

# TRAFFIC CRASH REPORT



07-064052

CRASH SEVERITY: 3 (1 FATAL, 3 PDO, 2 INJURY, 4 UNKNOWN)

PRIVATE PROPERTY: YES (1 NOT HIT/SKIP, 2 SOLVED, 3 UNSOLVED)

PHOTOS TAKEN: YES

05009

REPORTING AGENCY: YOUNGSTOWN POLICE

03

03

DATE OF CRASH: 08262007

TIME OF CRASH: 2207 DAY OF WEEK: SUN

NAME (OF CITY, VILLAGE OR TOWNSHIP): YOUNGSTOWN

CRASH OCCURRED ON: SOUTH AVE

AT/REFERENCE: DIST REFERENCE: E DEWEY

DRIVER: JOHNSON, JAKEEM L.

ADDRESS: 2725 VOLNEY Rd YOUNGSTOWN, OH 44511

DL STATE: OH DL#: SN960577 LP STATE: OH LP#: M425701

OWNER NAME: SAME

YEAR: 1998 MAKE: FORD MODEL: LONDOUR COLOR: WH

DRIVER: PHILLIPS, PATRICE L.

ADDRESS: 645 WINDOR AVE YOUNGSTOWN, OH 44302

DL STATE: OH DL#: RS226409 LP STATE: OH LP#: CVM9306

OWNER NAME: WALTON JR., LEVI L.

YEAR: 1992 MAKE: OLDS MODEL: 98 COLOR: GRV

Occupant: NAME (LAST, FIRST, MIDDLE)

Occupant: ADDRESS (STREET, CITY, STATE, ZIP CODE)

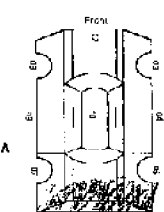
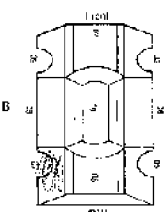
Occupant: NAME (LAST, FIRST, MIDDLE)

Occupant: ADDRESS (STREET, CITY, STATE, ZIP CODE)

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

Motorist/Non-Motorist

Occupant

<b>UNIT NUMBERS</b> <input type="text" value="01"/> <input type="text" value="02"/>	<b>DAMAGE AREA</b>  	<b>PRE-CRASH ACTIONS</b> <input type="text" value="01"/> <input type="text" value="01"/>	<b>SEQUENCE OF EVENTS</b> <table border="1"> <tr> <td><input type="text" value="20"/></td> <td><input type="text" value="20"/></td> </tr> <tr> <td><input type="text" value="20"/></td> <td><input type="text"/></td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table>	<input type="text" value="20"/>	<input type="text" value="20"/>	<input type="text" value="20"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<b>POSTED SPEED</b> <input type="text" value="25"/> <input type="text" value="25"/>	<b>DRUG TEST STATUS</b> <input type="text" value="1"/> <input type="text" value="1"/>
<input type="text" value="20"/>	<input type="text" value="20"/>																
<input type="text" value="20"/>	<input type="text"/>																
<input type="text"/>	<input type="text"/>																
<input type="text"/>	<input type="text"/>																
<input type="text"/>	<input type="text"/>																
<input type="text"/>	<input type="text"/>																
<b>NON-MOTORIST LOCATION</b> <input type="text" value="01"/> <input type="text" value="01"/>	<b>MOST DAMAGED AREA</b> <input type="text" value="07"/> <input type="text" value="07"/>	<b>MOTORIST</b> 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 <b>NON-MOTORIST</b> 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	<b>NON-COLLISION</b> 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 RUMAWAY 12 OTHER NON-COLLISION 13 UNKNOWN NON-COLLISION <b>COLLISION W/PERSON, VEHICLE, OR OBJECT, NOT FIXED</b> 14 PEDESTRIAN 15 PEDAL CYCLE 16 RAILWAY VEHICLE 17 ANIMAL - FARM 18 ANIMAL - DEER 19 ANIMAL - OTHER 20 MOTOR VEHICLE IN TRANSITION 21 PARKED MOTOR VEHICLE 22 WORK ZONE MAINTENANCE EQUIPMENT 23 OTHER MOVABLE OBJECT 24 UNKNOWN MOVABLE OBJECT <b>COLLISION WITH FIXED OBJECT</b> 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	<b>TRAFFIC CONTROL</b> <input type="text" value="04"/> <input type="text" value="04"/>	<b>DRUG TEST TYPE</b> <input type="text" value="1"/> <input type="text" value="1"/>												
<b>TYPE OF UNIT</b> <input type="text" value="02"/> <input type="text" value="04"/>	<b>POINT OF IMPACT</b> <input type="text" value="07"/> <input type="text" value="07"/>	<b>CONTRIBUTING CIRCUMSTANCES</b> <input type="text" value="01"/> <input type="text" value="01"/>	<b>CONTRIBUTING CIRCUMSTANCES</b> <input type="text" value="01"/> <input type="text" value="01"/>	<b>DIRECTION</b> <input type="text" value="43"/> <input type="text" value="34"/>	<b>DRUG TEST 1&amp;2 RESULT</b> <input type="text" value="1"/> <input type="text" value="1"/>												
<b>MOTORIST</b> 01 SIM-COMPACT 02 COMPACT 03 MID SIZE 04 FULL SIZE 05 MINIVAN 06 SPORT UTILITY VEHICLE 07 PICKUP 08 PANELVAN 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/TIMBER 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 TRAIN 30 FARM VEHICLE 31 FARM EQUIPMENT 32 SHOWMOBILE 33 CONSTRUCTION EQUIPMENT 34 ALL OTHERS <b>NON-MOTORIST</b> 35 ANIMAL W/RIDER 36 ANIMAL W/SIGNS 37 BICYCLE 38 PEDESTRIAN 39 PEDALCYCLIST 40 SKATER 41 OTHER-NON MOTORIST 42 UNKNOWN	<b>ACTION</b> <input type="text" value="5"/> <input type="text" value="5"/>	<b>MOTORIST</b> 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/VADRA 09 IMPROPER LANE CHANGE/ DROVE OFF ROAD/ IMPROPER PASSING 10 IMPROPER BACKING 11 IMPROPER START FROM PARKED POSITION 12 STOPPED OR PARKED ILLEGALLY 13 OPERATING VEHICLE IN ERRATIC, RECKLESS, CARELESS, NEGLIGENT OR AGGRESSIVE MANNER 14 SWERVING TO AVOID (DUE TO WIND, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC.) 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTION 18 FATIGUE/ASLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN <b>NON-MOTORIST</b> 23 NONE 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	<b>CONTRIBUTING CIRCUMSTANCES</b> <input type="text" value="01"/> <input type="text" value="01"/>	<b>CONDITION</b> <input type="text" value="1"/> <input type="text" value="1"/>	<b>TYPE OF INTERSECTION</b> <input type="text" value="02"/> <input type="text" value="02"/>												
<b>IN EMERGENCY RESPONSE</b> <input type="text" value="1"/> <input type="text" value="1"/>	<b>STRIKING VEHICLE: OVERRIDE/ UNDERIDE</b> <input type="text" value="1"/> <input type="text" value="1"/>	<b>VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE</b> <input type="text" value="01"/> <input type="text" value="01"/>	<b>VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE</b> <input type="text" value="01"/> <input type="text" value="01"/>	<b>ALCOHOL/DRUG SUSPECTED</b> <input type="text" value="1"/> <input type="text" value="1"/>	<b>ALCOHOL TEST STATUS</b> <input type="text" value="1"/> <input type="text" value="1"/>												
<b>DAMAGE SCALE</b> <input type="text" value="3"/> <input type="text" value="3"/>	<b>VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE</b> <input type="text" value="01"/> <input type="text" value="01"/>	<b>VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE</b> <input type="text" value="01"/> <input type="text" value="01"/>	<b>VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE</b> <input type="text" value="01"/> <input type="text" value="01"/>	<b>ALCOHOL TEST TYPE</b> <input type="text" value="1"/> <input type="text" value="1"/>	<b>ROAD CONDITION</b> <input type="text" value="01"/> <input type="text" value="01"/>												

**Narrative**

UNIT 1 WAS TRAVELING EASTBOUND ON DEWEY APPROACHING SOUTH AVE. UNIT 2 WAS TRAVELING WESTBOUND ON DEWEY APPROACHING SOUTH AVE. UNIT 3 WAS TRAVELING SOUTHBOUND ON SOUTH AVE APPROACHING DEWEY. UNIT 3 SAW THE RED SIGNAL AND STRUCK UNIT 1. UNIT 1 SPUN IN A CIRCLE AND STRUCK UNIT 2. UNIT 3 THEN FLEW THE SCENE SOUTHBOUND ON SOUTH AVE.

\*DRAWN NOT TO SCALE\*

<p><b>MANNER OF COLLISION OR IMPACT</b></p> <p>6</p> <ol style="list-style-type: none"> <li>NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT</li> <li>REAR-END</li> <li>HEAD-ON</li> <li>HEAD-TO-HEAD</li> <li>BACKING</li> <li>ANGLE</li> <li>SIDESWIP, RAMP OR EJECTION</li> <li>SWIPE, OPPOSITE DIRECTION</li> <li>UNKNOWN</li> </ol>	<p><b>SCHOOL BUS RELATED</b></p> <p>1</p> <ol style="list-style-type: none"> <li>NO</li> <li>YES, DIRECTLY INVOLVED</li> <li>YES, INDIRECTLY INVOLVED</li> <li>UNKNOWN</li> </ol>	<p><b>Diagram</b></p>
<p><b>WEATHER</b></p> <p>01</p> <ol style="list-style-type: none"> <li>CLEAR</li> <li>CLOUDY</li> <li>FOG, SMOG, SMOKE</li> <li>RAIN</li> <li>SLEET, HAIL (FREEZING RAIN DRIZZLE)</li> <li>SNOW</li> <li>STRONG CROSSWINDS</li> <li>BLOWING SAND, SOIL, DIRT, SNOW</li> <li>OTHER</li> <li>UNKNOWN</li> </ol>	<p><b>WORK ZONE RELATED</b></p> <p>1</p> <ol style="list-style-type: none"> <li>NO</li> <li>YES</li> <li>UNKNOWN</li> </ol>	
<p><b>LIGHT CONDITIONS</b></p> <p>4</p> <ol style="list-style-type: none"> <li>DAYLIGHT</li> <li>DAWN</li> <li>DUSK</li> <li>DARK - LIGHTED ROADWAY</li> <li>DARK - NOT LIGHTED</li> <li>DARK - UNKNOWN LIGHTING</li> <li>GLARE</li> <li>OTHER</li> <li>UNKNOWN</li> </ol>	<p><b>TYPE OF WORK ZONE</b></p> <p>1</p> <ol style="list-style-type: none"> <li>LANE CLOSURE</li> <li>LANE SHIFT/CROSSOVER</li> <li>WORK ON SHOULDER OR MEDIAN</li> <li>INTERMITTENT/MOVING WORK</li> <li>OTHER</li> </ol> <p><b>LOCATION OF CRASH IN WORK ZONE</b></p> <p>1</p> <ol style="list-style-type: none"> <li>BEFORE FIRST WORK ZONE WARNING SIGN</li> <li>ADVANCE WARNING AREA</li> <li>TRANSITION AREA</li> <li>ACTIVITY AREA</li> </ol> <p><b>WORKERS PRESENT</b></p> <p>1</p> <ol style="list-style-type: none"> <li>NO</li> <li>YES</li> <li>UNKNOWN</li> </ol>	

<p><b>Truck/Bus</b></p> <p>UNIT #</p> <p>00</p>	<p>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</p> <p>COMPANY (FROM SHIPPING PAPERS)</p> <p>Address (STREET, CITY, ST, ZIP CODE)</p>	<p>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.</p> <p>COMPANY PHONE</p>
---	---	---

US DOT	ICC MC	PUCO	TRAILER LP ST	TRAILER LP YEAR	TRAILER LP #	PLACARD	CDL
<b>CARGO BODY TYPE</b>	<b>Weight (GVWR)</b>	<b>CDL Class</b>	<b>Hazardous Materials Placard</b>	<b>Hazardous Materials Released</b>			
<ol style="list-style-type: none"> <li>NOT APPLICABLE</li> <li>BUR (8 15 INCLUDING DRIVER)</li> <li>VAN/ENCLOSED BOX</li> <li>GRAIN/CHIPS/GRAYEL</li> <li>POLE</li> <li>CARGO TANK</li> <li>FLATBED</li> <li>DUMP</li> <li>CONCRETE MIXER</li> <li>AUTO TRANSPORTER</li> <li>GARBAGE/REFUSE</li> <li>OTHER</li> <li>UNKNOWN</li> </ol>	<ol style="list-style-type: none"> <li>LESS/EQUAL 10,000</li> <li>10,001 - 26,000</li> <li>MORE THAN 26,000</li> </ol>	<ol style="list-style-type: none"> <li>CLASS A</li> <li>CLASS B</li> <li>CLASS C</li> <li>CLASS M</li> <li>CLASS D</li> </ol>	<ol style="list-style-type: none"> <li>NO</li> <li>YES</li> <li>UNKNOWN</li> </ol>	<ol style="list-style-type: none"> <li>NO</li> <li>YES</li> <li>NOT APPLICABLE</li> <li>UNKNOWN</li> </ol>			

**Police Action**

DATE CRASH REPORTED: 08/26/2007 22:07

DISPATCH: 2215

ARRIVED: 2220

CLEARED: 0005

OTHER: 110

OFFICER'S NAME: CARTER

CASE # A: 1110

CHECKED BY: P/S R. Deichman

DATE REPORT FILED: 08/27/2007

# TRAFFIC CRASH REPORT



LOCAL RECORD #

07-016H01SR

CRASH SEVERITY

3 1 FATAL 3 PDO  
2 INJURY 4 UNKNOWN

PRIVATE PROPERTY

YES  NO

HIT/SKIP

1 Not Hit/Skip  
2 SOLVED  
3 UNSOLVED

PHOTOS TAKEN

YES  NO

OH-2	OH-3	OH-1P	Other

REPORTING AGENCY #

05009

REPORTING AGENCY \*

Youngstown Police

# UNITS

03

UNIT ERROR

03 98 - ANIMAL  
99 - UNKNOWN

DATE/TIME

08262007

DATE/CLOCK

2207

DAY OF WEEK

SUN

TIME

00

NAME (OF CITY, VILLAGE OR TOWNSHIP) \*

Youngstown

COUNTY # \*

50

LATITUDE

LONGITUDE

CRASH OCCURRED ON

Prefix CRASH LOCATION

SOUTH AVE

TYPE LOC

1 NAMED STREET  
2 NUMBERED ROUTE

TYPE LOCATION POINT USED

1 NAMED STREET  
2 NUMBERED ROUTE

REFERENCE POINT USED

01 STATE LINE  
02 INTERSECTION 2 STREETS  
03 COUNTY LINE

AT/REFERENCE

DIST REFERENCE DR

REFERENCE

F NEWBY

REF POINT

02

UNIT #

03

OFFICER

NAME (LAST, FIRST, MIDDLE)

ADDRESS (STREET, CITY, STATE, ZIP CODE)

HOME PHONE #

WORK PHONE #

DL STATE

DL #

LP STATE

LP #

INJURED TAKEN BY

1 NONE 4 OTHER  
2 EMS 5 UNKNOWN  
3 POLICE

TRANSPORTED BY

INJURED TAKEN TO

OWNER NAME (IF SAME, WRITE "SAME")

ADDRESS (STREET, CITY, STATE, ZIP CODE)

YEAR

MAKE

MODEL

COLOR

INSURANCE COMPANY

TOWING SERVICE

OWNER PHONE #

OFFENSE CHARGED

OFFENSE DESCRIPTION

NAME (LAST, FIRST, MIDDLE)

ADDRESS (STREET, CITY, STATE, ZIP CODE)

HOME PHONE #

WORK PHONE #

DL STATE

DL #

LP STATE

LP #

INJURED TAKEN BY

1 NONE 4 OTHER  
2 EMS 5 UNKNOWN  
3 POLICE

TRANSPORTED BY

INJURED TAKEN TO

OWNER NAME (IF SAME, WRITE "SAME")

ADDRESS (STREET, CITY, STATE, ZIP CODE)

YEAR

MAKE

MODEL

COLOR

INSURANCE COMPANY

TOWING SERVICE

OWNER PHONE #

OFFENSE CHARGED

OFFENSE DESCRIPTION

NAME (LAST, FIRST, MIDDLE)

HOME PHONE #

ADDRESS (STREET, CITY, STATE, ZIP CODE)

INJURED TAKEN BY

1 NONE 4 OTHER  
2 EMS 5 UNKNOWN  
3 POLICE

TRANSPORTED BY

INJURED TAKEN TO

NAME (LAST, FIRST, MIDDLE)

HOME PHONE #

ADDRESS (STREET, CITY, STATE, ZIP CODE)

INJURED TAKEN BY

1 NONE 4 OTHER  
2 EMS 5 UNKNOWN  
3 POLICE

TRANSPORTED BY

INJURED TAKEN TO

Motorist/Non-Motorist

Occupant

SEATING POSITION

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

SAFETY EQUIPMENT

MOTORIST

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

NON-MOTORIST

08 None Used

09 HELMET USED

10 PROTECTIVE PADS

11 REFLECTIVE CLOTHING

12 LIGHTING

13 OTHER

AIR BAG

1 NOT-DEPLOYED

2 DEPLOYED FRONT

3 DEPLOYED SIDE

4 DEPLOYED BOTH FRONT/SIDE

5 NOT APPLICABLE

6 UNKNOWN

AIR BAG SWITCH

1 NOT PRESENT

2 IN ON POSITION

3 IN OFF POSITION

4 UNKNOWN

EJECTION

1 NOT EJECTED

2 TOTALLY EJECTED

3 PARTIALLY EJECTED

4 NOT APPLICABLE

5 UNKNOWN

TRAPPED

1 NOT TRAPPED

2 INDICATED BY MECHANICAL MEANS

3 FREED BY NON-MECHANICAL MEANS

4 UNKNOWN

INJURIES

1 NO INJURY

2 POSSIBLE

3 NON-INCAPACITATING

4 INCAPACITATING

5 FATAL INJURY

6 UNKNOWN

01

14

6

4

5

6

<b>UNIT NUMBERS</b> 	<b>DAMAGE AREA</b> 	<b>PRE-CRASH ACTIONS</b> 	<b>SEQUENCE OF EVENTS</b> 	<b>POSTED SPEED</b> 	<b>DRUG TEST STATUS</b> 
<b>NON-MOTORIST LOCATION</b> 		<b>MOTORIST</b> 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 DRIVE/IDLE 13 OTHER 14 UNKNOWN <b>NON-MOTORIST</b> 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	<b>NON-COLLISION</b> 01 OVERTURN/FOLLOVER 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 RUMBLEWAY 12 OTHER NON-COLLISION 13 UNKNOWN NON-COLLISION <b>COLLISION W/ PERSON, VEHICLE, OR OBJECT NOT FIXED</b> 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 <b>COLLISION WITH FIXED OBJECT</b> 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	<b>TRAFFIC CONTROL</b> 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	1 NONE 2 TEST REFUSED 3 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 TEST GIVEN, RESULTS KNOWN 5 TEST GIVEN, RESULTS UNKNOWN 6 UNKNOWN <b>DRUG TEST TYPE</b> 
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 SHOULDER 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	<b>MOST DAMAGED AREA</b> 	<b>CONTRIBUTING CIRCUMSTANCES</b> 	<b>COLLISION WITH FIXED OBJECT</b> 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	<b>DIRECTION</b> FROM TO FROM TO 	<b>DRUG TEST 1&amp;2 RESULT</b> 
<b>TYPE OF UNIT</b> 		<b>MOTORIST</b> 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 FOLLOWER TOO CLOSELY/W/CA 09 IMPROPER LANE CHANGE 10 DROVE OFF ROAD/ IMPROPER PASSING 11 IMPROPER BACKING 12 IMPROPER START FROM PARKED POSITION 13 STOPPED OR PARKED ILLEGALLY 14 OPERATING VEHICLE IN ERRATIC, HECKLESS, CARELESS, NERVOUS OR AGGRESSIVE MANNER 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTION 18 FATIGUE/ASLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN <b>NON-MOTORIST</b> 23 NONE 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	<b>COLLISION WITH FIXED OBJECT</b> 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	<b>CONDITION</b> 	<b>TYPE OF INTERSECTION</b> 
<b>MOTORIST</b> 01 SUB-COMPACT 02 COMPACT 03 MID SIZE 04 FULL SIZE 05 MINIVAN 06 SPORT UTILITY VEHICLE 07 PICKUP 08 PANELVAN 09 SINGLE UNIT TRUCK; 2 AXLES, 8 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 TRAILER 30 FARM VEHICLE 31 FARM EQUIPMENT 32 SNOWMOBIL 33 CONSTRUCTION EQUIPMENT 34 ALL OTHERS <b>NON-MOTORIST</b> 35 ANIMAL W/ RIDER 36 ANIMAL W/ BUCKY 37 BICYCLE 38 PEDESTRIAN 39 PEDALCYCLIST 40 SKATER 41 OTHER-NON MOTORIST 42 UNKNOWN	<b>POINT OF IMPACT</b> 	<b>MOTORIST</b> 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 FOLLOWER TOO CLOSELY/W/CA 09 IMPROPER LANE CHANGE 10 DROVE OFF ROAD/ IMPROPER PASSING 11 IMPROPER BACKING 12 IMPROPER START FROM PARKED POSITION 13 STOPPED OR PARKED ILLEGALLY 14 OPERATING VEHICLE IN ERRATIC, HECKLESS, CARELESS, NERVOUS OR AGGRESSIVE MANNER 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTION 18 FATIGUE/ASLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN <b>NON-MOTORIST</b> 23 NONE 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	<b>COLLISION WITH FIXED OBJECT</b> 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	<b>CONDITION</b> 	<b>TYPE OF INTERSECTION</b> 
<b>IN EMERGENCY RESPONSE</b> 	<b>STRIKING VEHICLE: OVERRIDE/ UNDERRIDE</b> 	<b>VEHICLE DEFECT CODE ONLY IF '15' SELECTED ABOVE</b> 01 TURN SIGNALS 02 HEAD LAMPS 03 TAIL LAMPS 04 BRAKES 05 STEERING 06 TIRE BLOWN 07 WORN OR SLICK TIRES 08 TRAILER EQUIPMENT DEFECTIVE 09 MOTOR TROUBLE 10 DISAPPEAR FROM PRIOR	<b>FIRST HARMFUL EVENT</b> 	<b>ALCOHOL TEST STATUS</b> 	<b>OCCURRENCE</b> 
<b>DAMAGE SCALE</b> 		<b>VEHICLE DEFECT CODE ONLY IF '15' SELECTED ABOVE</b> 01 TURN SIGNALS 02 HEAD LAMPS 03 TAIL LAMPS 04 BRAKES 05 STEERING 06 TIRE BLOWN 07 WORN OR SLICK TIRES 08 TRAILER EQUIPMENT DEFECTIVE 09 MOTOR TROUBLE 10 DISAPPEAR FROM PRIOR	<b>MOST HARMFUL EVENT</b> 	<b>ALCOHOL TEST TYPE</b> 	<b>ROAD CONTOUR</b> 
<b>DAMAGE SCALE</b> 1 NONE 2 NON-FUNCTIONAL DAMAGE 3 FUNCTIONAL DAMAGE 4 DISABLING DAMAGE	1 NO UNDERRIDE OR OVERRIDE 2 UNDERRIDE, COMPARTMENT INTRUSION 3 UNDERRIDE, NO COMPARTMENT INTRUSION 4 UNDERRIDE, COMPARTMENT INTRUSION UNKNOWN 5 OVERRIDE, MOTOR VEHICLE IN TRANSPORT	<b>VEHICLE DEFECT CODE ONLY IF '15' SELECTED ABOVE</b> 01 TURN SIGNALS 02 HEAD LAMPS 03 TAIL LAMPS 04 BRAKES 05 STEERING 06 TIRE BLOWN 07 WORN OR SLICK TIRES 08 TRAILER EQUIPMENT DEFECTIVE 09 MOTOR TROUBLE 10 DISAPPEAR FROM PRIOR	<b>SPEED DETECTED</b> 	<b>ALCOHOL TEST TYPE</b> 1 NONE 2 BLOOD 3 URINE 4 BREATH 5 OTHER	<b>ROAD CONDITIONS</b> 
<b>DAMAGE SCALE</b> 1 NONE 2 NON-FUNCTIONAL DAMAGE 3 FUNCTIONAL DAMAGE 4 DISABLING DAMAGE	<b>ALCOHOL TEST RESULT</b> 	<b>VEHICLE DEFECT CODE ONLY IF '15' SELECTED ABOVE</b> 01 TURN SIGNALS 02 HEAD LAMPS 03 TAIL LAMPS 04 BRAKES 05 STEERING 06 TIRE BLOWN 07 WORN OR SLICK TIRES 08 TRAILER EQUIPMENT DEFECTIVE 09 MOTOR TROUBLE 10 DISAPPEAR FROM PRIOR	<b>SPEED</b> 	<b>ALCOHOL TEST RESULT</b> 	<b>ROAD CONDITIONS</b> 



# TRAFFIC CRASH REPORT- OCCUPANT ADDENDUM

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

LOCAL REPORT # \*

07-064052

N.C.I.C.# \*

05009

REPORTING AGENCY \*

YOUNGSTOWN POLICE

DATE OF CRASH\*

08262009

<b>E</b>	UNIT # 01	NAME (LAST, FIRST, MIDDLE) BROWN, Ramon U.	HOME PHONE # 3305095672	DATE OF BIRTH 01311984	AGE 23	SEX M
ADDRESS (STREET, CITY, STATE, ZIP CODE) 319 E. LUCIUS Yd OH 44111			INJURED TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE	TRANSPORTED BY	INJURED TAKEN TO	

<b>F</b>	UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE #	DATE OF BIRTH	AGE	SEX
ADDRESS (STREET, CITY, STATE, ZIP CODE)			INJURED TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE	TRANSPORTED BY	INJURED TAKEN TO	

<b>G</b>	UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE #	DATE OF BIRTH	AGE	SEX
ADDRESS (STREET, CITY, STATE, ZIP CODE)			INJURED TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE	TRANSPORTED BY	INJURED TAKEN TO	

<b>H</b>	UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE #	DATE OF BIRTH	AGE	SEX
ADDRESS (STREET, CITY, STATE, ZIP CODE)			INJURED TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE	TRANSPORTED BY	INJURED TAKEN TO	

<b>I</b>	UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE #	DATE OF BIRTH	AGE	SEX
ADDRESS (STREET, CITY, STATE, ZIP CODE)			INJURED TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE	TRANSPORTED BY	INJURED TAKEN TO	

<b>J</b>	UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE #	DATE OF BIRTH	AGE	SEX
ADDRESS (STREET, CITY, STATE, ZIP CODE)			INJURED TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE	TRANSPORTED BY	INJURED TAKEN TO	

<b>K</b>	UNIT #	NAME (LAST, FIRST, MIDDLE)	HOME PHONE #	DATE OF BIRTH	AGE	SEX
ADDRESS (STREET, CITY, STATE, ZIP CODE)			INJURED TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE	TRANSPORTED BY	INJURED TAKEN TO	

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

BLANK FOR WITNESS