

TRAFFIC CRASH REPORT



LOCAL REPORT # *
09-010864

CRASH SEVERITY
3 1 FATAL 3 PDO
2 INJURY 4 UNKNOWN

PRIVATE PROPERTY
X IF YES

HIT/SKIP
3 1 Not Hit/Skip
2 SOLVED
3 UNSOLVED

PHOTOS TAKEN
X IF YES

OH-2 OH-3 OH-1P OTHER

N.C.I.C. # *
05009

REPORTING AGENCY *
Youngstown Police Dept.

UNITS
02

UNIT ERROR
01 OR = ANIMAL
OR = UNKNOWN

DATE OF CRASH *
02232009

TIME OF CRASH: 1655 DAY OF WEEK: MON CITY: X VILLAGE: TWP: Youngstown COUNTY: 50 LATITUDE: LONGITUDE:

CRASH LOCATION: TYPE LOC: TYPE LOCATION POINT USED: 1 NAMED STREET 3 NUMBERED ROUTE 2 NUMBERED STREET
Jordan's Market

LIST REFERENCE: UNIT REFERENCE: 1520 Market St. (parking lot) REF POINT: 04 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

Unit # 01 # of Occ. 01 NAME (LAST, FIRST, MIDDLE): ADDRESS (STREET, CITY, STATE, ZIP CODE):

DATE OF BIRTH: AGE: 18 SEX: F 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: Pick-up truck MODEL: COLOR: INSURANCE COMPANY: TOWING SERVICE: OWNER PHONE #:

OFFENSE CHARGED: OFFENSE DESCRIPTION: CITATION #:

Unit # 02 # of Occ. 01 NAME (LAST, FIRST, MIDDLE): Anderson, Woodrow ADDRESS (STREET, CITY, STATE, ZIP CODE): 93 E. Glenhaven, Youngstown, Ohio 44507

DATE OF BIRTH: AGE: 76 SEX: M HOME PHONE #: WORK PHONE #: (330) 782-8146

DL STATE: DL #: OH RQ303039 LP STATE: LP #: OH DWV-1427 INJURED TAKEN BY: 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE TRANSPORTED BY: INJURED TAKEN TO:

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

YEAR: 1997 MAKE: GMC MODEL: Jimmy COLOR: White INSURANCE COMPANY: American Family TOWING SERVICE: OWNER PHONE #:

OFFENSE CHARGED: OFFENSE DESCRIPTION: CITATION #:

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:

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>SEATING POSITION</p> <p>17 A 01 B</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/3RD CAR)</p> <p>08 THIRD - MIDDLE</p> <p>09 THIRD - RIGHT</p> <p>10 SLEEPER SECTION OF CAB</p> <p>11 ENCLOSED CARGO AREA</p> <p>12 UNENCLOSED CARGO AREA</p> <p>13 TRAILING UNIT</p> <p>14 Extension</p> <p>15 Other</p> <p>16 Non-Motorist</p>	<p>SAFETY EQUIPMENT</p> <p>14 A 01 B</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>08 Non-standard</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>AIR BAG</p> <p>6 A 5 B</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>AIR BAG SWITCH</p> <p>6 A 2 B</p> <p>1 NOT PRESENT</p> <p>2 In On Position</p> <p>3 In Off Position</p> <p>4 UNKNOWN</p>	<p>EJECTION</p> <p>1 A 1 B</p> <p>1 NOT EJECTED</p> <p>2 TOTALLY EJECTED</p> <p>3 PARTIALLY EJECTED</p> <p>4 NOT APPLICABLE</p> <p>6 UNKNOWN</p>	<p>TRAPPED</p> <p>1 A 1 B 1 C 1 D</p> <p>1 NOT TRAPPED</p> <p>2 EXTINGUISHED BY MECHANICAL MEANS</p> <p>3 FREED BY NON-MECHANICAL MEANS</p> <p>4 UNKNOWN</p>	<p>INJURIES</p> <p>1 A 1 B 1 C 1 D</p> <p>1 NO INJURY POSSIBLE</p> <p>2 NON-INCAPACITATING</p> <p>3 INCAPACITATING</p> <p>4 FATAL INJURY</p> <p>5 UNKNOWN</p>
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BLANK FOR WITNESS: SUPPLEMENT * X IF YES

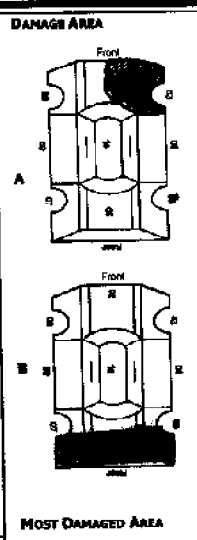
Motorist/Non-Motorist

Occupant

UNIT NUMBERS
 01 A 02 B

Non-Motorist Location
 A 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 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



PRE-CRASH ACTIONS
 05 A 06 B

MOTORIST
 01 MOVEMENTS ESSENTIALLY STRAIGHT AHEAD
 02 BACKING
 03 CHANGING LINES
 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

SEQUENCE OF EVENTS

A	B
20	20
2	2
3	3
4	4

NON-COLLISION
 01 OVERTURN/OVERFLOW
 02 FIRE/EXPLOSION
 03 IMBROSION
 04 JACKKNEE
 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 RAMP
 30 GUARDRAIL FACE
 31 GUARDRAIL END
 32 MEDIAN BARRIER
 33 HIGHWAY TRAFFIC SIGN POST
 34 OVERHEAD SIGN POST
 35 LIGHT/UNMAINTAINED 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

POSTED SPEED
 25 A 25 B

TRAFFIC CONTROL
 01 A 01 B

01 NO CONTROLS
 02 STOP SIGN
 03 YIELD SIGN
 04 TRAFFIC SIGNAL
 05 TRAFFIC FLASHERS
 06 SCHOOL ZONE
 07 RAILROAD CROSSINGS
 08 RAILROAD FLASHERS
 09 RAILROAD GATES
 10 CONSTRUCTION BARRICADE
 11 POLICE OFFICER
 12 PAYMENT MARKINGS
 13 CROSSWALK LINES
 14 WALK/DON'T WALK SIGNAL
 15 TRAFFIC CONTROL DEVICE INOPERATIVE, MISSING, OBSCURED
 16 OTHER

DIRECTION
 FROM TO FROM TO
 2 3 3 2

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

DRUG TEST STATUS
 0 A 1 B

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
 A B

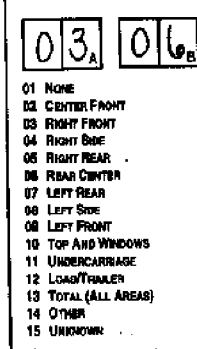
1 NONE
 2 BLOOD
 3 URINE
 4 OTHER

DRUG TEST 1&2 RESULT
 1 A 2 B 1 A 2 B

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

Type Of UNIT
 07 A 06 B

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, 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 TRAM
 30 FARM VEHICLE
 31 FARM EQUIPMENT
 32 SNOWMOBILE
 33 CONSTRUCTION EQUIPMENT
 34 ALL OTHERS



CONTRIBUTING CIRCUMSTANCES
 A B

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/ACCDA
 09 IMPROPER LANE CHANGE/ DROVE OFF ROAD
 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

NON-MOTORIST
 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

FIRST HARMFUL EVENT
 1 A 1 B

MOST HARMFUL EVENT
 1 A 1 B

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

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

CONDITION
 8 A 1 B

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

ALCOHOL/DRUG SUSPECTED
 6 A 1 B

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

TYPE OF INTERSECTION
 01

01 NOT AN INTERSECTION
 02 FOUR-WAY INTERSECTION
 03 T-INTERSECTION
 04 Y-INTERSECTION
 05 TRAFFIC CIRCLE/ROUNDABOUT
 06 FIVE-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

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

IN EMERGENCY RESPONSE
 1 A 1 B

1 NO
 2 YES
 3 UNKNOWN

ACTION
 3 A 4 B

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
 A B

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 FRONT CRASH
 11 OTHER DEFECTS

SPEED DETECTED
 2 A 2 B

1 STATED
 2 ESTIMATED SPEED

SPEED
 010 A 010 B

ALCOHOL TEST STATUS
 6 A 1 B

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
 A B

1 NONE
 2 BLOOD
 3 URINE
 4 BREATH
 5 OTHER

ALCOHOL TEST RESULT
 A B

ROAD CONTOUR
 1

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

ROAD CONDITIONS
 PRIMARY SECONDARY
 01 01

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

DAMAGE SCALE
 3 A 6 B

1 NONE
 2 NON-FUNCTIONAL DAMAGE
 3 FUNCTIONAL DAMAGE
 4 DISABLING DAMAGE
 5 SEVERE
 6 OVERSIDE, OTHER VEHICLE
 7 UNKNOWN

STRIKING VEHICLE: OVERRIDE/ UNDERIDE
 1 A 1 B

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

VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE
 A B

SPEED DETECTED
 2 A 2 B

SPEED
 010 A 010 B

ALCOHOL TEST STATUS
 6 A 1 B

ALCOHOL TEST TYPE
 A B

ALCOHOL TEST RESULT
 A B

ROAD CONTOUR
 1

ROAD CONDITIONS
 PRIMARY SECONDARY
 01 01

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

SUPPLEMENT * X* IF YES LOCAL REPORT # * 09-010864

