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VEH. FIRE P

OH-1 (Rev. 10/79)

OHIO TRAFFIC CRASH REPORT

10-90-680

CRASH SEVERITY
1 FATAL
2 INJURY
3 PROPERTY
4 UNKNOWN

VEHICLE TYPE
1 NOT TRAPPED
2 TRAPPED
3 UNKNOWN

PROPERTY DAMAGE
1 YES
2 NO
3 UNKNOWN

01190

STATE HIGHWAY PATROL

0101

90 - ANNUAL
90 - UNKNOWN
10172002

1940 TH4

WASHINGTON

72

CRASH LOCATION
IR-80 (OHIO TURNPIKE)

TYPE LOC
3

TYPE LOCATION POINT USED
1 ROAD STREET
2 RAILROAD STREET
3 UNKNOWN

CRASH REFERENCE
3 W 93 MILE POST

REF POINT
06

REFERENCE POINT USED
01 STATE LANE
02 INTERSECTION 2 STREET
03 COUNTY LANE
04 HOUSE NUMBER
05 TOWNSHIP HIGHWAY
06 MILE POST
07 COMMERCIAL LANE
08 PLACE NAME W/O REFERENCE
09 DIVERGENT
10 STREET OR ROAD W/O REFERENCE

0101

NAME (LAST, FIRST, MIDDLE)
[REDACTED]
TOLEDO, OH

ADDRESS (Street, City, State, Zip Code)
[REDACTED]

DL STATE
OH

DL #

LP STATE
OH

LP #

DRIVER'S LICENSE
1 NONE
2 EXPIRED
3 POLICE

1 NONE
2 OTHER
3 UNKNOWN

TRANSPORTED BY
1 NONE
2 OTHER
3 UNKNOWN

OWNER NAME (IF NAME, NOT "SELF")
[REDACTED]

ADDRESS (Street, City, State, Zip Code)
TOLEDO, OH

YEAR
1991

MAKE
BUICK

MODEL
LESABRE

COLOR
GRAY

INSURANCE COMPANY
PROGRESSIVE

OFFICIAL CHARGED
[REDACTED]

OFFICIAL DESCRIPTION
[REDACTED]

NAME (LAST, FIRST, MIDDLE)
[REDACTED]
ADDRESS (Street, City, State, Zip Code)
[REDACTED]

NAME (LAST, FIRST, MIDDLE)
[REDACTED]
ADDRESS (Street, City, State, Zip Code)
[REDACTED]

DL STATE
OH

DL #

LP STATE
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DRIVER'S LICENSE
1 NONE
2 EXPIRED
3 POLICE

1 NONE
2 OTHER
3 UNKNOWN

TRANSPORTED BY
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2 OTHER
3 UNKNOWN

OWNER NAME (IF NAME, NOT "SELF")
[REDACTED]

ADDRESS (Street, City, State, Zip Code)
[REDACTED]

YEAR
[REDACTED]

MAKE
[REDACTED]

MODEL
[REDACTED]

COLOR
[REDACTED]

INSURANCE COMPANY
[REDACTED]

OFFICIAL CHARGED
[REDACTED]

OFFICIAL DESCRIPTION
[REDACTED]

NAME (LAST, FIRST, MIDDLE)
[REDACTED]
ADDRESS (Street, City, State, Zip Code)
[REDACTED]

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[REDACTED]

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[REDACTED]
ADDRESS (Street, City, State, Zip Code)
[REDACTED]

NAME (LAST, FIRST, MIDDLE)
[REDACTED]
ADDRESS (Street, City, State, Zip Code)
[REDACTED]

NAME (LAST, FIRST, MIDDLE)
[REDACTED]
ADDRESS (Street, City, State, Zip Code)
[REDACTED]

01

01

5

1

1

1

- SEATING POSITION
01 FRONT - LEFT (DRIVER)
02 FRONT - MIDDLE
03 FRONT - RIGHT
04 SECOND - LEFT (PASS)
05 SECOND - MIDDLE
06 SECOND - RIGHT
07 THIRD - LEFT
(RAC PASSENGER/SEAT CAR)
08 THIRD - MIDDLE
09 THIRD - RIGHT
10 SEATBELT SECTOR OF CAR
11 UNOCCUPIED CURB AREA
12 UNOCCUPIED CURB AREA
13 TRUCK/LAN UNIT
14 EXTERIOR

- SAFETY EQUIPMENT
01 NONE USED
02 SEATBELT ONLY
03 LAP BELT ONLY
04 SEATBELT/LAP BELT
05 CHILD SAFETY SEAT
06 RAC HELMET USED
07 USE UNKNOWN
08 NONE USED
09 HELMET USED
10 PHOTOGRAPH PLACED
11 REFLECTIVE CLOTHING
12 LIGHTING
13 OTHER

- AIR BAG
1 NOT DEPLOYED
2 DEPLOYED-FRONT
3 DEPLOYED-SIDE
4 DEPLOYED BOTH
5 NOT APPLICABLE
6 UNKNOWN

- AIR BAG SKETCH
1 NOT FRONT
2 IN ON POSITION
3 IN ON POSITION
4 UNKNOWN

- DIRECTION
1 NOT SKETCHED
2 SKETCHED
3 PARTIALLY SKETCHED
4 NOT APPLICABLE
5 UNKNOWN

- TRAP
1 NOT TRAPPED
2 SKETCHED BY
MEANS
3 TRAPPED BY
NON-MECHANICAL
MEANS
4 UNKNOWN

- INJURIES
1 NO INJURY
2 POSSIBLE
3 NON-IDENTIFICATION
4 IDENTIFICATION
5 FATAL INJURY
6 UNKNOWN

Motorist/Non-Motorist

Occupant

03

UNIT NUMBER

01

NON-PROPERTY LOCATION

01. MAJOR CRASHES AT INTERSECTION
02. INTERSECTION/NO CRASHES
03. NON-INTERSECTION CRASHES
04. CRASHES ACCESS CRASHES
05. IN SPAN
06. NOT ON ROADWAY
07. MEDIAN (NOT NEAR SPAN)
08. ISLAND
09. SHOULDER
10. SIDEWALK
11. WITHIN 10 FEET OF ROADWAY (NOT CRASHES, MEDIAN, SIDEWALK, ISLAND)
12. WITHIN 10 FEET OF ROADWAY (OTHER TRAFFIC)
13. CRASH TRAFFIC
14. CRASH (NOT ON TRUCK)
15. UNKNOWN

TYPE OF UNIT

03

01. MAJOR CRASHES AT INTERSECTION
02. INTERSECTION/NO CRASHES
03. NON-INTERSECTION CRASHES
04. CRASHES ACCESS CRASHES
05. IN SPAN
06. NOT ON ROADWAY
07. MEDIAN (NOT NEAR SPAN)
08. ISLAND
09. SHOULDER
10. SIDEWALK
11. WITHIN 10 FEET OF ROADWAY (NOT CRASHES, MEDIAN, SIDEWALK, ISLAND)
12. WITHIN 10 FEET OF ROADWAY (OTHER TRAFFIC)
13. CRASH TRAFFIC
14. CRASH (NOT ON TRUCK)
15. UNKNOWN

POINT OF IMPACT

01

01. MAJOR CRASHES AT INTERSECTION
02. INTERSECTION/NO CRASHES
03. NON-INTERSECTION CRASHES
04. CRASHES ACCESS CRASHES
05. IN SPAN
06. NOT ON ROADWAY
07. MEDIAN (NOT NEAR SPAN)
08. ISLAND
09. SHOULDER
10. SIDEWALK
11. WITHIN 10 FEET OF ROADWAY (NOT CRASHES, MEDIAN, SIDEWALK, ISLAND)
12. WITHIN 10 FEET OF ROADWAY (OTHER TRAFFIC)
13. CRASH TRAFFIC
14. CRASH (NOT ON TRUCK)
15. UNKNOWN

ACTION

02

01. MAJOR CRASHES AT INTERSECTION
02. INTERSECTION/NO CRASHES
03. NON-INTERSECTION CRASHES
04. CRASHES ACCESS CRASHES
05. IN SPAN
06. NOT ON ROADWAY
07. MEDIAN (NOT NEAR SPAN)
08. ISLAND
09. SHOULDER
10. SIDEWALK
11. WITHIN 10 FEET OF ROADWAY (NOT CRASHES, MEDIAN, SIDEWALK, ISLAND)
12. WITHIN 10 FEET OF ROADWAY (OTHER TRAFFIC)
13. CRASH TRAFFIC
14. CRASH (NOT ON TRUCK)
15. UNKNOWN

STRIKING VEHICLE: CRASH/UNCRASH

09

VEHICLE DEFECT: CRASH/UNCRASH

09

DRIVER SCALE

5

1. NONE

2. YES

3. UNKNOWN

90-680

Narrative

UNIT #1 WAS TRAVELING WEST ON THE TURNPIKE WHEN IT RAN OUT OF FUEL AND STOPPED ON THE RIGHT BERM. UNIT #1 DRIVER ATTEMPTED TO RESTART AT WHICH TIME HE OBSERVED FLAMES COMING FROM THE ENGINE AREA, AND EVEN THE WINDSHIELD. UNIT #1 WAS ENVELOPED IN FLAMES.

NUMBER OF COLLISION OR IMPACT SCHOOL BUS RELATED

1. NOT COLLISION BETWEEN TWO VEHICLES IN TRAVEL
2. ROLL-OVER
3. HEAD-ON
4. REAR-END
5. TAILGATE
6. ANGLE
7. SIDEWIDE, SAME DIRECTION
8. SIDEWIDE, OPPOSITE DIRECTION
9. UNKNOWN

WEATHER

01

- 01 Clear
- 02 Cloudy
- 03 Fog, Smoke, Steam
- 04 Rain
- 05 Sleet, Hail (Indicate Size in Inches)
- 06 Snow
- 07 Snow Overcast
- 08 Snow, Sleet, Hail, Fog
- 09 Other
- 10 Unknown

LIGHT CONDITIONS

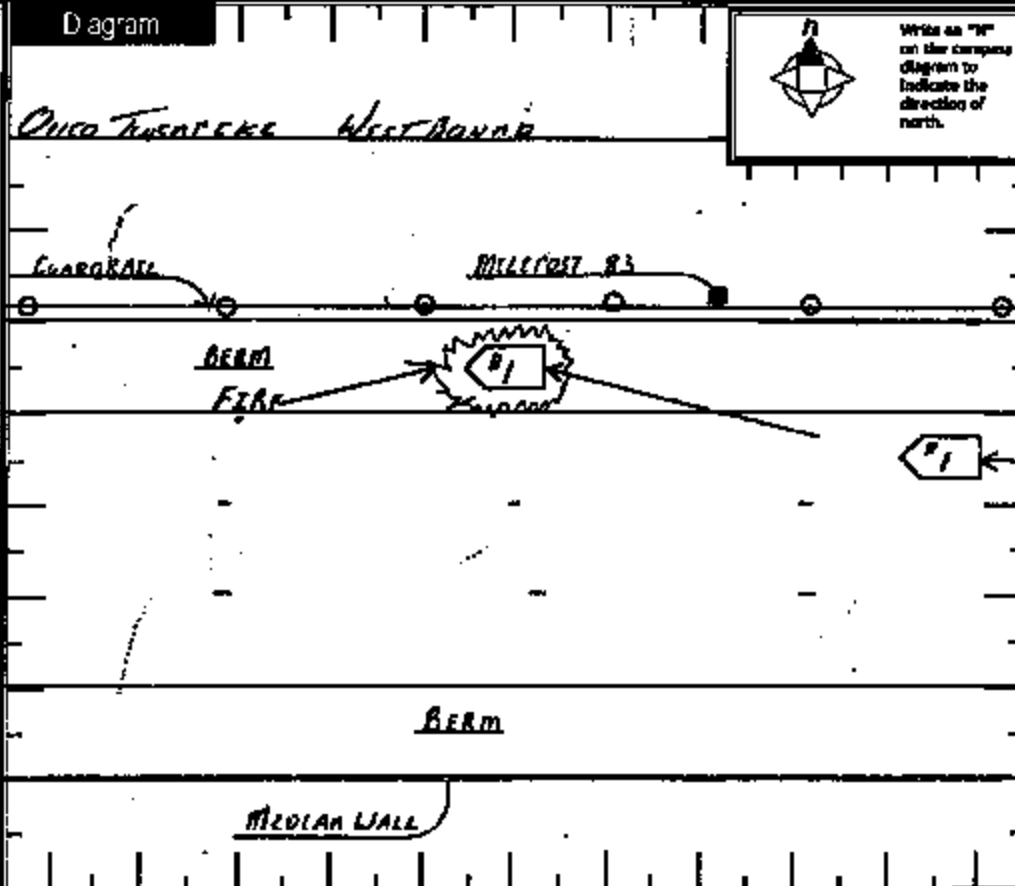
5

1. Daylight
2. Dawn
3. Dusk
4. Dark - Limited Visibility
5. Dark - Not Limited
6. Dark - Unknown Location
7. Blizz
8. Other
9. Unknown

1. No
 2. Yes, Directly Involved
 3. Yes, Indirectly Involved
 4. Unknown
- WORK ZONE RELATED
1. No
 2. Yes
 3. Unknown
- TYPE OF WORK ZONE

1. Lane Closure
 2. Lane Shift/Overpass
 3. Work On Shoulder Or Median
 4. Interchange/Moving Work
 5. Other
- LOCATION OF CRASH IN WORK ZONE
1. Before First Work Zone
 2. Inside Work Zone
 3. Transition Area
 4. Activity Area
 5. Unknown
- WEATHER PRESENT
1. No
 2. Yes
 3. Unknown

Diagram



Truck/Bus

THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING:
A TRUCK (POWER VEHICLE) WITH A GVWR MORE THAN 10,000 POUNDS OR
A TRUCK (POWER VEHICLE) WITH A HAZARDOUS MATERIALS PLACARD OR
A BUS DESIGNED FOR AT LEAST 8 PASSENGERS, INCLUDING DRIVER.

Company (From Shipping Papers)

Address (Street, City, St., Zip Code)

AND

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

Company Phone

US DOT

ICC MC

PLAC

TRUCKS LP SE

TRUCKS LP YEAR

TRUCKS LP #

Cargo Body Type

- 01 Not Applicable
- 02 Bus (8-15 Seating Capacity)
- 03 Van/Boxed Van
- 04 Dump/Flatbed/Other

- 05 Pole
- 06 Cargo Tank
- 07 Flatbed
- 08 Dump

- 09 Concrete Mixer
- 10 Auto Transporter
- 11 Damage/Power
- 12 Other
- 13 Unknown

Weight (GVWR)

1. Less Than 10,000
2. 10,001 - 26,000
3. More Than 26,000

CO2 Class

1. Class A
2. Class B
3. Class C
4. Class M
5. Class D

Hazardous Materials Placed

1. No
2. Yes
3. Unknown

Hazardous Material Released

1. No
2. Yes
3. Not Applicable
4. Unknown

Police Action

Dispatch

Reported

Classified

Other

101702002 1944 1944 1959 2059 60 135

Dispatched By

Classified By

Class Report Filed

Report Taken By 1 1 POLICE/AGENCY 2 MOTORIST

Report Taken At 1 1 SCENE 2 STATION 3 OTHER

10182003 10190600

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (Rev. 1/82)

LOCAL REPORT NUMBER <u>D-90-680</u>	REPORTING AGENCY <u>STATE HIGHWAY PATROL</u>	DATE OF ACCIDENT <u>M 10 17 Y 02</u>
IN COUNTY OF <u>SARASOTA</u>	ACCIDENT LOCATION <u>CR-90 OTR 83.4 M. WEST WASHINGTON TWP.</u>	

UNIT # 1 1991 BUICK LESABRE OH: ADAE640 VIN: 1G4HR54CSMH4T5768INSURANCE: PROGRESSIVE (PROOF WAS BROUGHT WITH UNIT #1)DAMAGE: FIRE DAMAGE TO ENTIRE VEHICLEINJURIES: NONEFIRE DEPARTMENT: ELMORE, OH. F.D.WEATHER: DRYAREA OF 83.4 M.P. WEST WILL BE INSPECTED BY THE TURNPIKE COMMISSIONFOR FIRE DAMAGE TO TURNPIKE PROPERTYOHIO TURNPIKE COMMISSION 681 PROSPECT ST. BEREA, OH. 44017 (440) 334-2081

OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-3 REV 1/82

LOCAL REPORT NUMBER	10-90-680	REPORTING AGENCY	STATE HIGHWAY PATROL	DATE OF CRASH	M 10/11 Y 02
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, [REDACTED] (PRINTED) HEREBY MAKE THIS VOLUNTARY STATEMENT TO

(OFFICER'S NAME)

AT I.R. 80 93 WEST 2045 N.W. (LOCATION)

I WAS HEARD WITNESS IN THE TURNPIKE WHEN MY CAR DROVE. LOOKING AT THE GAS GAUGE I SAW I WAS EMPTY. SINCE I FILLED UP YESTERDAY I KNOW IT MUST'VE BEEN A GAS LEAK OR SOMETHING SIMILAR TO MY CAR. I CALLED ON THE SIDE OF THE ROAD. COULD NOT FIND A CAR. HE WAS COMING OUT TO BRING GAS. I THEN STARTED THE CAR AND HEARD A P.V. SOUND AND I SAW FLAMES COMING FROM THE UNDER THE HOOD. I WENT AND TOOK THE VEHICLE.

Q: WERE YOU INJURED? A: NO

Q: WERE YOU MOVING OR STOPPED WHEN YOU SAW FLAMES? A: STOPPED

Q: HAS ANY MAINTENANCE BEEN DONE TO THIS VEHICLE RECENTLY? A: NONE

Q: DID YOU AT ANYTIME WITNESS ANY PEOPLE CLIMB OUT OF YOUR CAR? A: NO

BUT WHEN I GOT OUT OF THE CAR I COULD SMELL GAS.

ADDRESS OF WITNESS	[REDACTED]	TOLEDO, OH	[REDACTED]	PHONE	[REDACTED]
SIGNATURE OF WITNESS	[REDACTED]	OFFICER'S SIGNATURE	[REDACTED]		