



TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER *

11718448

CRASH SEVERITY
1 - FATAL
2 - INJURY
3 - PDOHIT/SKIP
1 - SOLVED
2 - UNSOLVED

LOCAL INFORMATION

☐ PHOTOS TAKEN
☒ OH-2 ☐ OH-1P
☐ OH-3 ☐ OTHER☐ PDO UNDER STATE REPORTABLE DOLLAR AMOUNT☐ PRIVATE PROPERTY

REPORTING AGENCY NCIC *

10617103

REPORTING AGENCY NAME *

KENT PD

NUMBER OF UNITS

102

UNIT IN ERROR

01

98 - ANIMAL
99 - UNKNOWN

COUNTY *

67

CITY *

☐ VILLAGE *
☐ TOWNSHIP *

CITY, VILLAGE, TOWNSHIP *

KENT

CRASH DATE *

10910162017

TIME OF CRASH

109105

DAY OF WEEK

WED

DEGREES / MINUTES / SECONDS

LATITUDE 0 ' " 0 ' " 0 ' "

LONGITUDE

0 ' " 0 ' " 0 ' "

DECIMAL DEGREES

LATITUDE 41.134376

LONGITUDE

-81.361987

ROADWAY DIVISION

☒ DIVIDED
☐ UNDIVIDED

DIVIDED LANE DIRECTION OF TRAVEL

E N - NORTHBOUND E - EASTBOUND
S - SOUTHBOUND W - WESTBOUND

NUMBER OF THRU LANES

102

ROAD TYPES OR MILEPOST²AL - 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 - TRAILLOCATION ROUTE TYPE¹

SR 261

LOCATION ROUTE NUMBER

261

LOC PREFIX

N, S, E, W

LOCATION ROAD NAME

SUNNT BROOK

LOCATION ROAD TYPE²

RD

ROUTE TYPES¹IR - INTERSTATE ROUTE (INC. TURNPIKE) CR - NUMBERED COUNTY ROUTE
US - US ROUTE TR - NUMBERED TOWNSHIP ROUTE
SR - STATE ROUTE

DISTANCE FROM REFERENCE

AT

MILES
FEET
YARDS

0

DIR FROM REF

N, S, E, W

REFERENCE ROUTE TYPE¹

0

REFERENCE ROUTE NUMBER

0

REFERENCE NAME (ROAD, MILEPOST, HOUSE #)

SUNNT BROOK

REFERENCE NAME (ROAD, MILEPOST, HOUSE #)

SUNNT BROOK

REFERENCE NAME (ROAD, MILEPOST, HOUSE #)

SUNNT BROOK

REFERENCE ROAD TYPE²

RD

REFERENCE POINT USED

1 - INTERSECTION
2 - MILE POST
3 - HOUSE NUMBER

CRASH LOCATION

02

01 - NOT AN INTERSECTION

02 - FOUR-WAY INTERSECTION

03 - T-INTERSECTION

04 - Y-INTERSECTION

05 - TRAFFIC CIRCLE/ROUNDOABOUT

06 - FIVE-POINT, OR MORE

07 - ON RAMP

08 - OFF RAMP

09 - CROSSOVER

10 - DRIVEWAY/ALLEY ACCESS

11 - RAILWAY GRADE CROSSING

12 - SHARED-USE PATHS OR TRAILS

99 - UNKNOWN

INTERSECTION RELATED

X

LOCATION OF FIRST HARMFUL EVENT

1 - ON ROADWAY

2 - ON SHOULDER

3 - IN MEDIAN

4 - ON ROADSIDE

5 - ON GORE

6 - OUTSIDE TRAFFICWAY

9 - UNKNOWN

ROAD CONTOUR

1 - STRAIGHT LEVEL
2 - STRAIGHT GRADE
3 - CURVE LEVEL

4 - CURVE GRADE

9 - UNKNOWN

ROAD CONDITIONS

PRIMARY 01
SECONDARY 01

01 - DRY

02 - WET

03 - SNOW

04 - ICE

05 - SAND, MUD, DIRT, OIL, GRAVEL

06 - WATER (STANDING, MOVING)

07 - SLUSH

08 - DEBRIS*

09 - RUT, HOLES, BUMPS, UNEVEN PAVEMENT*

10 - OTHER

99 - UNKNOWN

* SECONDARY CONDITION ONLY

MANNER OF CRASH COLLISION/IMPACT

6 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 - UNKNOWN

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 - OTHER/UNKNOWN

ROAD SURFACE

2 1 - CONCRETE
2 - BLACKTOP, BITUMINOUS, ASPHALT
3 - BRICK/BLOCK

4 - SLAG, GRAVEL, STONE

5 - DIRT
6 - OTHER

LIGHT CONDITIONS

PRIMARY 01
SECONDARY 01

1 - DAYLIGHT

2 - DAWN

3 - DUSK

4 - DARK - LIGHTED ROADWAY

5 - DARK - ROADWAY NOT LIGHTED

6 - DARK - UNKNOWN ROADWAY LIGHTING

7 - GLARE*

8 - OTHER

9 - UNKNOWN

10 - UNKNOWN

11 - UNKNOWN

12 - UNKNOWN

SCHOOL BUS RELATED

☐ SCHOOL BUS DIRECTLY INVOLVED
☐ YES, SCHOOL BUS INDIRECTLY INVOLVED

WORK ZONE RELATED

☐ WORKERS PRESENT
☐ LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE)
☐ LAW ENFORCEMENT PRESENT (VEHICLE ONLY)

TYPE OF WORK ZONE

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 FIRST WORK ZONE WARNING SIGN
2 - ADVANCE WARNING AREA
3 - TRANSITION AREA

4 - ACTIVITY AREA

5 - TERMINATION AREA

NARRATIVE

Unit 1 was in the left turn lane traveling westbound on STH 261 preparing to turn left onto Sunnybrook Rd. Unit 2 and an independent witness were traveling eastbound on STH 261 approaching the intersection at Sunnybrook Rd. Both vehicles had green lights. Unit 1 turned left in front of unit 2 and units collided in the intersection.

Diagram

Write an "N" on the compass diagram to indicate the direction of north.

SEE 01-2
Attached

REPORT TAKEN BY

POLICE AGENCY

MOTORIST

SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)

DATE CRASH REPORTED

10910162017

TIME CRASH REPORTED

09105

DISPATCH TIME

1091016

ARRIVAL TIME

109112

TIME CLEARED

109137

OTHER INVESTIGATION TIME

2011

TOTAL MINUTES

45

OFFICER'S NAME *

PH. Hadaway

OFFICER'S BADGE NUMBER

216

CHECKED BY

243

PAGE 1 OF 6



UNIT

LOCAL REPORT NUMBER

117118448

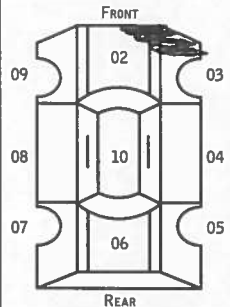
UNIT NUMBER 1011		OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER)		OWNER PHONE NUMBER - INC. AREA CODE (X SAME AS DRIVER)		DAMAGE SCALE 2		DAMAGED AREA FRONT 09 02 03 08 10 04 07 06 05 REAR	
OWNER ADDRESS: CITY, STATE, ZIP (X SAME AS DRIVER)									
LP STATE OH		LICENSE PLATE NUMBER GAS2617		VEHICLE IDENTIFICATION NUMBER KNIDJIT2A29B7704893		# OCCUPANTS 102			
VEHICLE YEAR 120111		VEHICLE MAKE KIA		VEHICLE MODEL Soul		VEHICLE COLOR SILVER			
PROOF OF INSURANCE SHOWN		INSURANCE COMPANY NATIONWIDE		POLICY NUMBER 9234K064868		TOWED BY			
CARRIER NAME, ADDRESS, CITY, STATE, ZIP								CARRIER PHONE - INCLUDE AREA CODE	
US DOT		VEHICLE WEIGHT GVWR/GCWR 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 - 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 4 1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS > 4 FT) MEDIAN 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY			
HM PLACARD ID NO.		HAZARDOUS MATERIAL RELEASED		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/PEDALCYCLIST 26 - PEDESTRIAN/SKATER 27 - OTHER NON-MOTORIST	
NON-MOTORIST LOCATION PRIOR TO IMPACT 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 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT IN EMERGENCY RESPONSE		UNIT TYPE 06 99 - UNKNOWN OR HIT / SKIP		HAS HM PLACARD			
SPECIAL FUNCTION 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 04 IMPACT AREA 04		ACTION 3 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN	
PRE-CRASH ACTIONS 06 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		NON-MOTORIST 13 - NEGOTIATING A CURVE 14 - OTHER MOTORIST ACTION 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	
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SEQUENCE OF EVENTS 1 20 2 3 4 5 6 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		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		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		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 151 STATED ESTIMATED		POSTED SPEED 50		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		13 - CROSSWALK LINES 14 - WALK/DON'T WALK 15 - OTHER 16 - NOT REPORTED	
UNIT DIRECTION FROM 3 TO 2		1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN		PAGE 2 of 6			



UNIT

LOCAL REPORT NUMBER

117118448

UNIT NUMBER 02		OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER) PHILLIPS, CHARLES D.		OWNER PHONE NUMBER - INC. AREA CODE (<input type="checkbox"/> SAME AS DRIVER) 440-241-4002		DAMAGE SCALE 2		DAMAGED AREA 	
OWNER ADDRESS: CITY, STATE, ZIP (<input checked="" type="checkbox"/> SAME AS DRIVER)									
LP STATE OH		LICENSE PLATE NUMBER 188Y DY		VEHICLE IDENTIFICATION NUMBER 15G242331D25J862505		# OCCUPANTS 101			
VEHICLE YEAR 2005		VEHICLE MAKE SATURN		VEHICLE MODEL VUE		VEHICLE COLOR BLACK			
PROOF OF INSURANCE SHOWN <input checked="" type="checkbox"/>		INSURANCE COMPANY ALLSTATE		POLICY NUMBER 926383671		TOWED BY		9 - UNKNOWN	
CARRIER NAME, ADDRESS, CITY, STATE, ZIP								CARRIER PHONE- INCLUDE AREA CODE	
US DOT		VEHICLE WEIGHT GVWR/GCWR <input type="checkbox"/> 1 - LESS THAN OR EQUAL TO 10K LBS. <input type="checkbox"/> 2 - 10,001 TO 26,000 LBS. <input type="checkbox"/> 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 4 1 - Two-Way, NOT DIVIDED 2 - Two-Way, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - Two-Way, DIVIDED, UNPROTECTED (PAINTED OR GRASS > 4 Ft.) MEDIAN 4 - Two-Way, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY <input type="checkbox"/> HIT / SKIP UNIT			
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UNIT SPEED 15		POSTED SPEED 50		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 13 - CROSSWALK LINES 14 - WALK/DON'T WALK 15 - OTHER 16 - NOT REPORTED		UNIT DIRECTION FROM 4 TO 3 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN			



MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER

11718448

UNIT NUMBER 1011	NAME: LAST, FIRST, MIDDLE FORD, JESSICA M.	DATE OF BIRTH 11/30/1990	AGE 26	GENDER F - FEMALE M - MALE
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Address, City, State, Zip 1602 S. LINCOLN ST KENT OH 44240	CONTACT PHONE- INCLUDE AREA CODE 330-592-2370
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INJURIES 1	INJURED TAKEN BY []	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 TG826861	OL CLASS 4	No VALID OL []	M/C END. []	CONDITION 1	ALCOHOL/DRUG SUSPECTED 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE []	ALCOHOL TEST VALUE []	DRUG TEST STATUS 1	DRUG TEST TYPE []
OFFENSE CHARGED (X LOCAL CODE) 331.17	OFFENSE DESCRIPTION FAIL TO YIELD	CITATION NUMBER 34254	HANDS-FREE [] DEVICE USED	DRIVER DISTRACTED BY 1							

UNIT NUMBER 1012	NAME: LAST, FIRST, MIDDLE PHILLIPS, HAILEY G.	DATE OF BIRTH 11/12/1998	AGE 18	GENDER F - FEMALE M - MALE
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Address, City, State, Zip 627 AMBLER CIR TALLMADGE OH 44278	CONTACT PHONE- INCLUDE AREA CODE 330-860-7805
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INJURIES 1	INJURED TAKEN BY []	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 UH992587	OL CLASS 4	No VALID OL []	M/C END. []	CONDITION 1	ALCOHOL/DRUG SUSPECTED 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE []	ALCOHOL TEST VALUE []	DRUG TEST STATUS 1	DRUG TEST TYPE []
OFFENSE CHARGED (X LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE [] DEVICE USED	DRIVER DISTRACTED BY 1							

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 NON-MOTORIST 05 - CHILD RESTRAINT SYSTEM-FORWARD FACING 06 - CHILD RESTRAINT SYSTEM- REAR FACING 07 - BOOSTER SEAT 08 - HELMET USED 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 5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD) 6 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION
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UNIT NUMBER 1011	NAME: LAST, FIRST, MIDDLE KNAPP, JOAN M.	DATE OF BIRTH 11/10/1962	AGE 54	GENDER F - FEMALE M - MALE
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Address, City, State, Zip 1602 S. LINCOLN ST KENT OH 44240	CONTACT PHONE- INCLUDE AREA CODE 330-592-6272
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INJURIES 1	INJURED TAKEN BY []	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 []	NAME: LAST, FIRST, MIDDLE DEREMER, JESSE D.	DATE OF BIRTH 10/32/1997	AGE 20	GENDER M - MALE F - FEMALE
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Address, City, State, Zip 208 ERNEST DR TALLMADGE OH 44278	CONTACT PHONE- INCLUDE AREA CODE 330-701-3729
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INJURIES []	INJURED TAKEN BY []	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED []	DOT COMPLIANT [] MOTORCYCLE HELMET	SEATING POSITION []	AIR BAG USAGE []	EJECTION []	TRAPPED []
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OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-3 REV 1/82

LOCAL REPORT NUMBER 17-18448	REPORTING AGENCY Kent PD	DATE OF CRASH MO 09 / DO 06 / Y 17
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, Jesse DeRemer HEREBY MAKE THIS VOLUNTARY STATEMENT TO
(PRINTED)
Ptl. Hadaway AT 261 - Sunnybrook
(OFFICERS NAME) (LOCATION)

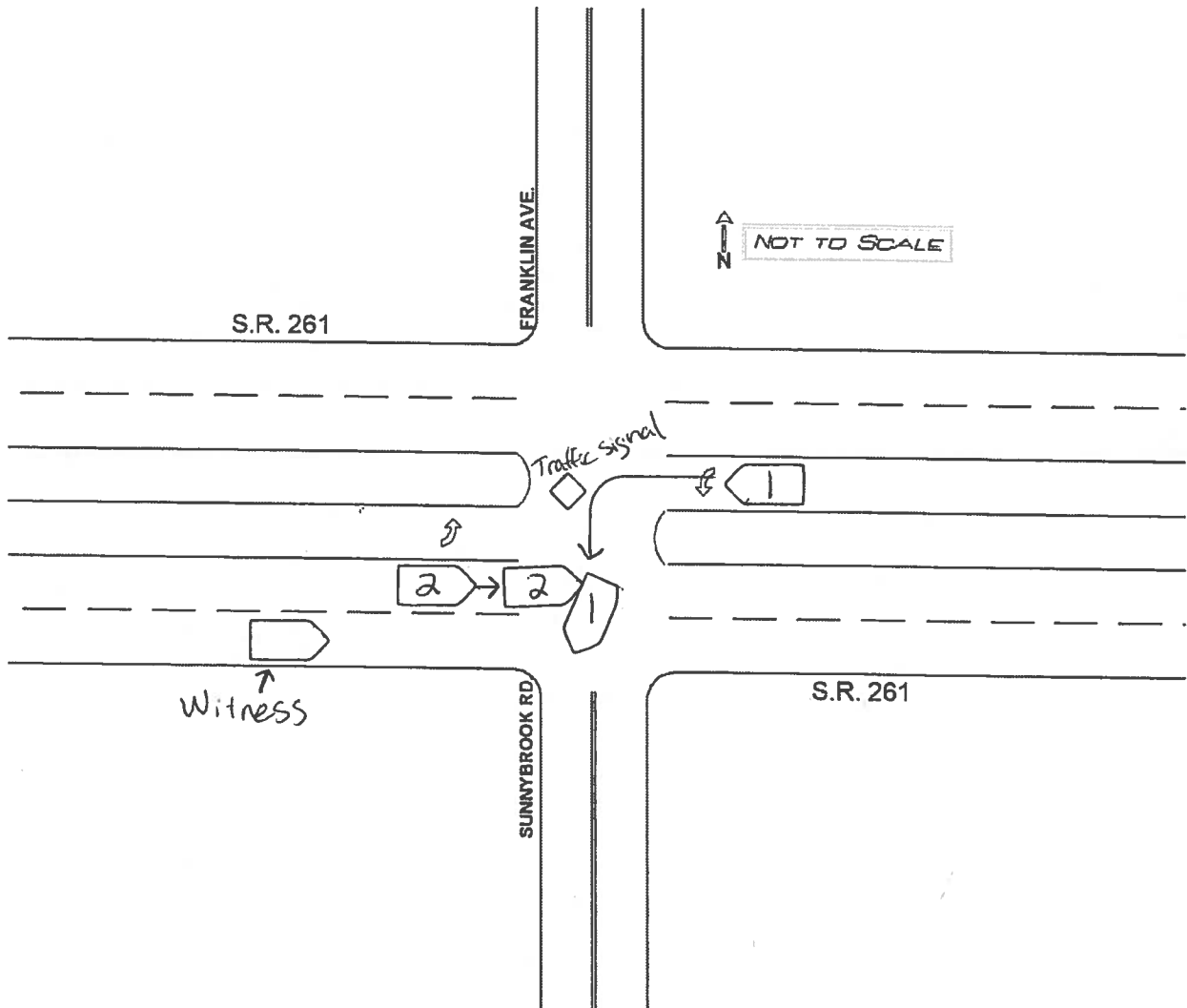
At 261 - Sunnybrook, I was eastbound on 261. Black vehicle ahead of me has green light, moves into intersection and stops. Grey vehicle going westbound on 261 makes a left turn. The two collide at the intersection.

ADDRESS OF WITNESS 208 Ernest Drive, Tallmadge OH 44278	PHONE 330-701-3729
SIGNATURE OF WITNESS <u>Jesse DeRemer</u>	OFFICERS SIGNATURE <u>[Signature]</u> #216

OHIO TRAFFIC CRASH - DIAGRAM/NARRATIVE CONTINUATION

OH - 2

LOCAL REPORT NUMBER 17-18448	REPORTING AGENCY KENT POLICE DEPARTMENT	DATE OF CRASH M 09 10 06 17
IN COUNTY OF PORTAGE	CRASH LOCATION STHT 261 @ Sunnybrook Rd.	



OFFICER'S SIGNATURE

X

BADGE NUMBER

216