| OF PUBLIC SAFETY | RAFFIC CRAS | SH REPORT | *DENOTE | S MANDATORY F | IELD FOR SUPPL | EMENT REPORT | L | OCAL REPORT NUMBE | 2 * | | |
|--|--|---|-----------------------|-------------------------------|-----------------------------------|----------------------------|-------------------------|---|--|--|--|
| PHOTOS TAKEN | ☐ 0H-2 🔀 0H- | 1.0011 1115051 | | | | | L P 1 9 | 0 6 1 4 0 | 0 2 9 3 4 | | |
| SECONDARY CRASH OH-1P OTHER REPORTING AGENCY NAME* | | | | | | NCIC* | HIT/SKIP 1 - SOLVED | NUMBER OF UNITS | UNIT IN ERROR | | |
| | PRIVATE PROPE | OLL: II TOTA | | PD | L | 0,8,3,1,6 | L 2 - UNSOLVED | | 77-01414104414 | | |
| 8 3 3 3 2 1 | VILLAGE CLEAD | N: CITY, VILLAGE, TOWNS CREEK | нір* | | | | CRASH DATE /1 | | ASH SEVERITY - FATAL | | |
| ROUTE TYPE ROUTE NU | TOWNSHIP OLLAN | | NAME | | | ROAD TYPE | 0,6,1,4,2,0,1,9, | | - SERIOUS INJURY SUSPECTED | | |
| S R 48 | 2 - SOU 3 - EAS | ITH | , manue | | | ROADTITE | | | - MINOR INJURY | | |
| | MBER PREFIX 1 - NOR | | AD NAME (R | OAD, MILEPOST, F | IOUSE #) | ROAD TYPE | 3 9 5 0 2 LONGITUDE DE | | SUSPECTED - INJURY POSSIBLE | | |
| ROUTE TYPE ROUTE NU | 2 - SOU E 3 - EAS 4 - WES | TH | | , | , | R.D. | | 5 | - PROPERTY DAMAGE | | |
| REFERENCE POINT | DIRECTION 4-WES | ROUTE TY | DE . | | ROAD TYPE | | | 0 3 8 | ONLY | | |
| 1 - INTERSECTION 2 - MILE POST | FROM REFERENCE 1 - NORTH | IR - INTERSTATE RO | | AL - ALLEY | HW-HIGHWAY | RD - ROAD | | I ntersection relate RSECTION OR ON APPRO | | | |
| 1 3 - HOUSE # | 2 - SOUTH 3 - EAST | US - FEDERAL US RO | UTE | AV - AVENUE BL - BOULEVARD | LA - LANE MP - MILEPOST | SQ - SQUARE ST - STREET | | | 4 | | |
| DISTANCE | 4 - WEST DISTANCE | SR - STATE ROUTE CR - NUMBERED COL | INTY ROUTE | CR - CIRCLE | OV - OVAL | TE - TERRACE | WITHIN INTER | RCHANGE AREA NUM | MBER OF APPROACHES | | |
| FROM REFERENCE | UNIT OF MEASURE 1 - MILES 2 - FEET | TR - NUMBERED TOV | /NSHIP | CT - COURT DR - DRIVE | PK - PARKWAY PI - PIKE | TL - TRAIL WA - WAY | | | | | |
| | 3 - YARDS | ROUTE | | HE - HEIGHTS | PL - PLACE | | ROADWAY DIV | IDEO | | | |
| LOCATION 1 - ON ROADWA | Y 9 - CROSSO | | 1 | WANNER OF CRAS | | | DIRECTION OF TRAVEL | MEDIA | N TYPE | | |
| O. 1. 2-ON SHOULDE | ER 10-DRIVE | WAY/ALLEY ACCESS | _ | DETWEEN | 4 - REAK-TO-REA 5 - BACKING | К | 1 - NORTH 2 - SOUTH | | 1 - DIVIDED FLUSH MEDIAN (< 4 FEET) | | |
| 3 - IN MEDIAN 4 - ON ROADSID | | 'AY GRADE CROSSING ED USE PATHS OR | | VEHICLES IN | 6 - ANGLE 7 - SIDESWIPE, S | AME DIRECTION | 3 - EAST | 2 - DIVIDED (≥4 FEET | FLUSH MEDIAN T) | | |
| 5 - ON GORE 6 - OUTSIDE TRA | TRAIL AFFIC WAY 13-BIKE L | | 1 | | 8 - SIDESWIPE, 0 | | 4 - WEST | | DEPRESSED MEDIAN RAISED MEDIAN | | |
| 7 - ON RAMP | 14-T0LL E | воотн |) - | HEAD-ON | 9 - OTHER / UNKI | 4OWN | | (ANY TYP | E) | | |
| 8 - OFF RAMP | 99-01HER | R / UNKNOWN | | | | | | 9 - OTHER/UI | | | |
| WORK ZONE RELAT | ED | WORK ZONE TY 1 - LANE CLOSURE | PE. | | ON OF CRASH IN - BEFORE THE 19 | | CONTOUR | CONDITIONS | SURFACE | | |
| WORKERS PRESENT | т | 2 - LANE SHIFT/CRO 3 - WORK ON SHOUL | | 2 | WARNING SIGN - ADVANCE WAR | | 3 1 - STRAIGHT LEVEL | 11 - DRY | 21 - CONCRETE | | |
| LAW ENFORCEMEN | T PRESENT | OR MEDIAN | | 3 | -TRANSITION AF | REA | | 2 - WET | 2 - BLACKTOP, | | |
| ACTIVE SCHOOL ZO | NE | 4 - INTERMITTENT | OR MOVING W | | - ACTIVITY AREA - TERMINATION | | 3 - CURVE LEVEL | 3 - SNOW | BITUMINOUS, ASPHALT | | |
| LIGHT C | ONDITION | | WE | ATHER | | | | 4 - ICE 5 - SAND, MUD, DIRT, | 3 - BRICK/BLOCK | | |
| 1 - DAYLIGHT | | 1 - 0 | | 6 - SNOW | | | | OIL, GRAVEL | VEL STONE | | |
| 2 - DAWN/DUSK 3 - DARK – LIGHT | TED ROADWAY | I i U i I i | .OUDY)G, SMOG, SM | 7-SEVERE OKE 8-BLOWIN | CROSSWINDS G SAND, SOIL, DI | RT, SNOW | | 6 - WATER (STANDING, MOVING) | (ING) | | |
| 1 | WAY NOT LIGHTED OWN ROADWAY LIGHT | 4 - RA ING 5 - SI | AIN .EET, HAIL | | NG RAIN OR FREE / UNKNOWN | EZING DRIZZLE | | 7 - SLUSH | 9 - OTHER/UNKNOWN | | |
| 9 - OTHER / UNK | | | | | | | | 9 - OTHER/UNKNOWN | | | |
| NARRATIVE | | | | | | | | | Indicate the north | | |
| UNIT 01 WA | S TRAVEL | ING BEH | IND U | NIT 02 | | | | N | an "N" on the compass diagram. | | |
| NORTHBOL | JND ON N | ST RT 48 | WHE | TA I | | | | (No | T TO SCALE | | |
| THE INTERS | | | | | _ \ | | _/ // | \sim | | | |
| UNIT 02 SLO | | | | , | | | | | | | |
| AHEAD. UN | | | | | /== | | | | / | | |
| | | | | | | | | | | | |
| CLEAR DIST | | | STRU | JCK | | | _ | | | | |
| UNIT 02 TO | THE REAL | ₹., | | | WP | EKIN RI | \mathfrak{S} | EP | EKIN RD - | | |
| | | | | | | | | 2 | | | |
| | | | | | | | | \forall | | | |
| | | | | | | | | 11111 | | | |
| | | | | | | | | 10 | | | |
| CRASH REPORTED DA | TE/TIME | DISPATCH DATE / | TIME | ARI | RIVAL DATE / TIM | E I | NSTR | | EPORT TAKEN BY | | |
| 06142019 | | | | | | | 6 1 4 2 0 1 9 | <u> </u> | POLICE AGENCY | | |
| TOTAL TIME | OTHER T | OTAL OFFICER'S | | | | CHECKED BY OFFIC | | | MOTORIST | | |
| ROADWAY CLOSED INVES | OTTGRITON ITME WII | JASON | L BATES | | | CPL [| RIC NEY | | SUPPLEMENT (CORRECTION OR ADDITION | | |
| 0 | 3 0 1 | 0 6 1 | OFFICER'S | BADGE NUMBER | ` , <u> </u> | | OFFICER'S BADGE N | JMBER* | TO AM EXISTING REPORT SENT TO ODPS) | | |
| HSY7001 OH1 1/19 [760-082 | | | (4) | | | , , , | 0 10 1 | | 2005 | | |

53 - TUNNEL

54 - OTHER FIXED OBJECT

99 - OTHER / UNKNOWN

POSTED SPEED

5 5

27 - BRIDGE PIER OR ABUTMENT

☐ FIRST HARMFUL EVENT

28 - BRIDGE PARAPET

30 - GUARDRAIL FACE

29 - BRIDGE RAIL

BARRIER

BARRIER

35 - MEDIAN CONCRETE

36 - MEDIAN OTHER BARRIER

40 - UTILITY POLE

OR SUPPORT

42 - CULVERT

1 MOST HARMFUL EVENT

41 - OTHER POST, POLE

47 - MATERIOX

49 - FIRE HYDRANT

48-TREE

2 - CALCULATED / EOR

3 - UNDETERMINED

OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)

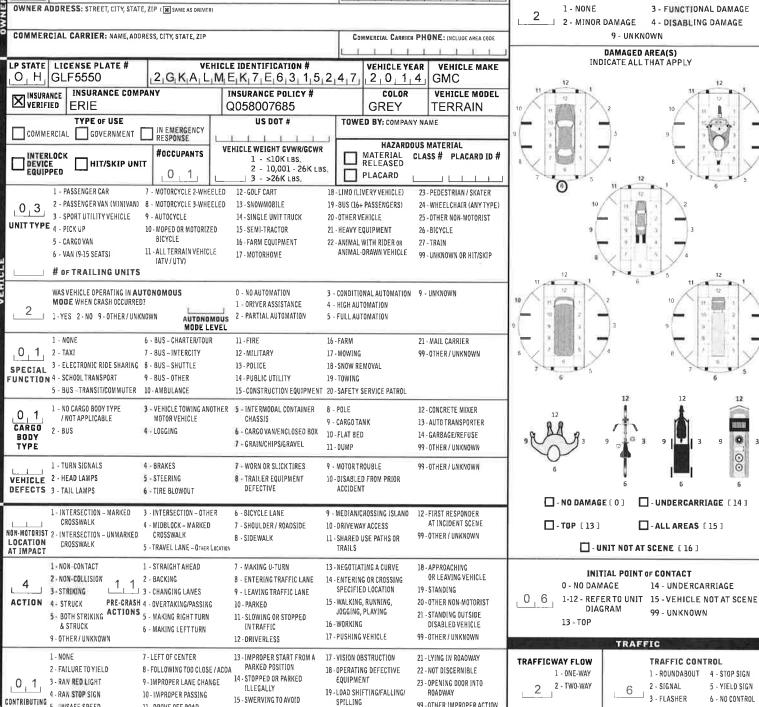
UNIT#

0,2

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|---|---|----|---|---|----|--|
| - | | ** | - | - | - | |

DAMAGE SCALE

■ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE



15 - SWERVING TO AVOID

NON-COLLISION

OPPOSITE DIRECTION OF

COLLISION WITH FIXED OBJECT - STRUCK

11 - CROSS CENTERLINE -

12 - DOWNHILL RUNAWAY

13 - OTHER NON-COLLISION

16 - WRONG WAY

TRAVEL

14 - PEDESTRIAN

15 - PEDALCYCLE

SUPPORT

40 - UTILITY POLE

41 - OTHER POST, POLE

OR SUPPORT

42 - CULVERT 1 MOST HARMFUL EVENT

37 - TRAFFIC SIGN POST

38 - OVERHEAD SIGN POST

39 - LIGHT / LUMINARIES

11 - DROVE OFF ROAD

12 - IMPROPER BACKING

6 - EQUIPMENT FAILURE

7 - SEPARATION OF UNITS

8 - RAN OFF ROAD RIGHT

9 - RAN OFF ROAD LEFT

10 - CROSS MEDIAN

31 - GUARDRAIL END

32 - PORTABLE BARRIER

35 - MEDIAN CONCRETE

BARRIER

33 - MEDIAN CABLE BARRIER

36 - MEDIAN OTHER BARRIER

SPILLING

20 - IMPROPER CROSSING

16 - RATI WAY VEHICLE

17 - ANIMAL - FARM

18-ANIMAL - DEER

19 - ANIMAL - OTHER

20 - MOTOR VEHICLE IN

21 - PARKED MOTOR VEHICLE

TRANSPORT

43 - CURB

44 - DITCH

46 - FENCE

4B - TREE

47 - MAIL BOX

45 - EMBANKMENT

49 - FIRE HYDRANT

OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)

of THROUGH LANES ON ROAD

99 - OTHER IMPROPER ACTION

22 - WORK ZONE MAINTENANCE

EQUIPMENT

23 - STRUCK BY FALLING

SHIFTING CARGO OR

BY A MOTOR VEHICLE

24 - OTHER MOVABLE OBJECT

50 - WORK ZONE MAINTENANCE

EQUIPMENT

54 - OTHER FIXED OBJECT

99 - OTHER / UNKNOWN

51 - WALL

52 - BUILDING

53 - TUNNEL

ANYTHING SET IN MOTION

3 - FLASHER

6 - NO CONTROL RAIL GRADE CROSSING

_ 2

1 - NOT INVOLVED

2 - INVOLVED-ACTIVE CROSSING

3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION

1 - NORTH 5 - NORTHEAST

2 - SOUTH 6 - NORTHWEST 2 ro 1

3 - EAST 7 - SOUTHEAST

4 - WEST 8 - SOUTHWEST

9 - OTHER / UNKNOWN

DETECTED SPEED

UNIT SPEED

, 0 , 0 , 0 ,

1 - STATED / ESTIMATED SPEED

2 - CALCULATED/EDR 3 - UNDETERMINED

POSTED SPEED , 5 , 5 ,

CONTRIBUTING 5 - UNSAFE SPEED

SEQUENCE OF EVENTS

2 0 1 - OVERTURN/ROLLOVER

6 - IMPROPER TURN

2 - FIRE/EXPLOSION

5 - CARGO / FOUIPMENT

25 - IMPACT ATTENUATOR

/ CRASH CUSHION

26 - BRIDGE OVERHEAD

28 - BRIDGE PARAPET

30 - GUARDRAIL FACE

J FIRST HARMFUL EVENT

29 - BREDGE RAIL

27 - BRIDGE PIER OR ABUTMENT SABBIES

LOSS OR SHIFT

3 - IMMERSION

J 4 - JACKKNIFE

| OHIO DE | OFF UNITED AND THE SAFETY MOTORIST / NON-MOTORIST | | | | | | | | LOCAL REPORT NUMBER | | | | | | | |
|--------------------------------------|---|--|--|---|----------------------------|-----------------------------------|---|---|---|--|---|--|--|------------------|----------------|--|
| UNIT # NAME: LAST, FIRST, MIDDLE | | | | | | | | L P 1 9 0 6 1 4 0 0 2 9 3 4 | | | | | | | | |
| 0 1 | | | | | | | | | DATE OF BIRTH AGE GENDER | | | | | | | |
| | DRESS: STREET, CITY, STATE, ZIP | | | | | | | | 0 6 / 1 9 / 1 9 8 6 3 2 F | | | | | | | |
| E | NNE MARIE DR, MORROW, OH 45152 | | | | | | | | 9 3 6 6 4 8 3 9 4 7 | | | | | | | |
| 9 | INJURED | EMS AGENCY (NAME) | 711 1010 | _ | TAKENTO | : MEDICAL FACILITY | (NAME, CITY) | SAFETY EQUIPMENT | 1 | | SEATING POSITI | | | | | |
| NON 5 | TAKEN BY | | | | | | | USED 0 4 | | -COMPLIANT HELMET | 0 1 | | 1 | , 1 | 1 | |
| OL STATE | OPERATOR | LICENSE NUMBER | | OFFEN | SE CHA | RGED | LOCAL | OFFENSE DESC | SE DESCRIPTION | | | CITA | TION N | UMBER | | |
| O H | UX31953 | 36 | | 4511. | .21A | | CODE | ACDA | | | | 017682 | | | | |
| OL CLASS | SS ENDORSEMENT RESTRICTION SELECT UP TO 3 DRI | | | VER TRACTED | | | | CONDITION | ALCOHOL TEST STATUS TYPE VALUE S | | | STATUS | DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO | | | |
| 4 | BY | | | ALCOHOL MARIJUANA | | | 1 | 4 4 | | | 4 | 1 1 | | | | |
| UNIT # | NAME | FIRST, MIDDLE | | 1 OTHER DRUG 1 | | | | <u> </u> | | DA3 | TE OF DIDTH | | | 10.5 | LOENDED | |
| 0 2 | | IS-ELZEY, SAMANTI | HA M | | | | | | 0.7 | | re of BIRTH . 8 . / 1 . | 9 9 | 4 | AGE 2 4 . | GENDER | |
| | STREET, CITY, S | | | | | | | | | | - INCLUDE AREA | | | | | |
| 5867 T | RAYMOR | E DR, DAYTON, OH | 45424 | | | | | | | | ' 6 8 | | 8 | 4 | 4 . 8 | |
| 0 | INJURED | EMS AGENCY (NAME) | | INJURED | TAKENTO | : MEDICAL FACILITY | (NAME, CITY) | SAFETY EQUIPMENT | - | | SEATING POSITION | | | | | |
| 5 | TAKEN BY | | | | | > | | USED 0 4 | DOT-COMPLIANT O 1 | | | | 1 | 1 | 1 | |
| OL STATE | OPERATOR | LICENSE NUMBER | | OFFEN | SE CHA | RGED | LOCAL | OFFENSE DESC | RIPTION | | | CITATION NUMBER | | | | |
| ОН | TT65161 | 3 | | | | | CODE | | | | | | | | | |
| OL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT | | VER TRACTED | | OHOL / DRUG SUSPI | | CONDITION | STATUS | TYPE | VALUE | STATUS | DRUG | RESULT | SELECT UP TO 4 | |
| 4 | | 0 3 | BY | 1 | | LCOHOL MAI | RIJUANA | 1 | . 1 | 1 | 250000 | . 1 | 1 | 1 0000000 | | |
| UNIT# | NAME: LAST | FIRST, MIDDLE | | | | THER DRUG | | | | | E OF BIRTH | | _ | AGE | GENDER | |
| | , | | | | | | | | 100 N | 5 8 5 | L OI DIKIII | | | Auc | GENDER | |
| ADDRESS: | STREET, CITY, S | TATE, ZIP | | | | | | | CONTA | CT PHONE | - INCLUDE AREA | CODE | | | | |
| 108 | | | | | | | | | | | | | | | | |
| INJURIES | INJURED TAKEN | EMS AGENCY (NAME) | | INJURED | TAKEN TO | : MEDICAL FACILITY | (NAME, CITY) | | - пот | -Compliant | SEATING POSITION | ON AIR BAC | USAGE | EJECTION | TRAPPED | |
| ON / | BY | | | | | | | USED | | HELMET | | | | | | |
| OL STATE | OPERATOR I | ICENSE NUMBER | | OFFEN | OFFENSE CHARGED LOCAL CODE | | | OFFENSE DESC | RIPTION | | C | | CITATION NUMBER | | | |
| 010 | | | | | | | | | | | | | BBHA WECK(A) | | | |
| OL CLASS | SELECT UP TO 2 | RESTRICTION SELECT | | /ER 'RACTED | | OHOL / DRUG SUSPE LCOHOL MAR | RIJUANA | CONDITION | STATUS | TYPE | VALUE | STATUS | TYPE | RESULT | SELECT UP TO 4 | |
| | | | Вт | | = | THER DRUG | NIJOANA | ti i | | | | | | | II B | |
| INJU | RIES | SEATING POSITION | A | IR BAG | N. P. | OL CLASS | | OL RESTRIC | TION(S) | صنحون بعد | ER DISTRAC | TION | T | EST STA | TUS | |
| 1 - FATAL 2 - SUSPECTED | SERIOUS INJURY | 1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER) | 1 - NOT DEPI 2 - DEPLOYE | | | | 1 - ALCOHOL INTER 2 - CDL INTRASTATI | | | T DISTRACTED NUALLY OPERATIA | IC AN | 1 - NONE | E GIVEN REFUSED | | | |
| 3 - SUSPECTED | | 2 - FRONT - MIDDLE | 3 - DEPLOYE | | | | 3 - CORRECTIVE LE | | ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING | | NICATION | ATION 3 - TEST GIVEN, CONTAMINATED | | | | |
| 4 - POSSIBLE IN 5 - NO APPAREN | | 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE | 4 - DEPLOYED BOTH FRONT / SI 5 - NOT APPLICABLE | | | 4 - REGULAR CLASS (OHIO = D) | 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS | | DIALING) | | | 4.TEST GIVEN RESULTS KNOWN | | | | |
| | | (MOTORCYCLE PASSENGER) 5 - SECOND MIDDLE | | MENT UNKNOWN 5 - M/C MOPED ONLY 6 - EXC | | | | 6 - EXCEPT CLASS A | EXCEPT CLASS A COMM | | | KING ON HANDS-FREE MUNICATION DEVICE 5-TEST GIVEN, RESULTS UNKNOWN | | | | |
| 1-NOTTRANSP | TAKEN BY ORTED | 6 - SECOND - RIGHT SIDE | | 6 - NO VALID OL | | | & CLASS B BUS 7 - EXCEPT TRACTO | & CLASS B BUS 7 - EXCEPT TRACTOR-TRAILER | | 4-TALKING ON HAND-HELD COMMUNICATION DEVICE | | | | | | |
| /TREATED AT | SCENE | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) | EJECTION | | | OL ENDORSEMENT 8-INTE | | | INTERMEDIATE LICENSE | | 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE | | ALCOHOL TEST TYPE | | | |
| 3 - POLICE | | 8-THIRD - MIDDLE | 1 - NOT EJECTED 2 - PARTIALLY EJECTED | | | H - HAZMAT M - MOTORCYCLE | 9 - LEARNER'S PER | .0 | | | 2-BL00D | | | | | |
| 9-OTHER/UNK | NOWN | 9-THIRD – RIGHT SIDE 10-SLEEPER SECTION | 3-TOTALLY EJECTED | | | ECTED P - PASSENGER | | | LICHTONIA | 7 - OTHER DISTRACTION IT ONLY INSIDE THE VEHICLE | | | 3 - URINE 4 - BREATH | | | |
| SAFETY E | QUIPMENT | OF TRUCK CAB | 4 - NOT APPL | APPLICABLE N - TANKER Q - MOTOR SCOOTER | | | 10 - LIMITED TO DAYLIGHT ONL' 11 - LIMITED TO EMPLOYMENT | | NT 8 - OTHER DISTRACTION OUTSIDE | | OUTSIDE | | | | | |
| 1 - NONE USED | ENCLOSED CARGO AREA | | | R - THREE-WHEEL MOTORCYCLE | | | 12 - LIMITED - OTHER | | THE VEHICLE 9-OTHER / UNKNOWN | | | DRUG TEST TYPE | | | | |
| 3 - LAP BELT ON | | (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | 1 - NOT TRAPPED 2 - EXTRICATED BY | | | SPEC | | (SPECIAL BRAKE | 3 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER | | | | 1 - NONE | | | |
| 4 - SHOULDER & | | 12 - PASSENGER IN UNENCLOSED CARGO AREA | MECHANI 3- FREED BY | CAL MEANS X - TANKER / HAZMAT | | | ADAPTIVE DEVI | ES) 1 - APPARENTLY NORMAL | | | 2 - BL00D 3 - URINE | | | | | |
| 5 - CHILD RESTR FORWARD FA | | 13 - TRAILING UNIT | | | ANICAL MEANS | | | 14 - MILITARY VEHICLES ONI 15 - MOTOR VEHICLES WITHO | | 2 THIOIORE IN ANNIENT | | | 4 - OTHER | | | |
| 6 - CHILD RESTR REAR FACING | | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | OR | | | AIR BRAKE | | | ANGRY, DISTURBED) | | | DRUG TEST RESULT(S) | | | | |
| 7 - BOOSTER SEA | | 15 - NON-MOTORIST | | | | | | 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID | | 4- ILL! 5- FEL | NESS Lasleep, Faintei | 0, | | TETAMINES | | |
| 8 - HELMET USE 9 - PROTECTIVE | | 99 - OTHER / UNKNOWN | | | | | | 18 - OTHER | | FATIGUED, ETC 6- UNDER THE INFLUENCE | | | | ODIAZEPINI | :S | |
| (ELBOW, KNE | ES, ETC.) | | | | | | | | | OF N | PERTHE INFLUENC MEDICATIONS / DRI COHOL | | 4 - CANN 5 - COCA | IABINOIDS | | |
| 10 - REFLECTIVE 11 - LIGHTING - P | EDESTRIAN | | | | | | | | | | ER / UNKNOWN | | | TES / OPIOID | S | |
| / BICYCLE ON 99 - OTHER / UNK | | | | | | | | | | | | 7 | | | Te | |
| | | | | | | | | | | | | | U-NEGA | TIVE RESUL | 19 | |

| | OF PURICE SAFETY OCCUPANT / WITNESS ADDENDUM | | | | | | | LOCAL REPORT NUMBER | | | | | | | |
|--|---|----------------------------------|-------------------|----------------------------|--------------------------------|--|---------------------------------|--|--|---------------|---------------|-------------|--|--|--|
| _ | 60 SAM-5W | DOMENIAL ASSESSMENT | | | OO TIDDEIIDOI | ** | | L P 1 9 | 0 6 1 | 4 0 0 | 2 9 | 3 4 | | | |
| ı | UNIT # NAME: LAST, FIRST, MIDDLE | | | | | | | | DATE OF BIRTH AGE GENDE | | | | | | |
| TURNER, CAROLINE B | | | | | | | | 1, 2, /, 1, 0, /, 2, 0, 1, 5, 0, 3, F | | | | | | | |
| ADDRESS: STREET, CITY, STATE, ZIP 5602 ANNE MARIE DR, MORROW, OH 45152 | | | | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | |
| 3 | | | RIE DR, MORRO | | 9 3 6 | | 8 3 | 9 | 4 7 | | | | | | |
| | INJURIES 5 | INJURED TAKEN BY | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FAC | NJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED 0 5 | | | SEATING POSITION A | O 5 | EJECTION 1 | TRAPPE 1 | | | |
| ľ | UNIT# | NAME: LA | ST, FIRST, MIDDLE | | A | | | DAT | E OF BIRTH | | AGE | GENDER | | | |
| | 1 | TURNE | R, JOSHUA W | | | | | 0 7 / 3 | 1, /, 2, 0, | 1 8 | 0 1 | М | | | |
| ADDRESS: STREET, CITY, STATE, ZIP | | | | | | | CONTACT PHONE | - INCLUDE AREA CODE | | | | | | | |
| ADDRESS: STREET, CITY, STATE, ZIP 5602 ANNE MARIE DR, MORROW, OH 45152 | | | | W, OH 45152 | 2 | | 9 3 6 | 6 4 | 8 3 | 9 | 4 7 | | | | |
| | NJURIES 5 | INJURED TAKEN BY | EMS AGENCY (NAME) | | INJURED TAKEN TO: MEDICAL FAC | SAFETY EQUIPMENT USED 0 6 | DOT-COMPLIANT MC HELMET | SEATING POSITION A | IR BAG USAGE | EJECTION 1 | TRAPPEI | | | | |
| ř | UNIT# | NAME: IA | ST, FIRST, MIDDLE | | | بنتا | DAT | | ACE | | | | | | |
| | 0.112.1 | IVAINE: EX | or, renor, whose | | | | | DAI | | AGE | GENDER | | | | |
| | ADDRESS: | STREET, CITY | STATE, ZIP | | | | | CONTACT PHONE | - INCLUDE AREA CODE | | | <u> </u> | | | |
| 102215 | | | | | | | | O O O O O O O O O O O O O O O O O O O | - INCLUDE AREA CODE | | | | | | |
| 3 | NJURIES | INJURED | EMS Agency (NAME) | | INJURED TAKEN TO: MEDICAL FACE | ILITY (NAME, CITY) | SAFETY EQUIPMENT | | SEATING POSITION A | IR RAC HSAGE | EJECTION | TDAPPE | | | |
| ı. | | TAKEN BY | | | | | USED | DOT-COMPLIANT MC HELMET | | IN DRU VOAUL | LUCUTION | L | | | |
| ř | UNIT# | NAME: LAS | T, FIRST, MIDDLE | | | | | | E OF BIRTH | | AGE | GENDER | | | |
| ı. | | | | | | | | | | | | | | | |
| | ADDRESS: | STREET, CITY, | STATE, ZIP | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | |
| 122020 | | | | | | | | | | | | | | | |
| I | NJURIES | IURIES INJURED EMS AGENCY (NAME) | | | INJURED TAKEN TO: MEDICAL FACI | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY | | | SEATING POSITION AI | IR BAG USAGE | EJECTION | TRAPPE | | | |
| I, | | TAKEN BY | | | | | USED | DOT-COMPLIANT MC HELMET | | | | | | | |
| | | INJU | JRIES | SAFETY | Y EQUIPMENT USED | | SEATING POS | ITION | AI | R BAG US | AGE | FILE | | | |
| ı | 1 - FATA | 2 1110111 2 | | | | | | | 1 - NOT DEPL | _OYED | | | | | |
| ı | 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 2 - SHOULDE 3 - LAP BELT | | | 4 - SECOND - LEFT SIDE | | | ER) | D FRONT | | | | | | | |
| ı | | | | | | | | 'ED SIDE | | | | | | | |
| ı | | | | | | | | 4 - DEPLOYED BOTH | | | | | | | |
| ı | 5 - NO AI | PPARENT I | NJURY | | ESTRAINT SYSTEM – | ORCYCLE PASS ND – MIDDLE | ENGER) | FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN | | | | | | | |
| | À.,,, | INJURED | TAKEN BY | FORWARI | | ND – RIGHT SIC | Œ | | | | | | | | |
| ı | | TRANSPOR | | 6 - CHILD RE | ESTRAINT SYSTEM - | | - LEFT SIDE | CAD) | EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED | | | | | | |
| ı | 2 - EMS | AIEDAI 3 | CENE | 7 - BOOSTER | | | O – MIDDLE | UAIX/ | | | | | | | |
| | 3 - POLI | CF | | 8 - HELMET | | | – RIGHT SIDE | | | | | | | | |
| | | R/UNKNO | WN | | IVE PADS USED | | PER SECTION O ENGER IN OTH | | 3 - TOTALLY | | | | | | |
| | | | | | KNEES, ETC.) | CARG | DAREA (NON-TR | RAILING UNIT, | 4 - NOT APPL | | | | | | |
| | | | | | IVE CLOTHING | | ICK-UP WITH CAP ENGER IN UNE | | | TRAPPE | J. F. 11 | -12 | | | |
| | | | | 11 - LIGHTING / BICYCLE | G – PEDESTRIAN E ONLY | CARG | AREA | | 1 - NOTTRAP | | | | | | |
| 1 | | | | 99 - OTHER / L | | 13 - TRAIL | | EVTEDIOD | 2 - EXTRICAT | | CHANIC | AL | | | |
| | | | | | | | G ON VEHICLE RAILING UNIT) | EXIEKIUK | MEANS | | | | | | |
| | | | | | | 15 - NON-N 99 - OTHEI | MOTORIST R / UNKNOWN | | 3 - FREED BY MEANS | (NON-ME | CHANICA | AL | | | |
| P | IAME: LAST | T, FIRST, MIDDI | .E | | | | | DATE | OF BIRTH | | AGE | GENDER | | | |
| L | BARTO | | | | | | | | | | | L | | | |
| - | DURESS: : | STREET, CITY, : | STATE, ZIP | | | | | CONTACT PHONE | - INCLUDE AREA CODE | Į0 - 2 | 140 | p: | | | |
| - | NAME: LAST, FIRST, MIDDLE | | | | | | DATE OF BIRTH AGE | | | | GENDER | | | | |
| | | | | | | SALE OF BIRTH | | | | | | | | | |
| A | DDRESS: S | STREET, CITY, S | STATE, ZIP | | | | | CONTACT PHONE | | | | | | | |
| N | AME: LAST | r, FIRST, MIDDL | E | | | | | DATE | OF BIRTH | | AGE | GENDER | | | |
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