

TRAFFIC CRASH REPORT



LOCAL REPORT # *
08-009684

CRASH SEVERITY
3 1 FATAL 3 PDO
2 INJURY 4 UNKNOWN

PRIVATE PROPERTY
X IF YES

HTY/SHOP
2 1 NOT HTY/SHOP
2 SOLVED
3 UNSOLVED

PHOTOS TAKEN
X
OHS2 OHS3 OHS-TP OTHER

N.C.I.C. # *
05009

REPORTING AGENCY *
YOUNGSTOWN Police

UNITS
01

UNIT ERROR
01 99 = ANIMAL
99 = UNKNOWN

DATE OF CRASH *
02 15 2008

TIME OF CRASH 1850 DAY OF WEEK FRI CITY * X VILLAGE * TWP * NAME (OF CITY, VILLAGE OR TOWNSHIP) * YOUNGSTOWN COUNTY # * 50 LATITUDE LONGITUDE

CRASH LOCATION US62 TYPE LOC 3 TYPE LOCATION POINT USED 1 NAMED STREET 3 NUMBERED ROUTE 2 NUMBERED STREET Hiram Expressway

REF POINT 07 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 ON ROUTE W/O REFERENCE

A UNIT # 01 # OF OCC. 01 NAME (LAST, FIRST, MIDDLE) COCHRAN GLENNE ADDRESS (STREET, CITY, STATE, ZIP CODE) 3250 BRANDYWINE #201 YOUNGSTOWN, OHIO 44511

SOCIAL SECURITY NUMBER DATE OF BIRTH 02152008 AGE 53 SEX M HOME PHONE # 727-3107 WORK PHONE #

DL STATE OH DL # RQ292145 LP STATE OH LP # DFA3289 INJURED TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE TRANSPORTED BY NAMED TAKEN TO

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

YEAR 1996 MAKE Chevy MODEL Cavalier COLOR TAN INSURANCE COMPANY NONE TOWING SERVICE huds OWNER PHONE # SAME

OFFENSE CHARGED 331.39a OFFENSE DESCRIPTION FAILURE TO CONTROL CITATION # T43242 LOCAL CODE? X IF YES

B UNIT # # OF OCC. NAME (LAST, FIRST, MIDDLE) ADDRESS (STREET, CITY, STATE, ZIP CODE)

SOCIAL SECURITY NUMBER DATE OF BIRTH AGE SEX 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 CITATION # LOCAL CODE? X IF YES

C 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

D 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

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 EXTENDER 15 OTHER 16 NON-MOTORIST BLANK FOR WITNESS	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 PAIDS 11 REFLECTIVE CLOTHING 12 LIGHTING 13 OTHER 14 UNKNOWN	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 EXTINGUISHED BY MECHANICAL MEANS 3 FIRED BY NON-MECHANICAL MEANS 4 UNKNOWN	INJURIES 1 NO INJURY 2 POSSIBLE 3 NON-INCAPACITATING 4 INCAPACITATING 5 FATAL INJURY 6 UNKNOWN
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SUPPLEMENT * X IF YES

Motorist/Non-Motorist

Occupant

UNIT NUMBERS

01	02	03	04
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Non-Motorist Location

A	B
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- 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

TYPE OF UNIT

03	04
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- 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 (BOSTAL)
13 TRACTOR/SEMI-TRAILER
14 TRACTOR/DOUBLE SHORT
15 TRACTOR/DOUBLE LONG
16 FIFTH WHEEL OR CONVERTER DOLLY
17 TRACTOR/TRIPLER
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 SNOWMOBILE
33 CONSTRUCTION EQUIPMENT
34 ALL OTHERS
- NON-MOTORIST**
35 ANIMAL WIPPER
36 ANIMAL W/BLINDLY
37 BICYCLE
38 PEDESTRIAN
39 PEDALCYCLIST
40 SKATER
41 OTHER-NON MOTORIST
42 UNKNOWN

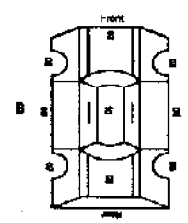
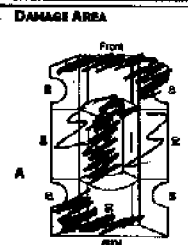
IN EMERGENCY RESPONSE

1	2
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DAMAGE SCALE

3	4
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- 1 NONE**
2 YES
3 UNKNOWN
- 1 NONE**
2 NON-FUNCTIONAL DAMAGE
3 FUNCTIONAL DAMAGE
4 DISABLING DAMAGE
5 SEVERE
6 UNKNOWN



MOST DAMAGED AREA

13	14
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- 01 NONE**
02 CENTER FRONT
03 FRONT FRONT
04 FRONT SIDE
05 FRONT REAR
06 REAR CENTER
07 LEFT REAR
08 LEFT SIDE
09 LEFT FRONT
10 TOP AND WINDOWS
11 UNDERCHASSIS
12 LOAD/TRAILER
13 TOTAL (ALL AREAS)
14 OTHER
15 UNKNOWN

POINT OF IMPACT

13	14
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- 01 NONE**
02 CENTER FRONT
03 FRONT FRONT
04 FRONT SIDE
05 FRONT REAR
06 REAR CENTER
07 LEFT REAR
08 LEFT SIDE
09 LEFT FRONT
10 TOP AND WINDOWS
11 UNDERCHASSIS
12 LOAD/TRAILER
13 TOTAL (ALL AREAS)
14 OTHER
15 UNKNOWN

ACTION

3	4
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- 1 NON-CONTACT**
2 NON-COLLISION
3 STRUCK
4 STRUCK
5 BOTH STRUCK AND STRUCK
6 UNKNOWN

STRUCK VEHICLE: OVERSIDE / UNDERSIDE

1	2
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- 1 NO OVERSIDE OR UNDERSIDE**
2 UNDERSIDE, COMPARTMENT INTRUSION
3 UNDERSIDE, NO COMPARTMENT INTRUSION
4 UNDERSIDE, COMPARTMENT INTRUSION UNKNOWN
5 OVERSIDE, MOTOR VEHICLE IN TRANSPORT
6 OVERSIDE, OTHER VEHICLE
7 UNKNOWN

PRE-CRASH ACTIONS

01	02
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- 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 BLOWN/STOPPED IN TRAFFIC
12 UNDESIRABLE
13 OTHER
14 UNKNOWN
- NON-MOTORIST**
15 ENTERING/CROSSING IN SPECIFIED LOCATION
16 WALKING, CYCLING, JOGGING, PLAYING, ROLLING
17 WORKING
18 PUSHING VEHICLE
19 APPROACHING/LEAVING VEHICLE
20 PLAYING/WORKING ON VEHICLE
21 STANDING
22 OTHER
23 UNKNOWN

CONTRIBUTING CIRCUMSTANCES

15	16
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- MOTORIST**
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 START FROM PARKED POSITION
12 STOPPED ON PARKED ILLICITLY
13 OPERATING VEHICLE IN ERATIC, RICKLES, CARELESS, NEGLIGENCE OR AGGRESSIVE MANNER
14 SWEETING 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
- NON-MOTORIST**
23 NONE
24 IMPROPER CROSSING
25 DRIVING
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

VEHICLE DEFECT CODES ONLY IF "19" SELECTED ABOVE

1	2	3
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- 01 TURN SIGNALS**
02 HEAD LAMPS
03 TAIL LAMPS
04 BRAKES
05 STEERING
06 TIRE BLOWOUT
07 WORK ON SLICK TIRES
08 TRAILER EQUIPMENT DEFECTIVE
09 MOTOR TROUBLE
10 DISABLED FROM PRIOR CRASH
11 OTHER DEFECTS

SEQUENCE OF EVENTS

A	B
01	01
02	02
03	03
04	04

- NON-COLLISION**
01 OVERTAKING/ROLL-OVER
02 FIRE/EXPLOSION
03 IMPERSON
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
13 UNKNOWN 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/LUMINAIRE SUPPORT
36 UTILITY POLE
37 OTHER POST, POLE ON SUPPORT
38 CULTIV
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

FIRST HARMFUL EVENT

1	2
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- OF THE SEQUENCE OF EVENTS - WHICH ONE IS THE FIRST HARMFUL EVENT (1-4)**

MOST HARMFUL EVENT

1	2
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- OF THE SEQUENCE OF EVENTS - WHICH ONE IS THE MOST HARMFUL EVENT (1-4)**

SPEED DETECTED

1	2
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- 1 STATED**
2 ESTIMATED SPEED

SPEED

50	51
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ALCOHOL TEST STATUS

4	5
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- 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

4	5
---	---

- 1 NONE**
2 BLOOD
3 URINE
4 BREATH
5 OTHER

ALCOHOL TEST RESULT

22	23
----	----

POSTED SPEED

50	51
----	----

TRAFFIC CONTROL

01	02
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- 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

DIRECTION FROM TO

3	4
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- 1 NORTH**
2 SOUTH
3 EAST
4 WEST
5 NORTHEAST
6 NORTHWEST
7 SOUTHEAST
8 SOUTHWEST
9 UNKNOWN

CONNECTION

6	7
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- 1 APPARENTLY NORMAL**
2 PHYSICAL IMPAIRMENT
3 EMOTIONAL
4 ILLNESS
5 FILL ASLEEP, FARTED, FATIGUED, ETC
6 UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ALCOHOL
7 OTHER
8 UNKNOWN

ALCOHOL/DRUG SUSPECTED

2	3
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- 1 NONE**
2 YES - ALCOHOL SUSPECTED
3 YES - HED NOT IMPAIRED
4 YES - DRUGS SUSPECTED
5 YES - ALCOHOL/DRUGS SUSPECTED
6 UNKNOWN

ALCOHOL TEST STATUS

4	5
---	---

- 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

4	5
---	---

- 1 NONE**
2 BLOOD
3 URINE
4 BREATH
5 OTHER

ALCOHOL TEST RESULT

22	23
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DRUG TEST STATUS

1	2
---	---

- 1 NONE**
2 TEST REFUSED
3 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE
4 TEST GIVEN, RESULTS KNOWN
5 TEST GIVEN, RESULTS UNKNOWN
6 UNKNOWN

DRUG TEST TYPE

1	2
---	---

- 1 NONE**
2 BLOOD
3 URINE
4 OTHER

DRUG TEST 1&2 RESULT

1	2
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- 1 NONE**
2 MARIJUANA
3 COCAINE
4 CRACKS
5 AMPHETAMINES
6 PCP
7 OTHER
8 UNKNOWN AT TIME OF REPORTING

TYPE OF INTERSECTION

01	02
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- 01 NOT AN INTERSECTION**
02 FOUR-WAY INTERSECTION
03 T-INTERSECTION
04 Y-INTERSECTION
05 TRAFFIC CIRCLE/ROUNDABOUT
06 PIVY-POINT, OR MORE
07 ON RAMP
08 OFF RAMP
09 CROSSOVER
10 DRIVEWAY/ACCESS
11 RAILWAY GRADE CROSSING
12 SHARED-USE PATHS OR TRAILS
13 UNKNOWN

OCCURRENCE

1	2
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- 1 ON ROADWAY**
2 ON SHOULDER
3 IN MEDIAN
4 ON ROADSIDE
5 ON GORE
6 OUTSIDE TRAFFICWAY
7 UNKNOWN

ROAD CONTOUR

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

ROAD CONDITIONS

01	02
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- 01 DRY**
02 WET
03 SNOW
04 ICE
05 SAND, MUD, DIRT, OIL, GRAVEL
06 WATER (STANDING, MOVING)
07 SLUSH
08 DEBRIS**
09 PITS, HOLES, BUMPS, UNEVEN PAVEMENT**
10 OTHER
11 UNKNOWN
****SECONDARY ROAD CONDITIONS ONLY**

SUPPLEMENT # 1 **YES**

LOCAL REPORT # 2 08-009684

UNIT #1 WAS WB ON HINWOOD EXPRESSWAY NEAR WILSON ON RAMP AND
 LAST CONTACT Rolling the Auto. The driver then fled the scene with the auto and was
 found later.

NUMBER 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 SIDESWIP, SAME DIRECTION
 8 SIDESWIP, OPPOSITE DIRECTION
 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 BEHIND
 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

WEATHER

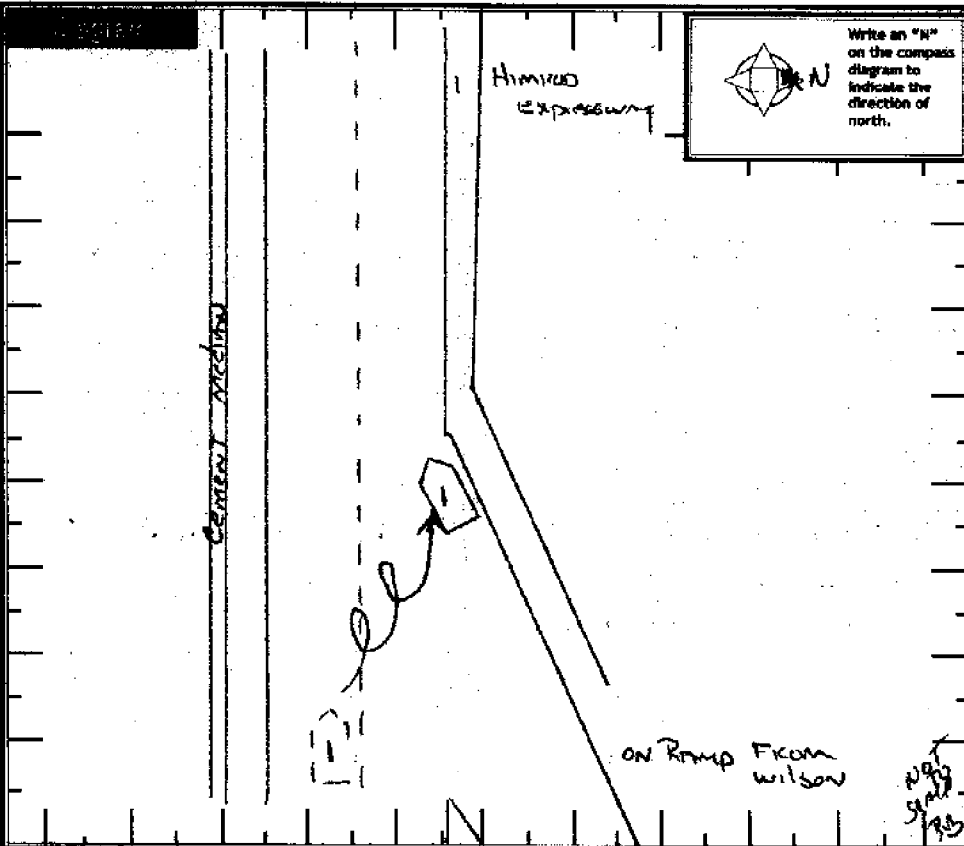
01

01 CLEAR
 02 CLOUDY
 03 FOG, SMOG, SMOKE
 04 RAIN
 05 SLEET, HAIL (FIRING, RAIN DRIZZLE)
 06 SNOW
 07 SEVERE CROSSWIND
 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



UNIT #

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 8 PERSONS, INCLUDING DRIVER.

AND

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	FUCO	TRAILER LP ST.	TRAILER LP YEAR	TRAILER LP #	PLACARD	FDL

CARGO BODY TYPE	Weight (GVWR)	CDL Class	Hazardous Materials Placard	Hazardous Materials Released
01 NOT APPLICABLE 02 BUS (9-15 INCLUDING DRIVER) 03 VAN/ENCLOSED BOX 04 Other/Gravel	05 POLE 06 CARGO TANK 07 FLATBED 08 DUMP 09 CONCRETE MIXER 10 AUTO TRANSPORTER 11 GARBAGE/REFUSE 12 Other 13 UNKNOWN	1 LESS/EQUAL 10,000 2 10,001 - 26,000 3 MORE THAN 26,000	1 CLASS A 2 CLASS B 3 CLASS C 4 CLASS M 5 CLASS D	1 NO 2 YES 3 UNKNOWN
				1 NO 2 YES 3 NOT APPLICABLE 4 UNKNOWN

Police Action

DATE CRASH REPORTED 02/15/2008 **TIME REC CALL** 1850 **DISPATCH** 1852 **ARRIVED** 1858 **CLEARED** 2152 **OTHER** _____ **TOTAL MINUTES** 180

OFFICER'S NAME Bookings **RADIO #** 1037 **CHECKED BY** D/S R. Deichman **DATE REPORT FILED** 02/17/2008

REPORT TAKEN BY 1 POLICE AGENCY
2 MOTORIST

REPORT TAKEN AT 1 SCENE
2 STATION

SUPPLEMENT * YES NO **LOCAL REPORT #** 22-66969A



LOCAL REPORT NUMBER 08-009684	REPORTING AGENCY YOUNGSTOWN Police	DATE OF CRASH MOZ DIS Y 08
IN COUNTY OF MADISON	CRASH LOCATION US62 (HIMROD EXPRESSWAY)	
<p>CAR 304 BOOKING SVR TO BEANS DEN ; KICK TO ASSIST CAR 267 OFFICER CANGEMI ON AN OVI, THAT WAS INVOLVED IN A HIT&RUN ON HIMROD EXPRESSWAY. OFFICER NOTICED THE AUTO TO BE A TAN 1996 Chevy Cavalier, Ohio DFA-3289. IT HAS EXTENSIVE DAMAGE TO ROOF SIDES AND WINDSHIELD. ALL WINDOWS WERE BROKEN OUT.</p> <p>A CC STATED SHE SEEN SAID AUTO ROLL 3 TIMES AND THE DRIVER GOT OUT AND STATE "FUCK YOU" TO THE PEOPLE TRYING TO HELP HIM. HE THEN GOT BACK INTO HIS AUTO AND DROVE AWAY.</p> <p>OFFICER CANGEMI FOUND SAID AUTO AT BEANS DEN ; KICK. THE DRIVER COCHEAN GLENN WAS ASKED IF HE WANTED MEDICAL ATTENTION AND REFUSED ANY AND ALL MEDICAL ATTENTION. HE WAS ARRESTED BY OFFICER CANGEMI FOR OVI. THIS OFFICER SPOKE TO COCHEAN, GLENN AND NOTICED A MODERATE ODOR OF AN ALCOHOLIC BEVERAGE COMING FROM HIS PERSON AS HE SPOKE WITH SLURRED SPEECH, HIS EYES WERE GLASSY. HE ADMITTED TO DRINKING A LOT OF REMI COKES AND BEANS FOR HIS BIRTHDAY.</p> <p>HE WAS TRANSPORTED TO THE SECOND FLOOR BY OFFICER RUTLAND FOR A BRE TEST TO WHICH HE BLEW .220%, ONCE ON THE 2ND FLOOR AN AMBULANCE WAS CALLED JUST TO LOOK AT HIM, BUT AGAIN HE REFUSED ANY AND ALL MEDICAL TREATMENT. HIS AUTO WAS TOWED TO BY LUTTS HOLD FOR SAFEKEEPING. HE WAS TAKEN HOME BY A TAXI. SEE ARREST REPORT.</p>		
OFFICER'S SIGNATURE X, [Signature]		BADGE NUMBER 1037