

TRAFFIC CRASH REPORT

OH-1 (Rev. 10/06)



LOCAL REPORT # *
07-059415

CRASH SEVERITY
1 FATAL 3 PDO
2 INJURY 4 UNKNOWN
3

PRIVATE PROPERTY
X

HIT/SKIP
1 NOT HIT/SKIP
2 SOLVED
3 UNSOLVED
1

PHOTOS TAKEN
X

OH-2 OH-3 OH-1P OTHER
/

REPORTING AGENCY *
05009

REPORTING AGENCY *
Youngstown Police

DAYS
02

UNIT #
02
98 = ANNUAL
99 = UNKNOWN

DATE OF CRASH *
08 09 2007

PREFIX
2102

DAY OF WEEK
THU

CRASH TYPE
X

NAME (OF CITY, VILLAGE OR TOWNSHIP) *
Youngstown

COUNTY #
50

LATITUDE

LONGITUDE

CRASH OCCURRED ON
PREFIX CRASH LOCATION
SOUTH AVE
TYPE LOC 1
TYPE LOCATION POINT USED
1 NAMED STREET 3 NUMBERED ROUTE
2 NUMBERED STREET

ATV REFERENCE
DIST REFERENCE DR PREFIX REFERENCE
E Judson
REFERENCE POINT USED
01 STATE LINE
02 INTERSECTION 2 STREETS
03 COUNTY LINE
04 HOUSE NUMBER
05 TOWNSHIP BOUNDARY
06 MILE POST
07 CORPORATION LIMIT
08 PLACE NAME W/O REFERENCE
09 DRIVEWAY
10 STREET OR ROUTE W/O REFERENCE

A 0104 NAME (LAST, FIRST, MIDDLE)
IRIZARRY, LEONOR R
ADDRESS (STREET, CITY, STATE, ZIP CODE)
1645 HINWOOD AVE YOUNGSTOWN OHIO 44506

DL STATE DL # LP STATE LP # INJURED TAKEN BY
OH RV222563 OH BX07CN 1 NONE 4 OTHER
2 EMS 5 UNKNOWN
3 POLICE
TRANSPORTED BY 330 746-5109
INJURED TAKEN TO

OWNER NAME (IF SAME, WRITE "SAME")
SAME
ADDRESS (STREET, CITY, STATE, ZIP CODE)
SAME

YEAR MAKE MODEL COLOR INSURANCE COMPANY TOWING SERVICE OWNER PHONE #
2000 TOYOTA SENNA GOLD CINCINNATI N/A SAME
OFFENSE CHARGED OFFENSE DESCRIPTION

OFFENSE CHARGED OFFENSE DESCRIPTION

B 0201 NAME (LAST, FIRST, MIDDLE)
ZITELLO, DENNIS J JR
ADDRESS (STREET, CITY, STATE, ZIP CODE)
5107 MAPLE BOARDMAN OHIO 44512

DL STATE DL # LP STATE LP # INJURED TAKEN BY
OH RN590819 OH DTQ9166 1 NONE 4 OTHER
2 EMS 5 UNKNOWN
3 POLICE
TRANSPORTED BY 330 965-0226
INJURED TAKEN TO

OWNER NAME (IF SAME, WRITE "SAME")
MAILING VALLEY LEATHY AIR 5107 MAPLE BOARDMAN OHIO 44512
ADDRESS (STREET, CITY, STATE, ZIP CODE)

YEAR MAKE MODEL COLOR INSURANCE COMPANY TOWING SERVICE OWNER PHONE #
2002 FORD RANGER BLACK CINCINNATI N/A 330 965-0226
OFFENSE CHARGED OFFENSE DESCRIPTION

OFFENSE CHARGED OFFENSE DESCRIPTION
333.03 ACCA I 27833 X

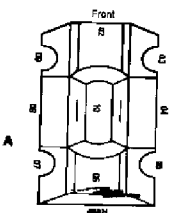
01 Rodriguez, IVET NAME (LAST, FIRST, MIDDLE)
ADDRESS (STREET, CITY, STATE, ZIP CODE)
3445 TANGENT YOUNGSTOWN OHIO 44502
HOME PHONE # 330 788-4513 1227197333 F
INJURED TAKEN BY 1 NONE 4 OTHER
2 EMS 5 UNKNOWN
3 POLICE
TRANSPORTED BY
INJURED TAKEN TO

01 Rodriguez, DYANDREA NAME (LAST, FIRST, MIDDLE)
ADDRESS (STREET, CITY, STATE, ZIP CODE)
3445 TANGENT YOUNGSTOWN OHIO 44502
HOME PHONE # 330 788-4513 1017199313 F
INJURED TAKEN BY 1 NONE 4 OTHER
2 EMS 5 UNKNOWN
3 POLICE
TRANSPORTED BY
INJURED TAKEN TO

SEATING POSITION SAFETY EQUIPMENT AIR BAG EJECTION TRAPPED INJURED
01 FRONT - LEFT (MC DRIVER) 01 NONE USED 1 NOT-DEPLOYED 1 NOT EJECTED 1 NOT TRAPPED 1 NO INJURY
02 FRONT - MIDDLE 02 SHOULDERS BELT ONLY 2 DEPLOYED-FRONT 2 TOTALLY EJECTED 2 EXTRICATED BY MECHANICAL 2 POSSIBLE
03 FRONT - RIGHT 03 LAP BELT ONLY 3 DEPLOYED-SIDE 3 PARTIALLY EJECTED 3 FREED BY MEANS NON-MECHANICAL 3 NON-INCAPACITATING
04 SECOND - LEFT (MC PASS) 04 SHOULDERS/LAP BELT 4 DEPLOYED BOTH FRONT/SIDE 4 NOT APPLICABLE 4 UNKNOWN 4 INCAPACITATING
05 SECOND - MIDDLE 05 CHILD SAFETY SEAT 5 NOT APPLICABLE 5 UNKNOWN 5 FATAL INJURY
06 SECOND - RIGHT 06 MC HELMET USED 6 UNKNOWN 6 UNKNOWN 6 UNKNOWN
07 THIRD - LEFT (MC PASSENGER/SIDE CAR) 07 USE UNKNOWN
08 THIRD - MIDDLE 08 NONE USED
09 THIRD - RIGHT 09 HELMET USED
10 SLEEPER SECTION OF CAB 10 PROTECTIVE PADS
11 ENCLOSED CARGO AREA 11 REFLECTIVE CLOTHING
12 UNENCLOSED CARGO AREA 12 LIGHTING
13 TRAILING UNIT 13 OTHER
14 EXTERIOR 14 UNKNOWN
15 OTHER
16 NON-MOTORIST
17 UNKNOWN

Motorist/Non-Motorist

Occupant

UNIT NUMBERS 01 02	DAMAGE AREA 	PRE-CRASH ACTIONS 1 1 0 1	SEQUENCE OF EVENTS A: 20 B: 20	POSTED SPEED 35 35	DRUG TEST STATUS 1 1
NON-MOTORIST LOCATION 01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NO CROSSWALK 03 NON-INTERSECTION CROSSWALK 04 DRIVEWAY ACCESS CROSSWALK 05 IN ROADWAY 06 NOT IN ROADWAY 07 MEDIAN (BUT NOT SHOULDER) 08 ISLAND 09 SHOULDER 10 SIDEWALK 11 WITHIN 10 FEET OF ROADWAY (NOT SHOULDER, MEDIAN, SIDEWALK, ISLAND) 12 BEYOND 10 FEET OF ROADWAY (WITHIN TRAFFICWAY) 13 OUTSIDE TRAFFICWAY 14 SHARED USE PATHS OR TRAILS 15 UNKNOWN	MOTORIST 01 MOVEMENTS ESSENTIALLY STRAIGHT AHEAD 02 BACKING 03 CHANGING LANES 04 OVERTAKING/PASSING 05 TURNING RIGHT 06 TURNING LEFT 07 MAKING U-TURN 08 ENTERING TRAFFIC LANE 09 LEAVING TRAFFIC LANE 10 PARKED 11 SLOWING/STOPPED IN TRAFFIC 12 DRIVERLESS 13 OTHER 14 UNKNOWN NON-MOTORIST 15 ENTERING/CROSSING IN SPECIFIED LOCATION 16 WALKING, RUNNING, JOGGING, PLAYING, CYCLING 17 WORKING 18 PUSHING VEHICLE 19 APPROACHING/LEAVING VEHICLE 20 PLAYING/WORKING ON VEHICLE 21 STANDING 22 OTHER 23 UNKNOWN	CONTRIBUTING CIRCUMSTANCES 01 NONE 02 FAILURE TO YIELD 03 RAN RED LIGHT, OR STOP SIGN 04 EXCEEDED SPEED LIMIT 05 UNSAFE SPEED 06 IMPROPER TURN 07 LEFT OF CENTER 08 FOLLOWED TOO CLOSELY/ACDA 09 IMPROPER LANE CHANGE/ DROVE OFF ROAD/ 10 IMPROPER PASSING 11 IMPROPER BACKING 12 IMPROPER START FROM PARKED POSITION 13 STOPPED OR PARKED ILLEGALLY 14 OPERATING VEHICLE IN ERRATIC, RECKLESS, CARELESS, NEGLIGENT OR AGGRESSIVE MANNER 15 SWERVING TO AVOID (DUE TO WIND, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 16 FAILURE TO CONTROL 17 VISION OBSTRUCTION 18 DRIVER INATTENTION 19 FATIGUE/ASLEEP 20 OPERATING DEFECTIVE EQUIPMENT 21 LOAD SHIFTING/FALLING/SPILLING 22 OTHER IMPROPER ACTION 23 UNKNOWN NON-MOTORIST 24 IMPROPER CROSSING 25 DARTING 26 LYING AND/OR ILLEGALLY IN ROADWAY 27 FAILURE TO YIELD RIGHT OF WAY 28 NOT VISIBLE (DARK CLOTHING) 29 INATTENTIVE 30 FAILURE TO OBEY TRAFFIC SIGNS, SIGNALS, OR OFFICER 31 WRONG SIDE OF THE ROAD 32 OTHER 33 UNKNOWN	NON-COLLISION 01 OVERTURN/ROLLOVER 02 FIRE/EXPLOSION 03 IMMERSION 04 JACKKNIFE 05 CARGO/EQUIPMENT LOSS/SHIFT 06 EQUIPMENT FAILURE 07 SEPARATION OF UNITS 08 RAN OFF ROAD RIGHT 09 RAN OFF ROAD LEFT 10 CROSS MEDIAN/CENTERLINE 11 DOWNHILL RUNAWAY 12 OTHER NON-COLLISION COLLISION w/ PERSON, VEHICLE, OR OBJECT NOT FIXED 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 OTHER MOVABLE OBJECT 24 UNKNOWN MOVABLE OBJECT 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 MEDIAN BARRIER 33 HIGHWAY TRAFFIC SIGN POST 34 OVERHEAD SIGN POST 35 LIGHT/LUMINARIES SUPPORT 36 UTILITY POLE 37 OTHER POST, POLE OR SUPPORT 38 CULVERT 39 CURB 40 DITCH 41 EMBANKMENT 42 FENCE 43 MAILBOX 44 TREE 45 OTHER FIXED OBJECT 46 WORK ZONE MAINTENANCE EQUIPMENT 47 UNKNOWN FIXED OBJECT 48 OTHER 49 UNKNOWN	TRAFFIC CONTROL 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 POLICE OFFICER 12 PAVEMENT MARKINGS 13 CROSSWALK LINES 14 WALK/DON'T WALK SIGNAL 15 TRAFFIC CONTROL DEVICE INOPERATIVE, MISSING, OBSCURED 16 OTHER	DRUG TEST TYPE 1 NONE 2 BLOOD 3 URINE 4 OTHER
TYPE OF UNIT 05 07	MOTORIST 01 SUB-COMPACT 02 COMPACT 03 MID SIZE 04 FULL SIZE 05 MINIVAN 06 SPORT UTILITY VEHICLE 07 PICKUP 08 PANEL/VAN 09 SINGLE UNIT TRUCK; 2 AXLES, 6 TIRES 10 SINGLE UNIT TRUCK; 3+ AXLES 11 TRUCK/TRAILER 12 TRUCK TRACTOR (BOBTAIL) 13 TRACTOR/SEMI-TRAILER 14 TRACTOR/DOUBLE SHORT 15 TRACTOR/DOUBLE LONG 16 FIFTH WHEEL OR CONVERTER DOLLY 17 TRACTOR/TRIPLES 18 MOTORCYCLE 19 MOTORIZED BICYCLE 20 SCHOOL BUS 21 CHURCH BUS 22 PUBLIC BUS 23 OTHER BUS 24 POLICE VEHICLE 25 FIRE TRUCK 26 AMBULANCE/RESCUE 27 TAXI 28 MOTOR HOME 29 TRAM 30 FARM VEHICLE 31 FARM EQUIPMENT 32 SNOWMOBILE 33 CONSTRUCTION EQUIPMENT 34 ALL OTHERS NON-MOTORIST 35 ANIMAL W/RIDER 36 ANIMAL W/BUGGY 37 BICYCLE 38 PEDESTRIAN 39 PEDALCYCLIST 40 SKATER 41 OTHER-NON MOTORIST 42 UNKNOWN	POINT OF IMPACT 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 15 UNKNOWN	ALCOHOL/DRUG SUSPECTED 1 NONE 2 YES - ALCOHOL SUSPECTED 3 YES - HBD NOT IMPAIRED 4 YES - DRUGS SUSPECTED 5 YES - ALCOHOL / DRUGS SUSPECTED 6 UNKNOWN	CONDITION 1 APPARENTLY NORMAL 2 PHYSICAL IMPAIRMENT 3 EMOTIONAL 4 ILLNESS 5 FELL ASLEEP, FAINTED, FATIGUED, ETC 6 UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ALCOHOL 7 OTHER 8 UNKNOWN	DRUG TEST 1&2 RESULT 1 NONE 2 MARIJUANA 3 COCAINE 4 OPiates 5 AMPHETAMINES 6 PCP 7 OTHER 8 UNKNOWN AT TIME OF REPORTING
IN EMERGENCY RESPONSE 1 No 2 Yes 3 UNKNOWN	ACTION 1 NON-CONTACT 2 NON-COLLISION 3 STRIKING 4 STRUCK 5 BOTH STRIKING AND STRUCK 6 UNKNOWN	VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE 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 CRASH 11 OTHER DEFECTS	ALCOHOL TEST STATUS 1 NONE 2 TEST REFUSED 3 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 TEST GIVEN, RESULTS KNOWN 5 TEST GIVEN, RESULTS UNKNOWN 6 UNKNOWN	ALCOHOL TEST TYPE 1 NONE 2 BLOOD 3 URINE 4 BREATH 5 OTHER	TYPE OF INTERSECTION 01 NOT AN INTERSECTION 02 FOUR-WAY INTERSECTION 03 T-INTERSECTION 04 Y-INTERSECTION 05 TRAFFIC CIRCLE/ROUNDBOUNT 06 FIVE-POINT, OR MORE 07 ON RAMP 08 OFF RAMP 09 CROSSOVER 10 DRIVEWAY/ACCESS 11 RAILWAY GRADE CROSSING 12 SHARED-USE PATHS ON TRAILS 13 UNKNOWN
DAMAGE SCALE 2 2	STRIKING VEHICLE: OVERRIDE/ UNDERIDE 1 NO UNDERIDE OR OVERRIDE 2 UNDERIDE, COMPARTMENT INTRUSION 3 UNDERIDE, NO COMPARTMENT INTRUSION 4 UNDERIDE, COMPARTMENT INTRUSION UNKNOWN 5 OVERRIDE, MOTOR VEHICLE IN TRANSPORT 6 OVERRIDE, OTHER VEHICLE 7 UNKNOWN	ALCOHOL TEST RESULT 1 STATED 2 ESTIMATED SPEED 3 SPEED	ALCOHOL TEST RESULT 1 NONE 2 BLOOD 3 URINE 4 BREATH 5 OTHER	ROAD CONTOUR 1 STRAIGHT LEVEL 2 STRAIGHT GRADE 3 CURVE LEVEL 4 CURVE GRADE	ROAD CONDITIONS 01 DRY 02 WET 03 SNOW 04 ICE 05 SAND, MUD, DRIFT, OIL, GRAVEL 06 WATER (STANDING, MOVING) 07 SLUSH 08 DEBRIS** 09 RUT, HOLES, BUMPS, UNEVEN PAVEMENT** 10 OTHER 11 UNKNOWN **SECONDARY ROAD CONDITIONS ONLY
07-059415					

Narrative

UNIT #1 STATED SITE WAS SB ON SOUTH AVE AT JUDSON
 STOPPED AT A RED LIGHT, WHEN UNIT #2 STRUCK HER. UNIT #2 STATED HE
 WAS SB ON SOUTH AVE BEHIND UNIT #1 AND SLID ON THE WET PAVEMENT
 AND STRUCK UNIT #1.

MANNER OF COLLISION OR IMPACT

1

- 1 NOT COLLISION BETWEEN TWO 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

04

- 01 CLEAR
- 02 CLOUDY
- 03 FOG, SMOG, SMOKE
- 04 RAIN
- 05 SLEET, HAIL (FREEZING RAIN DRIZZLE)
- 06 SNOW
- 07 SEVERE CROSSWINDS
- 08 BLOWING SAND, SOIL, DIRT, SNOW
- 09 OTHER
- 10 UNKNOWN

LIGHT CONDITIONS

4

- 1 DAYLIGHT
- 2 DAWN
- 3 DUSK
- 4 DARK - LIGHTED ROADWAY
- 5 DARK - NOT LIGHTED
- 6 DARK - UNKNOWN LIGHTING
- 7 GLARE
- 8 OTHER
- 9 UNKNOWN

SCHOOL BUS RELATED

1

- 1 NO
- 2 YES, DIRECTLY INVOLVED
- 3 YES, INDIRECTLY INVOLVED
- 4 UNKNOWN

WORK ZONE RELATED

1

- 1 NO
- 2 YES
- 3 UNKNOWN

TYPE OF WORK ZONE

- 1 LANE CLOSURE
- 2 LANE SHIFT/CROSSOVER
- 3 WORK ON SHOULDER OR MEDIAN
- 4 INTERMITTENT/MOVING WORK
- 5 OTHER

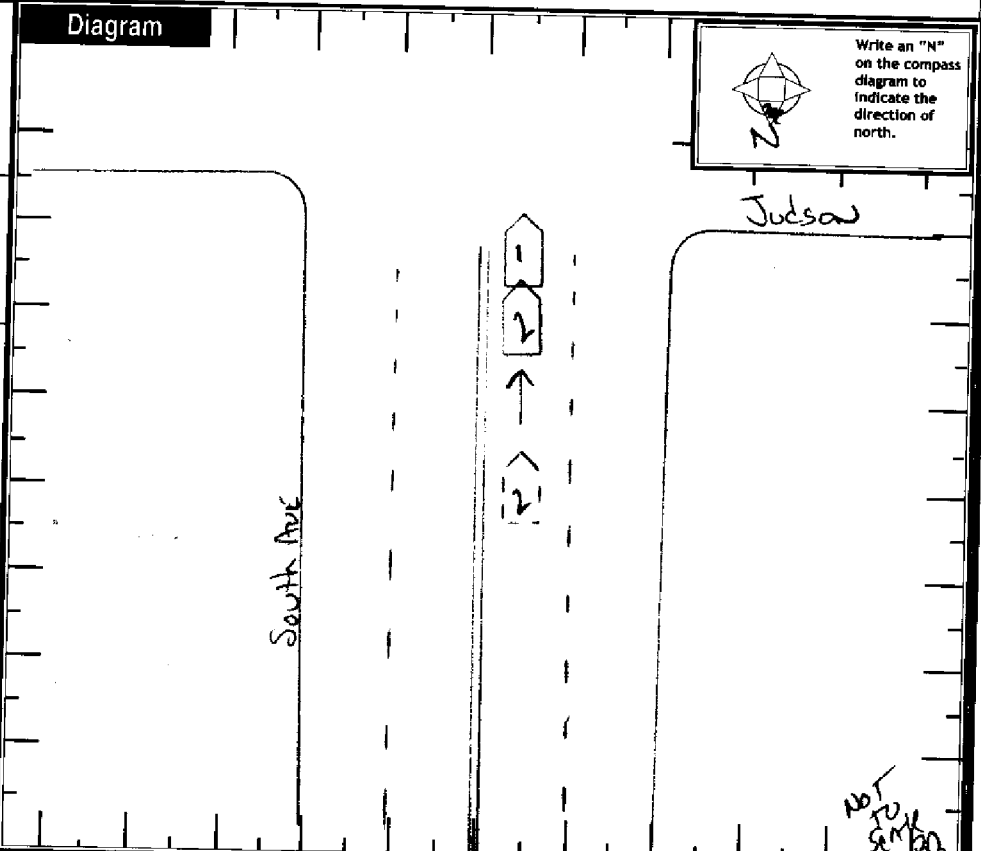
LOCATION OF CRASH IN WORK ZONE

- 1 BEFORE FIRST WORK ZONE WARNING SIGN
- 2 ADVANCE WARNING AREA
- 3 TRANSITION AREA
- 4 ACTIVITY AREA

WORKERS PRESENT

- 1 NO
- 2 YES
- 3 UNKNOWN

Diagram



Truck/Bus

THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING:
 A TRUCK (MOTOR VEHICLE) WITH A GVWR MORE THAN 10,000 POUNDS; OR
 A TRUCK (MOTOR VEHICLE) WITH A HAZARDOUS MATERIALS PLACARD; OR
 A BUS DESIGNED FOR AT LEAST 9 PERSONS, INCLUDING DRIVER.

**A
N
D**

THE CRASH RESULTED IN ONE OR MORE OF THE FOLLOWING:
 A FATALITY; OR
 AN INJURY REQUIRING TRANSPORTATION FOR IMMEDIATE MEDICAL TREATMENT; OR
 AT LEAST ONE VEHICLE WAS TOWED DUE TO DISABLING DAMAGE OR REQUIRED INTERVENING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER.

COMPANY (FROM SHIPPING PAPERS)

COMPANY PHONE

ADDRESS (STREET, CITY, ST, ZIP CODE)

US DOT

ICC MC

PUCO

TRAILER LP ST.

TRAILER LP YEAR

TRAILER LP #

PLACARD #

CARGO BODY TYPE

- 01 NOT APPLICABLE
- 02 BUS (9-15 INCLUDING DRIVER)
- 03 VAN/ENCLOSED BOX
- 04 GRAIN/CHIPS/GRAVEL

- 05 POLE
- 06 CARGO TANK
- 07 FLATBED
- 08 DUMP

- 09 CONCRETE MIXER
- 10 AUTO TRANSPORTER
- 11 GARBAGE/REFUSE
- 12 OTHER
- 13 UNKNOWN

Weight (GVWR)

- 1 LESS/EQUAL 10,000
- 2 10,001 - 25,000
- 3 MORE THAN 25,000

CDL Class

- 1 CLASS A
- 2 CLASS B
- 3 CLASS C
- 4 CLASS M
- 5 CLASS D

Hazardous Materials Placard

- 1 NO
- 2 YES
- 3 UNKNOWN

Hazardous Materials Released

- 1 NO
- 2 YES
- 3 NOT APPLICABLE
- 4 UNKNOWN

Police Action

DATE CRASH REPORTED

08 09 2007 2102

DISPATCH

2102

ARRIVED

2110

CLEARED

2202

OTHER

60

OFFICER'S NAME *

BOOKSING

CHECKED BY

D/S R. Deichman

DATE REPORT FILED *

08102007

REPORT TAKEN BY

- 1 POLICE AGENCY
- 2 MOTORIST

REPORT TAKEN AT

- 1 SCENE
- 2 STATION
- 3 OTHER

07-059415

TRAFFIC CRASH REPORT- OCCUPANT ADDENDUM

OH-1-P (Rev. 11/99)

07-059415 05009 REPORTING AGENCY *
Youngstown Police 08092007

NAME (LAST, FIRST, MIDDLE) 01 Godoy, ADRIANA HOME PHONE # 1330
 ADDRESS (STREET, CITY, STATE, ZIP CODE) 981 Compass west #4 Austintown ohio 44115
 INJURED TAKEN BY 1 NONE 4 OTHER TRANSPORTED BY 0617 1993 13 F INJURED TAKEN TO
 2 EMS 5 UNKNOWN 3 POLICE

NAME (LAST, FIRST, MIDDLE) HOME PHONE #
 ADDRESS (STREET, CITY, STATE, ZIP CODE) INJURED TAKEN BY 1 NONE 4 OTHER TRANSPORTED BY INJURED TAKEN TO
 2 EMS 5 UNKNOWN 3 POLICE

NAME (LAST, FIRST, MIDDLE) HOME PHONE #
 ADDRESS (STREET, CITY, STATE, ZIP CODE) INJURED TAKEN BY 1 NONE 4 OTHER TRANSPORTED BY INJURED TAKEN TO
 2 EMS 5 UNKNOWN 3 POLICE

NAME (LAST, FIRST, MIDDLE) HOME PHONE #
 ADDRESS (STREET, CITY, STATE, ZIP CODE) INJURED TAKEN BY 1 NONE 4 OTHER TRANSPORTED BY INJURED TAKEN TO
 2 EMS 5 UNKNOWN 3 POLICE

NAME (LAST, FIRST, MIDDLE) HOME PHONE #
 ADDRESS (STREET, CITY, STATE, ZIP CODE) INJURED TAKEN BY 1 NONE 4 OTHER TRANSPORTED BY INJURED TAKEN TO
 2 EMS 5 UNKNOWN 3 POLICE

NAME (LAST, FIRST, MIDDLE) HOME PHONE #
 ADDRESS (STREET, CITY, STATE, ZIP CODE) INJURED TAKEN BY 1 NONE 4 OTHER TRANSPORTED BY INJURED TAKEN TO
 2 EMS 5 UNKNOWN 3 POLICE

NAME (LAST, FIRST, MIDDLE) HOME PHONE #
 ADDRESS (STREET, CITY, STATE, ZIP CODE) INJURED TAKEN BY 1 NONE 4 OTHER TRANSPORTED BY INJURED TAKEN TO
 2 EMS 5 UNKNOWN 3 POLICE

<p>05 SEATING POSITION</p> <ul style="list-style-type: none"> 01 FRONT - LEFT (MC DRIVER) 02 FRONT - MIDDLE 03 FRONT - RIGHT 04 SECOND - LEFT (MC PASS) 05 SECOND - MIDDLE 06 SECOND - RIGHT 07 THIRD - LEFT (MC PASSENGER/SIDE CAR) 08 THIRD - MIDDLE 09 THIRD - RIGHT 10 SLEEPER SECTION OF CAB 11 ENCLOSED CARGO AREA 12 UNENCLOSED CARGO AREA 13 TRAILING UNIT 14 EXTERIOR 15 OTHER 16 NON-MOTORIST 17 UNKNOWN 	<p>04 SAFETY EQUIPMENT</p> <p>MOTORIST</p> <ul style="list-style-type: none"> 01 NONE USED 02 SHOULDER BELT ONLY 03 LAP BELT ONLY 04 SHOULDER/LAP BELT 05 CHILD SAFETY SEAT 06 MC HELMET USED 07 USE UNKNOWN <p>NON-MOTORIST</p> <ul style="list-style-type: none"> 08 NONE USED 09 HELMET USED 10 PROTECTIVE PADS 11 REFLECTIVE CLOTHING 12 LIGHTING 13 OTHER 14 UNKNOWN 	<p>AIR BAG</p> <ul style="list-style-type: none"> 1 NOT-DEPLOYED 2 DEPLOYED-FRONT 3 DEPLOYED-SIDE 4 DEPLOYED BOTH FRONT/SIDE 5 NOT APPLICABLE 6 UNKNOWN 	<p>AIR BAG SWITCH</p> <ul style="list-style-type: none"> 1 NOT PRESENT 2 IN ON POSITION 3 IN OFF POSITION 4 UNKNOWN 	<p>EJECTION</p> <ul style="list-style-type: none"> 1 NOT EJECTED 2 TOTALLY EJECTED 3 PARTIALLY EJECTED 4 NOT APPLICABLE 5 UNKNOWN 	<p>TRAPPED</p> <ul style="list-style-type: none"> 1 NOT TRAPPED 2 EXTRICATED BY MECHANICAL MEANS 3 FREED BY NON-MECHANICAL MEANS 4 UNKNOWN 	<p>INJURIES</p> <ul style="list-style-type: none"> 1 NO INJURY 2 POSSIBLE 3 NON-INCAPACITATING 4 INCAPACITATING 5 FATAL INJURY 6 UNKNOWN
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