

TRAFFIC CRASH REPORT



LOCAL REPORT # *
10-011014

CRASH SEVERITY
3 1 FATAL 3 PDO
2 INJURY 4 UNKNOWN

PRIVATE PROPERTY
X IF YES

HIT/SKIP
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
01

UNIT ERROR
01

98 = ANNUAL
99 = UNKNOWN

DATE OF CRASH *
02272010

TIME OF CRASH
0334

DAY OF WEEK
SAT

CITY *
[checked]

VILLAGE *
[]

TWP *
[]

NAME (OF CITY, VILLAGE OR TOWNSHIP) *
Youngstown

COUNTY # *
50

LATITUDE

LONGITUDE

TYPE LOC
3 F.R. 680 North

TYPE LOCATION POINT USED
1 NAMED STREET 3 NUMBERED ROUTE
2 NUMBERED STREET

UNIT REFERENCE
MM 3/4

REFERENCE POINT USED
01 STATE LINE
02 INTERSECTION 2 STREETS
03 COUNTY LINE

04 HOUSE NUMBER 08 PLACE NAME W/O REFERENCE
05 TOWNSHIP BOUNDARY 09 DRIVEWAY
06 MILE POST 10 STREET OR ROUTE W/O REFERENCE
07 CORPORATION LIMIT

A UNIT # 01 OCC # 03 NAME (LAST, FIRST, MIDDLE)
Allen, Latoya R.

ADDRESS (STREET, CITY, STATE, ZIP CODE)
2827 Idlewood Youngstown, Ohio 44511

DATE OF BIRTH
10111989

AGE
20

SEX
F

HOME PHONE #
330-261-6941

WORK PHONE #

DL STATE OH DL # TE461893

LP STATE OH LP # EJJ4927

INJURED TAKEN BY

1 NONE 4 OTHER
2 EMS 5 UNKNOWN
3 POLICE

TRANSPORTED BY

INJURED TAKEN TO

OWNER NAME (IF SAME, WRITE "SAME")
Williams Leasing

ADDRESS (STREET, CITY, STATE, ZIP CODE)
300 Mill St. Girard, Oh. 44420

YEAR 2004 MAKE Chevy

MODEL Impala

COLOR Maroon

INSURANCE COMPANY PG&C of Ohio

TOWING SERVICE Ludt's

OWNER PHONE #

OFFENSE CHARGED

OFFENSE DESCRIPTION

CITATION #

LOCAL CODE? X IF YES

B UNIT # [] OCC # [] NAME (LAST, FIRST, MIDDLE)

ADDRESS (STREET, CITY, STATE, ZIP CODE)

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 # 01 NAME (LAST, FIRST, MIDDLE)
Smith, Jasmine

HOME PHONE #
330-318-0340

DATE OF BIRTH
01041990

AGE
20

SEX
F

ADDRESS (STREET, CITY, STATE, ZIP CODE)
2804 Julian Youngstown, Ohio 44502

INJURED TAKEN BY
1 NONE 4 OTHER
2 EMS 5 UNKNOWN
3 POLICE

TRANSPORTED BY

INJURED TAKEN TO

D UNIT # 01 NAME (LAST, FIRST, MIDDLE)
Allen, Cassandra M.

HOME PHONE #
330-330-2314

DATE OF BIRTH
09081988

AGE
21

SEX
F

ADDRESS (STREET, CITY, STATE, ZIP CODE)
3824 Mohawk Struthers, Ohio 44471

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 EXTERIOR
15 OTHER

SAFETY EQUIPMENT
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
08 HIGH-VISIBILITY VEST
09 HELMET USED
10 PROTECTIVE PADS
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 EXTRICATED 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

SUPPLEMENT * X IF YES

Motorist/Non-Motorist

Occupant

UNIT NUMBERS
01 A 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

TYPE OF UNIT
03 A B

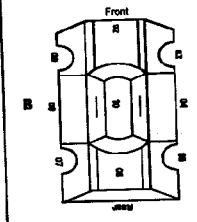
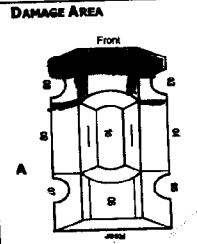
- MOTORIST**
 - 01 SUB-COMPACT
 - 02 COMPACT
 - 03 MID SIZE
 - 04 FULL SIZE
 - 05 MINIVAN
 - 06 SPORT UTILITY VEHICLE
 - 07 PICKUP
 - 08 PANEL/VAN
 - 09 SINGLE UNIT TRUCK; 2 AXLES, 6 TIRES
 - 10 SINGLE UNIT TRUCK; 3+ AXLES
 - 11 TRUCK/TRAILER
 - 12 TRUCK TRACTOR (BORTAL)
 - 13 TRACTOR/SEMI-TRAILER
 - 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 TRAIN
 - 30 FARM VEHICLE
 - 31 FARM EQUIPMENT
 - 32 SNOWMOBILE
 - 33 CONSTRUCTION EQUIPMENT
 - 34 ALL OTHERS
- NON-MOTORIST**
 - 35 ANIMAL W/DRIVER
 - 36 ANIMAL W/BUGGY
 - 37 BICYCLE
 - 38 PEDESTRIAN
 - 39 PEDALCYCLIST
 - 40 SKATER
 - 41 OTHER-NON MOTORIST
 - 42 UNKNOWN

IN EMERGENCY RESPONSE
1 A B

- 1 NO
- 2 YES
- 3 UNKNOWN

DAMAGE SCALE
4 A B

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



MOST DAMAGED AREA
09 A B

- 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

POINT OF IMPACT
09 A B

- 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

ACTION
3 A B

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

STRIKING VEHICLE:
OVERRIDE / UNDERIDE
1 A B

- 1 NO UNDERIDE OR UNDERIDE
- 2 UNDERIDE, COMPARTMENT INTRUSION
- 3 UNDERIDE, NO COMPARTMENT INTRUSION
- 4 UNDERIDE, COMPARTMENT INTRUSION UNKNOWN
- 5 OVERRIDE, MOTOR VEHICLE IN TRANSPORT
- 6 OVERRIDE, OTHER VEHICLE

PRE-CRASH ACTIONS
01 A B

- 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
15 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/ACDA
 - 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
- 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

VEHICLE DEFECT
CODE ONLY IF '15'
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 PRIOR CRASH

SEQUENCE OF EVENTS
A B
41 1 1
30 2 2
3 3
4 4

- NON-COLLISION**
 - 01 OVERTURN/ROLLOVER
 - 02 FIRE/EXPLOSION
 - 03 IMBERSION
 - 04 JACKKNIFE
 - 05 CANOE/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/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

FIRST HARMFUL EVENT
A B

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

MOST HARMFUL EVENT
2 A B

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

SPEED DETECTED
A B

- 1 STATED
- 2 ESTIMATED SPEED

SPEED
A B

POSTED SPEED
A B

TRAFFIC CONTROL
01 A 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

DIRECTION
FROM TO FROM TO
21 A B

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

CONDITION
1 A B

- 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

ALCOHOL / DRUG SUSPECTED
1 A B

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

ALCOHOL TEST STATUS
1 A 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
1 A B

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

ALCOHOL TEST RESULT
A B

SUPPLEMENT #
"X" IF YES
LOCAL REPORT # R
10-011014

DRUG TEST STATUS
1 A 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
1 A B

- 1 NONE
- 2 BLOOD
- 3 URINE
- 4 OTHER

DRUG TEST 1&2 RESULT
1 A B

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

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
4

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

ROAD CONTOUR
1

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

ROAD CONDITIONS
PRIMARY SECONDARY
07 04

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

