3 - POLICE	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED
9 - OTHER / UNKNOWN	10 - REFLECTIVE CLOTHING	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED
	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE
	99 - OTHER / UNKNOWN	12 - PASSENGER IN UNENCLOSED CARGO AREA	<b>TRAPPED</b>
		13 - TRAILING UNIT	1 - NOT TRAPPED
		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	

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

**OWNER**

UNIT # 1 OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)  
**GONZALEZ, ERMIK YEFARG**

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)  
**4534 SKYLARK DR, ENGLEWOOD, OH, 45322**

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

OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER)  
**redacted per ORC**

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**VEHICLE**

LP STATE OH LICENSE PLATE # JGQ5408 VEHICLE IDENTIFICATION # 5TDHZR9H9LS006980 VEHICLE YEAR 2020 VEHICLE MAKE Toyota

INSURANCE VERIFIED  INSURANCE COMPANY STATE FARM INSURANCE POLICY # C395533-F06-35B COLOR RED VEHICLE MODEL Highlander

TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE

US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME \_\_\_\_\_

INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT  #OCCUPANTS 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: 3 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 (6+ 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 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 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 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, 99 - OTHER / UNKNOWN

CARGO BODY TYPE 1 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 - 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 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

**NON-MOTORIST LOCATION AT IMPACT** 1 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** 6 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** 2 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 20 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**

4 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** 1 **MOST HARMFUL EVENT** 1

**DAMAGE**

**DAMAGE SCALE**

2 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**

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

**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** 3

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

**UNIT / NON-MOTORIST DIRECTION**

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

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

**UNIT SPEED** 10

**POSTED SPEED** 35

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

**OWNER**

UNIT # 2 OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)  
**STILES, JO ANN**

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)  
**422 AMOR PL, VANDALIA, OH, 45377**

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

OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER)  
**redacted per ORC**

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**VEHICLE**

LP STATE OH LICENSE PLATE # ETD4553 VEHICLE IDENTIFICATION # 1G4GB5G38EF183606 VEHICLE YEAR 2014 VEHICLE MAKE Buick

INSURANCE VERIFIED  INSURANCE COMPANY THE CINCINNATI INSURAI INSURANCE POLICY # A010805322 COLOR TAN VEHICLE MODEL Lacrosse

TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE

US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME \_\_\_\_\_

INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT  #OCCUPANTS 2 VEHICLE WEIGHT GVWR/GCWR: 1 - ≤10K LBS., 2 - 10,001 - 26K LBS., 3 - >26K LBS.

HAZARDOUS MATERIAL:  MATERIAL RELEASED CLASS # \_\_\_\_\_  PLACARD PLACARD ID # \_\_\_\_\_

UNIT TYPE: 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 (6+ 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 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN  
 1 - YES 2 - NO 9 - OTHER / UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

SPECIAL FUNCTION: 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: 1 1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTORVEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER  
 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 9 - CARGO TANK 13 - AUTO TRANSPORTER  
 7 - GRAIN/CHIPS/GRAVEL 10 - FLAT BED 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

**DAMAGE**

DAMAGE SCALE: 2 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]

**NON-MOTORIST LOCATION AT IMPACT**: 1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIUM CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE  
 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDLANE - 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 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 PRE-CRASH ACTIONS 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE  
 5 - BOTH STRIKING & STRUCK 6 - MAKING LEFT TURN 12 - DRIVERLESS 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN  
 9 - OTHER / UNKNOWN

**INITIAL POINT OF CONTACT**: 11 0 - NO DAMAGE 14 - UNDERCARRIAGE  
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
 13 - TOP 99 - UNKNOWN

**CONTRIBUTING CIRCUMSTANCES**: 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 / ACD/A 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE  
 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - ILLEGALLY 19 - LOAD SHIFTING/FALLING/ SPILLING 23 - OPENING DOOR INTO ROADWAY  
 4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - SWERVING TO AVOID 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION  
 5 - UNSAFE SPEED 11 - DROVE OFF ROAD 17 - WRONG WAY 21 - OTHER IMPROPER ACTION  
 6 - IMPROPER TURN 12 - IMPROPER BACKING

**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: 3

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

**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 - 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 MOTORVEHICLE  
 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 20 - MOTORVEHICLE IN TRANSPORT  
 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 21 - PARKED MOTORVEHICLE

**COLLISION WITH FIXED OBJECT - STRUCK**

4 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 48 - TREE 54 - OTHER FIXED OBJECT  
 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 49 - FIRE HYDRANT 99 - OTHER / UNKNOWN

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

**UNIT / NON-MOTORIST DIRECTION**

FROM 2 TO 1

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

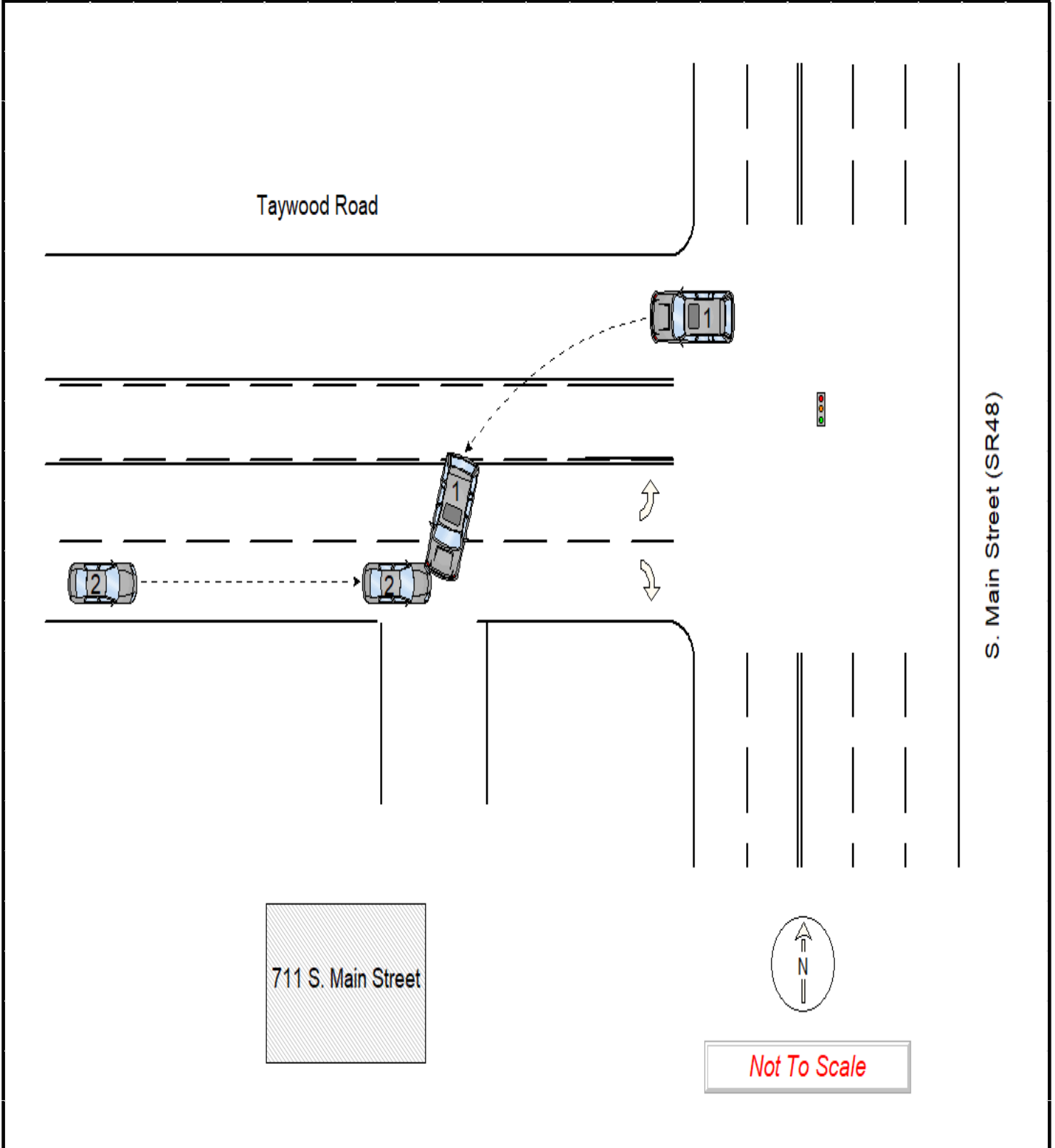
UNIT SPEED: 15

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

POSTED SPEED: 35



LOCAL REPORT NUMBER 21-068867	REPORTING AGENCY ENGLEWOOD POLICE	DATE OF CRASH M 9   D 10   Y 2021
IN COUNTY OF MONTGOMERY	CRASH LOCATION Taywood /State Route 48	



OFFICER'S SIGNATURE <b>X</b> Ofc. N.Z. Rosenbauer	BADGE NUMBER 246
--	---------------------