



TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER *

11619924

CRASH SEVERITY

3 1 - FATAL
2 - INJURY
3 - PDO

HIT/SKIP

1 - SOLVED
2 - UNSOLVED

LOCAL INFORMATION

PHOTOS TAKEN <input checked="" type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER	PDO UNDER STATE REPORTABLE DOLLAR AMOUNT	PRIVATE PROPERTY	REPORTING AGENCY NCIC * 06703	REPORTING AGENCY NAME * Kent PD	NUMBER OF UNITS 02	UNIT IN ERROR 02 98 - ANIMAL 99 - UNKNOWN
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COUNTY * 67	CITY * Kent	CITY, VILLAGE, TOWNSHIP * Kent	CRASH DATE * 09052016	TIME OF CRASH 1920	DAY OF WEEK MON
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DEGREES / MINUTES / SECONDS LATITUDE 0 / /	LONGITUDE 0 / /	DECIMAL DEGREES LATITUDE 41.151228	LONGITUDE -81.363973
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ROADWAY DIVISION <input type="checkbox"/> DIVIDED <input checked="" type="checkbox"/> UNDIVIDED	DIVIDED LANE DIRECTION OF TRAVEL <input type="checkbox"/> N - NORTHBOUND E - EASTBOUND <input type="checkbox"/> S - SOUTHBOUND W - WESTBOUND	NUMBER OF THRU LANES 04	ROAD TYPES OR MILEPOST ² AL - ALLEY CR - CIRCLE HE - HEIGHTS MP - MILEPOST PL - PLACE ST - STREET WA - WAY AV - AVENUE CT - COURT HW - HIGHWAY PK - PARKWAY RD - ROAD TE - TERRACE BL - BOULEVARD DR - DRIVE LA - LANE PI - PIKE SQ - SQUARE TL - TRAIL
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LOCATION ROUTE TYPE ¹ 1	LOCATION ROUTE NUMBER 1	LOC PREFIX N, S, E, W	LOCATION ROAD NAME Haymaker	LOCATION ROAD TYPE ² PK	ROUTE TYPES ¹ IR - INTERSTATE ROUTE (INC. TURNPIKE) CR - NUMBERED COUNTY ROUTE US - US ROUTE TR - NUMBERED TOWNSHIP ROUTE SR - STATE ROUTE
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DISTANCE FROM REFERENCE AT	DIR FROM REF N, S, E, W	REFERENCE ROUTE TYPE ¹ 1	REFERENCE ROUTE NUMBER 1	REF PREFIX N, S, E, W	REFERENCE NAME (ROAD, MILEPOST, HOUSE #) mantua	REFERENCE ROAD TYPE ² ST
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REFERENCE POINT USED 1 - INTERSECTION 2 - MILE POST 3 - HOUSE NUMBER 1	CRASH LOCATION 03 01 - NOT AN INTERSECTION 06 - FIVE-POINT, OR MORE 11 - RAILWAY GRADE CROSSING 02 - FOUR-WAY INTERSECTION 07 - ON RAMP 12 - SHARED-USE PATHS OR TRAILS 03 - T-INTERSECTION 08 - OFF RAMP 99 - UNKNOWN 04 - Y-INTERSECTION 09 - CROSSOVER 05 - TRAFFIC CIRCLE/ROUNDOUT 10 - DRIVEWAY/ALLEY ACCESS	INTERSECTION RELATED <input checked="" type="checkbox"/>	LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 5 - ON GORE 2 - ON SHOULDER 6 - OUTSIDE TRAFFICWAY 3 - IN MEDIAN 9 - UNKNOWN 4 - ON ROADSIDE
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ROAD CONTOUR 1 - STRAIGHT LEVEL 4 - CURVE GRADE 2 - STRAIGHT GRADE 9 - UNKNOWN 3 - CURVE LEVEL	ROAD CONDITIONS PRIMARY 01 SECONDARY	01 - DRY 05 - SAND, MUD, DIRT, OIL, GRAVEL 09 - RUT, HOLES, BUMPS, UNEVEN PAVEMENT* 02 - WET 06 - WATER (STANDING, MOVING) 10 - OTHER 03 - SNOW 07 - SLUSH 99 - UNKNOWN 04 - ICE 08 - DEBRIS*
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MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING 8 - SIDESWIPE, OPPOSITE DIRECTION Two MOTOR VEHICLES 3 - HEAD-ON 6 - ANGLE IN TRANSPORT 4 - REAR-TO-REAR 7 - SIDESWIPE, SAME DIRECTION 9 - UNKNOWN	WEATHER 1 - CLEAR 4 - RAIN 7 - SEVERE CROSSWINDS 2 - CLOUDY 5 - SLEET, HAIL 8 - BLOWING SAND, SOIL, DIRT, SNOW 3 - FOG, SMOG, SMOKE 6 - SNOW 9 - OTHER/UNKNOWN
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ROAD SURFACE 1 - CONCRETE 4 - SLAG, GRAVEL, STONE 2 - BLACKTOP, BITUMINOUS, ASPHALT 5 - DIRT 3 - BRICK/BLOCK 6 - OTHER	LIGHT CONDITIONS PRIMARY 1 SECONDARY 1 - DAYLIGHT 2 - DAWN 3 - DUSK 4 - DARK - LIGHTED ROADWAY 5 - DARK - ROADWAY NOT LIGHTED 9 - UNKNOWN 6 - DARK - UNKNOWN ROADWAY LIGHTING 7 - GLARE* 8 - OTHER	SCHOOL BUS RELATED <input type="checkbox"/> SCHOOL ZONE RELATED <input type="checkbox"/> YES, SCHOOL BUS DIRECTLY INVOLVED <input type="checkbox"/> YES, SCHOOL BUS INDIRECTLY INVOLVED
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WORK ZONE RELATED <input type="checkbox"/>	WORKERS PRESENT <input type="checkbox"/>	LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE) <input type="checkbox"/>	LAW ENFORCEMENT PRESENT (VEHICLE ONLY) <input type="checkbox"/>	TYPE OF WORK ZONE 1 - LANE CLOSURE 4 - INTERMITTENT OR MOVING WORK 2 - LANE SHIFT/CROSSOVER 5 - OTHER 3 - WORK ON SHOULDER OR MEDIAN	LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE FIRST WORK ZONE WARNING SIGN 4 - ACTIVITY AREA 2 - ADVANCE WARNING AREA 5 - TERMINATION AREA 3 - TRANSITION AREA
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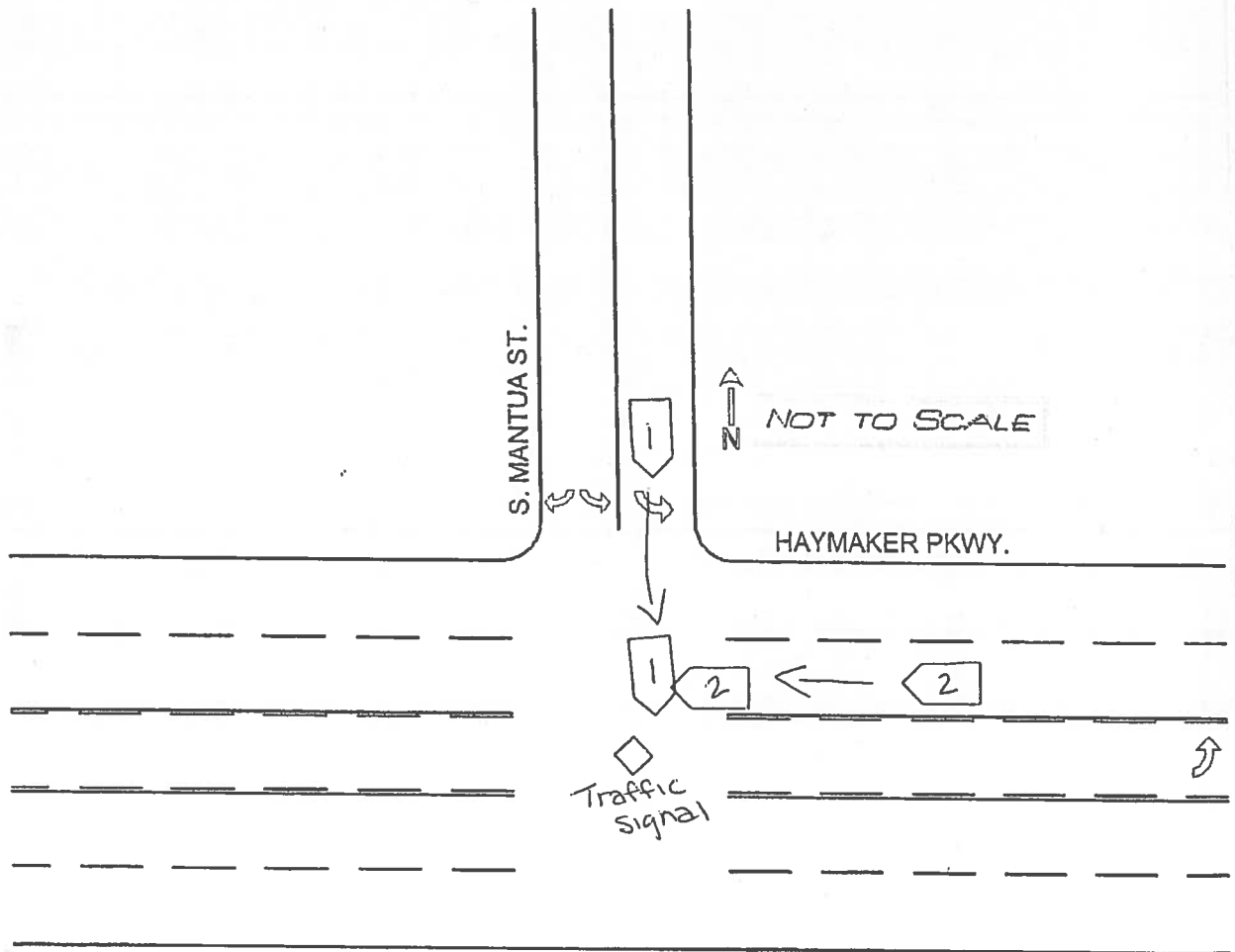
NARRATIVE Unit 1 was SB on S. mantua St. making a left turn onto Haymaker PKWY at the green light. Unit 2 was WB on Haymaker PKWY, traveled through the red light at the intersection for S. mantua St, and struck Unit 1 in the intersection. The driver of Unit 2 stated that he did not see the red signal on the light before it was too late to stop because the sun was in his eyes.	Diagram See OH-2 For Diagram
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REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPSS) <input type="checkbox"/>	DATE CRASH REPORTED 09052016	TIME CRASH REPORTED 1920	DISPATCH TIME 1923	ARRIVAL TIME 1926	TIME CLEARED 2016	OTHER INVESTIGATION TIME 50	TOTAL MINUTES 100	OFFICER'S NAME * S. Burton	OFFICER'S BADGE NUMBER #251	CHECKED BY	PAGE 1 OF 6
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OHIO TRAFFIC CRASH - DIAGRAM/NARRATIVE CONTINUATION

OH - 2

LOCAL REPORT NUMBER 16-19924	REPORTING AGENCY KENT POLICE DEPARTMENT	DATE OF CRASH M 9 10 5 1Y 16
IN COUNTY OF PORTAGE	CRASH LOCATION Haymaker Pkwy AT S. Mantua St.	



OFFICER'S SIGNATURE

X

[Signature]

BADGE NUMBER

#251



MOTORIST / Non-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER

1161199241111111

UNIT NUMBER 011	NAME: LAST, FIRST, MIDDLE Freshour, David C.	DATE OF BIRTH 10/4/03	AGE 19	GENDER M F - FEMALE M - MALE
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Address, City, State, Zip

3071 Denny Rd. Ravenna, OH 44266

CONTACT PHONE- INCLUDE AREA CODE

330-626-2047

INJURIES 1	INJURED TAKEN BY 0	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER RT926331	OL CLASS 4	No VALID OL	M/C END.	CONDITION 1	ALCOHOL/DRUG SUSPECTED 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE 1	DRUG TEST STATUS 1	DRUG TEST TYPE 1
OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED	DRIVER DISTRACTED BY 1							

UNIT NUMBER 012	NAME: LAST, FIRST, MIDDLE Nandamuri, Satya Krishna	DATE OF BIRTH 1973	AGE 01	GENDER M F - FEMALE M - MALE
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Address, City, State, Zip

1668 Sassafras Ct. Apt 256 Kent, OH 44240

CONTACT PHONE- INCLUDE AREA CODE

330-906-9145

INJURIES 1	INJURED TAKEN BY 0	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER VQ609702	OL CLASS 4	No VALID OL	M/C END.	CONDITION 1	ALCOHOL/DRUG SUSPECTED 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE 1	DRUG TEST STATUS 1	DRUG TEST TYPE 1
OFFENSE CHARGED (<input checked="" type="checkbox"/> LOCAL CODE)	OFFENSE DESCRIPTION Red Light	CITATION NUMBER 52151	HANDS-FREE DEVICE USED	DRIVER DISTRACTED BY 7							

INJURIES 1 - NO INJURY / NONE REPORTED 2 - POSSIBLE 3 - NON-INCAPACITATING 4 - INCAPACITATING 5 - FATAL	INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 4 - OTHER 9 - UNKNOWN	SAFETY EQUIPMENT USED MOTORIST 01 - NONE USED - VEHICLE OCCUPANT 02 - SHOULDER BELT ONLY USED 03 - LAP BELT ONLY USED 04 - SHOULDER AND LAP BELT USED	99 - UNKNOWN SAFETY EQUIPMENT 05 - CHILD RESTRAINT SYSTEM-FORWARD FACING 06 - CHILD RESTRAINT SYSTEM- REAR FACING 07 - BOOSTER SEAT 08 - HELMET USED	Non-Motorist 09 - NONE USED 10 - HELMET USED 11 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC) 12 - REFLECTIVE CLOTHING 13 - LIGHTING 14 - OTHER
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SEATING POSITION 01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 02 - FRONT - MIDDLE 03 - FRONT - RIGHT SIDE 04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 05 - SECOND - MIDDLE 06 - SECOND - RIGHT SIDE	07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 08 - THIRD - MIDDLE 09 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF CAB (TRUCK) 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A 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 16 - OTHER 99 - UNKNOWN	AIR BAG USAGE 1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN
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EJECTION 1 - NOT EJECTED 2 - TOTALLY EJECTED 3 - PARTIALLY EJECTED 4 - NOT APPLICABLE	TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - EXTRICATED BY NON-MECHANICAL MEANS	OPERATOR LICENSE CLASS 1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO IS "D") 5 - MC/MOPED ONLY	CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED 6 - UNDER THE INFLUENCE OF MEDICATIONS, DRUGS, ALCOHOL 7 - OTHER	ALCOHOL/DRUG SUSPECTED 1 - NONE 2 - YES - ALCOHOL SUSPECTED 3 - YES - HBD NOT IMPAIRED 4 - YES - DRUGS SUSPECTED 5 - YES - ALCOHOL AND DRUGS SUSPECTED
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ALCOHOL TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	ALCOHOL TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	DRUG TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	DRIVER DISTRACTED BY 1 - NO DISTRACTION REPORTED 2 - PHONE 3 - TEXTING/E-MAILING 4 - ELECTRONIC COMMUNICATION DEVICE (NAVIGATION DEVICE, RADIO, DVD) 6 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION
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UNIT NUMBER 011	NAME: LAST, FIRST, MIDDLE Davis, Mark Jason	DATE OF BIRTH 11/01/81	AGE 29	GENDER M F - FEMALE M - MALE
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Address, City, State, Zip

623 S. Chestnut St. Ravenna, OH 44266

CONTACT PHONE- INCLUDE AREA CODE

330-937-7108

INJURIES 1	INJURED TAKEN BY 0	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION 03	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
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UNIT NUMBER 012	NAME: LAST, FIRST, MIDDLE Konakalla, Ganesh	DATE OF BIRTH 06/11/91	AGE 23	GENDER M F - FEMALE M - MALE
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Address, City, State, Zip

1668 Sassafras Ct. Apt. 256 Kent, OH 44240

CONTACT PHONE- INCLUDE AREA CODE

234-817-7430

INJURIES 1	INJURED TAKEN BY 0	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION 03	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
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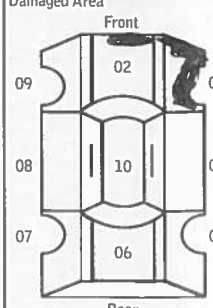


Unit

Local Report Number

11619924

Unit Number 011	Owner Name: Last, First, Middle (<input checked="" type="checkbox"/> Same As Driver)	Owner Phone Number - inc. area code (<input checked="" type="checkbox"/> Same As Driver)	Damage Scale 4	Damage Area
Owner Address: City, State, Zip (<input checked="" type="checkbox"/> Same As Driver)				
LP State OH	License Plate Number 66ES185	Vehicle Identification Number 11Z7HC128K14751126277	# Occupants 03	
Vehicle Year 2007	Vehicle Make Mitsubishi	Vehicle Model Raider	Vehicle Color White	
Proof of Insurance Shown <input checked="" type="checkbox"/>	Insurance Company American Family	Policy Number 2178-8146-03-78-FPA-041	Towed By Plaza	
Carrier Name, Address, City, State, Zip			Carrier Phone- include area code	
US DOT	Vehicle Weight GVWR/GCWR 1 1 - Less Than or Equal to 10k Lbs. 2 - 10,001 to 26,000 Lbs. 3 - More Than 26,000 Lbs.	Cargo Body Type 01 01 - No Cargo Body Type/Not Applicable 02 - Bus/Van (9-15 Seats, Inc Driver) 03 - Bus (16+ Seats, Inc Driver) 04 - Vehicle Towing Another Vehicle 05 - Logging 06 - Intermodal Container Chassis 07 - Cargo Van/Enclosed Box 08 - Grain, Chips, Gravel	Trafficway Description 1 1 - Two-Way, Not Divided 2 - Two-Way, Not Divided, Continuous Left Turn Lane 3 - Two-Way, Divided, Unprotected (Painted or Grass >4 FL) Median 4 - Two-Way, Divided, Positive Median Barrier 5 - One-Way Trafficway <input type="checkbox"/> Hit / Skip Unit	
HM Placard ID No. 1	HM Class Number 1	Non-Motorist Location Prior to Impact 01 01 - Intersection - Marked Crosswalk 02 - Intersection - No Crosswalk 03 - Intersection - Other 04 - Midblock - Marked Crosswalk 05 - Travel Lane - Other Location 06 - Bicycle Lane 07 - Shoulder/Roadside 08 - Sidewalk 09 - Median/Crossing Island 10 - Driveway Access 11 - Shared-Use Path or Trail 12 - Non-Trafficway Area 99 - Other/Unknown		
Type of Use 1 1 - Personal 2 - Commercial 3 - Government <input type="checkbox"/> In Emergency Response		Unit Type 07 01 - Sub-Compact 02 - Compact 03 - Mid Size 04 - Full Size 05 - Minivan 06 - Sport Utility Vehicle 07 - Pickup 08 - Van 09 - Motorcycle 10 - Motorized Bicycle 11 - Snowmobile/ATV 12 - Other Passenger Vehicle		
Special Function 01 01 - None 02 - Taxi 03 - Rental Truck (Over 10k Lbs) 04 - Bus - School (Public or Private) 05 - Bus - Transit 06 - Bus - Charter 07 - Bus - Shuttle 08 - Bus - Other		Most Damaged Area 09 01 - None 02 - Center Front 03 - Right Front 04 - Right Side 05 - Right Rear 06 - Rear Center 07 - Left Rear		Action 4 1 - Non-Contact 2 - Non-Collision 3 - Striking 4 - Struck 5 - Striking/Struck 9 - Unknown
Pre-Crash Actions 06 01 - Straight Ahead 02 - Backing 03 - Changing Lanes 04 - Overtaking/Passing 05 - Making Right Turn 06 - Making Left Turn 99 - Unknown		Non-Motorist 15 - Entering or Crossing Specified Location 16 - Walking, Running, Jogging, Playing, Cycling 17 - Working 18 - Pushing Vehicle 19 - Approaching or Leaving Vehicle 20 - Standing		
Contributing Circumstances Primary 01 01 - None 02 - Failure to Yield 03 - Ran Red Light 04 - Ran Stop Sign 05 - Exceeded Speed Limit 06 - Unsafe Speed 07 - Improper Turn 08 - Left of Center 09 - Followed Too Closely/ACDA 10 - Improper Lane Change /Passing/Off Road		Non-Motorist 22 - None 23 - Improper Crossing 24 - Darting 25 - Lying and/or Illegally in Roadway 26 - Failure to Yield Right of Way 27 - Not Visible (Dark Clothing) 28 - Inattentive 29 - Failure to Obey Traffic Signs /Signals/Officer 30 - Wrong Side of the Road 31 - Other Non-Motorist Action		Vehicle Defects 1 01 - Turn Signals 02 - Head Lamps 03 - Tail Lamps 04 - Brakes 05 - Steering 06 - Tire Blowout 07 - Worn or Slick tires 08 - Trailer Equipment Defective 09 - Motor Trouble 10 - Disabled From Prior Accident 11 - Other Defects
Sequence of Events 1 20 2 1 3 1 4 1 5 1 6 1 First Harmful Event 1 Most Harmful Event 1 99 - Unknown		Non-Collision Events 01 - Overturn/Rollover 02 - Fire/Explosion 03 - Immersion 04 - Jackknife 05 - Cargo/Equipment Loss or Shift 06 - Equipment Failure (Blown Tire, Brake Failure, etc) 07 - Separation of Units 08 - Ran Off Road Right 09 - Ran Off Road Left 10 - Cross Median 11 - Cross Center Line 12 - Downhill Runaway 13 - Other Non-Collision		
Collision With Person, Vehicle or Object Not Fixed 14 - Pedestrian 15 - Pedalcycle 16 - Railway Vehicle (Train, Engine) 17 - Animal - Farm 18 - Animal - Deer 19 - Animal - Other 20 - Motor Vehicle in Transport		Collision With Fixed Object 25 - Impact Attenuator/Crash Cushion 26 - Bridge Overhead Structure 27 - Bridge Pier or Abutment 28 - Bridge Parapet 29 - Bridge Rail 30 - Guardrail Face 31 - Guardrail End 32 - Portable Barrier 33 - Median Cable Barrier 34 - Median Guardrail Barrier 35 - Median Concrete Barrier 36 - Median Other Barrier 37 - Traffic Sign Post 38 - Overhead Sign Post 39 - Light/Luminaries Support 40 - Utility Pole 41 - Other Post, Pole or Support 42 - Culvert 43 - Curb 44 - Ditch 45 - Embankment 46 - Fence 47 - Mailbox 48 - Tree 49 - Fire Hydrant 50 - Work Zone Maintenance Equipment 51 - Wall, Building, Tunnel 52 - Other Fixed Object		
Unit Speed 10	Posted Speed 35	Traffic Control 04 01 - No Controls 02 - Stop Sign 03 - Yield Sign 04 - Traffic Signal 05 - Traffic Flashers 06 - School Zone	Unit Direction From 1 To 3 1 - North 2 - South 3 - East 4 - West	9 - Unknown 5 - Northeast 6 - Northwest 7 - Southeast 8 - Southwest

Unit Number 02		Owner Name: Last, First, Middle (<input type="checkbox"/> Same As Driver) UdayKiran, Ete		Owner Phone Number - inc. area code (<input type="checkbox"/> Same As Driver) 234-716-3258		Damage Scale 4		Damaged Area 	
Owner Address: City, State, Zip (<input checked="" type="checkbox"/> Same As Driver)						1 - None			
LP State 04		License Plate Number GPV5326		Vehicle Identification Number WVWRIH1631B23P2716935		# Occupants 02		2 - Minor	
Vehicle Year 2010		Vehicle Make Volkswagen		Vehicle Model Passat		Vehicle Color Grey		3 - Functional	
<input checked="" type="checkbox"/> Proof of Insurance Shown		Insurance Company State Farm		Policy Number 9140942-E21-35		Towed By Bakers		4 - Disabling	
Carrier Name, Address, City, State, Zip								9 - Unknown	
								Carrier Phone- include area code	
US DOT		Vehicle Weight GVWR/GCWR 1 1 - Less Than or Equal to 10k Lbs. 2 - 10,001 to 26,000 Lbs. 3 - More Than 26,000 Lbs.		Cargo Body Type 01 01 - No Cargo Body Type/Not Applicable 02 - Bus/Van (9-15 Seats, Inc Driver) 03 - Bus (16+ Seats, Inc Driver) 04 - Vehicle Towing Another Vehicle 05 - Logging 06 - Intermodal Container Chassis 07 - Cargo Van/Enclosed Box 08 - Grain, Chips, Gravel		09 - Pole 10 - Cargo Tank 11 - Flat Bed 12 - Dump 13 - Concrete Mixer 14 - Auto Transporter 15 - Garbage/Refuse 99 - Other/Unknown		Trafficway Description 1 1 - Two-Way, Not Divided 2 - Two-Way, Not Divided, Continuous Left Turn Lane 3 - Two-Way, Divided, Unprotected (Painted or Grass >4 FL) Median 4 - Two-Way, Divided, Positive Median Barrier 5 - One-Way Trafficway	
HM Placard ID No. 1		<input type="checkbox"/> Hazardous Material Released						<input type="checkbox"/> Hit / Skip Unit	
HM Class Number 1									
Non-Motorist Location Prior to Impact 01 01 - Intersection - Marked Crosswalk 02 - Intersection - No Crosswalk 03 - Intersection - Other 04 - Midblock - Marked Crosswalk 05 - Travel Lane - Other Location 06 - Bicycle Lane 07 - Shoulder/Roadside 08 - Sidewalk 09 - Median/Crossing Island 10 - Driveway Access 11 - Shared Use Path or Trail 12 - Non-Trafficway Area 99 - Other/Unknown		Type of Use 1 1 - Personal 2 - Commercial 3 - Government <input type="checkbox"/> In Emergency Response		Unit Type 03 99 - Unknown or Hit / Skip Passenger Vehicles (less than 9 passengers) 01 - Sub-Compact 02 - Compact 03 - Mid Size 04 - Full Size 05 - Minivan 06 - Sport Utility Vehicle 07 - Pickup 08 - Van 09 - Motorcycle 10 - Motorized Bicycle 11 - Snowmobile/ATV 12 - Other Passenger Vehicle		Med/Heavy Trucks or Combo Units > 10k lbs 13 - Single Unit Truck or Van 2axle, 6 tires 14 - Single Unit Truck; 3+ axles 15 - Single Unit Truck / Trailer 16 - Truck/Tractor (Bobtail) 17 - Tractor/Semi-Trailer 18 - Tractor/Double 19 - Tractor/Triples 20 - Other Med/Heavy Vehicle		Bus/Van/Limo (9 or More Including Driver) 21 - Bus/Van (9-15 Seats, Inc Driver) 22 - Bus (16+ Seats, Inc Driver) Non-Motorist 23 - Animal with Rider 24 - Animal with Buggy, Wagon, Surrey 25 - Bicycle/Pedacyclist 26 - Pedestrian/Skater 27 - Other Non-Motorist	
Special Function 01 01 - None 02 - Taxi 03 - Rental Truck (Over 10k Lbs) 04 - Bus - School (Public or Private) 05 - Bus - Transit 06 - Bus - Charter 07 - Bus - Shuttle 08 - Bus - Other		09 - Ambulance 10 - Fire 11 - Highway/Maintenance 12 - Military 13 - Police 14 - Public Utility 15 - Other Government 16 - Construction Equip.		17 - Farm Vehicle 18 - Farm Equipment 19 - Motorhome 20 - Golf Cart 21 - Train 22 - Other (Explain in Narrative)		Most Damaged Area 03 01 - None 02 - Center Front 03 - Right Front 04 - Right Side 05 - Right Rear 06 - Rear Center 07 - Left Rear		08 - Left Side 09 - Left Front 10 - Top and Windows 11 - Undercarriage 12 - Load/Trailer 13 - Total(All Areas) 14 - Other	
Action 3 1 - Non-Contact 2 - Non-Collision 3 - Striking 4 - Struck 5 - Striking/Struck 9 - Unknown									
Pre-Crash Actions 01 99 - Unknown		Motorist 01 - Straight Ahead 02 - Backing 03 - Changing Lanes 04 - Overtaking/Passing 05 - Making Right Turn 06 - Making Left Turn		07 - Making U-Turn 08 - Entering Traffic Lane 09 - Leaving Traffic Lane 10 - Parked 11 - Slowing or Stopped in Traffic 12 - Driverless		13 - Negotiating a Curve 14 - Other Motorist Action		Non-Motorist 15 - Entering or Crossing Specified Location 16 - Walking, Running, Jogging, Playing, Cycling 17 - Working 18 - Pushing Vehicle 19 - Approaching or Leaving Vehicle 20 - Standing	
21 - Other Non-Motorist Action									
Contributing Circumstances Primary 03 Secondary 01 99 - Unknown		Motorist 01 - None 02 - Failure to Yield 03 - Ran Red Light 04 - Ran Stop Sign 05 - Exceeded Speed Limit 06 - Unsafe Speed 07 - Improper Turn 08 - Left of Center 09 - Followed Too Closely/ACDA 10 - Improper Lane Change /Passing/Off Road		11 - Improper Backing 12 - Improper Start From Parked Position 13 - Stopped or Parked Illegally 14 - Operating Vehicle in Negligent Manner 15 - Swerving to Avoid (Due to External Conditions) 16 - Wrong Side/Wrong Way 17 - Failure to Control 18 - Vision Obstruction 19 - Operating Defective Equipment 20 - Load Shifting/Falling/Spilling 21 - Other Improper Action		Non-Motorist 22 - None 23 - Improper Crossing 24 - Daring 25 - Lying and/or Illegally in Roadway 26 - Failure to Yield Right of Way 27 - Not Visible (Dark Clothing) 28 - Inattentive 29 - Failure to Obey Traffic Signs /Signals/Officer 30 - Wrong Side of the Road 31 - Other Non-Motorist Action		Vehicle Defects 01 01 - Turn Signals 02 - Head Lamps 03 - Tail Lamps 04 - Brakes 05 - Steering 06 - Tire Blowout 07 - Worn or Slick tires 08 - Trailer Equipment Defective 09 - Motor Trouble 10 - Disabled From Prior Accident 11 - Other Defects	
Sequence of Events 1 20 2 01 3 01 4 01 5 01 6 01 First Harmful Event 1 Most Harmful Event 1 99 - Unknown		Non-Collision Events 01 - Overturn/Rollover 02 - Fire/Explosion 03 - Immersion 04 - Jackknife 05 - Cargo/Equipment Loss or Shift		06 - Equipment Failure (Blown Tire, Brake Failure, etc) 07 - Separation of Units 08 - Ran Off Road Right 09 - Ran Off Road Left		10 - Cross Median 11 - Cross Center Line Opposite Direction of Travel 12 - Downhill Runaway 13 - Other Non-Collision			
Collision With Person, Vehicle or Object Not Fixed 14 - Pedestrian 15 - Pedalcycle 16 - Railway Vehicle (Train, Engine) 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		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, Building, Tunnel 52 - Other Fixed Object									
Unit Speed 35		Posted Speed 35		Traffic Control 04 01 - No Controls 02 - Stop Sign 03 - Yield Sign 04 - Traffic Signal 05 - Traffic Flashers 06 - School Zone		07 - Railroad Crossbucks 08 - Railroad Flashers 09 - Railroad Gates 10 - Construction Barricade 11 - Person (Flagger, Officer) 12 - Pavement Markings		Unit Direction From 3 To 4 1 - North 2 - South 3 - East 4 - West	
<input checked="" type="checkbox"/> Stated <input type="checkbox"/> Estimated						13 - Crosswalk Lines 14 - Walk/Don't Walk 15 - Other 16 - Not Reported		5 - Northeast 6 - Northwest 7 - Southeast 8 - Southwest 9 - Unknown	