

# TRAFFIC CRASH REPORT

10051900

veh. Fire

P. OH-1 (Rev. 10/99)



10-90-730

CRASH SEVERITY  
3 1 FATAL 3 PDO  
2 BRUISE 4 FURTHER

PRIVATE PROPERTY  
HTY/SECT  
1 Not Hit/Dup  
1 SQUAD  
3 UNK/BLD

PERSON TAKEN  
X  
OH-1 OH-2 OH-1P OH-3

0HP90

REPORTING AGENCY #  
HIGHWAY PATROL 01 01

09242003  
03

1639 WED

X BROWNHILM 47

LATITUDE  
LONGITUDE 03

CRASH LOCATION  
PREFR: CRASH LOCATION  
IR-80 (OHIO TURNPIKE-EB) TYPE LOC 3  
TYPE LOCATION POINT USED  
1 NUMBER STREET 3 NUMBERED ROUTE  
2 MAINTAINED STREET

136.0 E

REFERENCE POINT USED  
01 STATE LINE  
02 INTERSECTION 2 STREETS  
03 COUNTY LINE  
REF POINT 06  
MILEPOST 136

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

PLATE # [REDACTED]  
CITY/TOWNSHIP/STATE  
SOUTH EUCLID OH

01191950 53 M

DL STATE OH LP STATE OH  
INSURANCE TAKEN BY  
1 None 4 Other  
2 EMS 5 Unknown  
3 Police

OWNER NAME (IF SALES, WRITE "SALES")  
SAME  
YEAR 1993 MAKE BUICK MODEL CENTURY COLOR RED  
INSURANCE COMPANY STATE AUTO TOWNSHIP SERVICE CHARLES

DRIVER INFORMATION  
DL STATE OH LP STATE OH  
INSURANCE TAKEN BY  
1 None 4 Other  
2 EMS 5 Unknown  
3 Police

PASSENGER INFORMATION  
DL STATE OH LP STATE OH  
INSURANCE TAKEN BY  
1 None 4 Other  
2 EMS 5 Unknown  
3 Police

OCCUPANT INFORMATION  
INJURED TAKEN BY  
1 None 4 Other  
2 EMS 5 Unknown  
3 Police

Motorist/Non-Motorist

Occupant

- SEATING POSITION
- 01 Right - Left (MC DRIVER)
- 02 FRONT - MIDDLE
- 03 FRONT - RIGHT
- 04 Second - Left (MC PASS)
- 05 Second - MIDDLE
- 06 Second - RIGHT
- 07 Third - LEFT
- 08 Third - MIDDLE
- 09 Third - RIGHT
- 10 SEATED SECTION OF CAB
- 11 SEATED CAB AREA
- 12 UNSEATED CAB AREA
- 13 TRAILING END
- 14 EXTENDED
- 15 OTHER
- 16 NON-EXISTENT
- 17 UNKNOWN

04

03

- SAFETY EQUIPMENT
- 18 AIRBAG
- 19 NONE USED
- 20 SEATER BELT ONLY
- 21 LAP BELT ONLY
- 22 SHOULDER/LAP BELT
- 23 CHILD SAFETY SEAT
- 24 SEC VEHICLE SEAT
- 25 SEC VEHICLE SEAT
- 26 NONE USED
- 27 HELMET USED
- 28 HELMET USED
- 29 PROTECTIVE PADS
- 30 REFLECTIVE CLOTHING
- 31 LEASHES
- 32 CHAIN
- 33 UNKNOWN

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

- AIR BAG SYSTEM
- 1 NOT PRESENT
- 2 IN ON POSITION
- 3 IN OFF POSITION
- 4 UNKNOWN

- RETRACTOR
- 1 NOT EJECTED
- 2 TOTALLY EJECTED
- 3 PARTIALLY EJECTED
- 4 NOT APPLICABLE
- 5 UNKNOWN

- TYPED
- 1 NOT TYPED
- 2 DETECTED BY MECHANIC
- 3 FIRED BY NON-MECHANICAL
- 4 UNKNOWN

- INJURED
- 1 NO INJURY
- 2 POSSIBLE
- 3 NON-INCAPACITATING
- 4 INCAPACITATING
- 5 FATAL INJURY
- 6 UNKNOWN

C. SAFETY SERVICES

UNIT NUMBER

DAMAGE AREA

PRE-CRASH ACTIONS

SEQUENCE OF EVENTS

POSTED SPEED

DRUG TEST STATUS

01

NON-MOTORIST LOCATION

- 01 BARREN CROSSWALK AT INTERSECTION
- 02 INTERSECTION NO CROSSWALK
- 03 NON-INTERSECTION CROSSWALK
- 04 DIVERGENT ACCIDENT CROSSWALK
- 05 IN ROADWAY
- 06 NOT IN ROADWAY
- 07 MEDIAN (NOT IN SHOULDER)
- 08 ISLAND
- 09 SHOULDER
- 10 SIDEWALK
- 11 WITHIN 10 FEET OF ROADWAY (NOT SHOULDER, MEDIAN, SIDEWALK, ISLAND)
- 12 BEYOND 10 FEET OF ROADWAY (WITH TRAFFICWAY)
- 13 CROSSWALK
- 14 OTHER USE FACES ON TRAIL
- 15 UNKNOWN

TYPE OF UNIT

03

- MOTORIST**
- 01 BUS-COMMUT
- 02 COMPACT
- 03 MID SIZE
- 04 FULL SIZE
- 05 MINIVAN
- 06 SPORT UTILITY VEHICLE
- 07 PICKUP
- 08 PASSENGER
- 09 SINGLE UNIT TRUCK; 2 AXLES, 6 TIRES
- 10 SINGLE UNIT TRUCK; 3+ AXLES
- 11 TRUCK TRAILER
- 12 TRUCK TRACTOR (SEMI)
- 13 TRACTOR/SEMI-TRAILER
- 14 TRACTOR/DOUBLE END
- 15 TRACTOR/DOUBLE END
- 16 PUMP TRUCK; ON CRAWLER DOLLY
- 17 TRACTOR/TRACTOR
- 18 MOTORCYCLE
- 19 MOTORCYCLE/BIKE
- 20 SCHOOL BUS
- 21 CHURCH BUS
- 22 PUBLIC BUS
- 23 OTHER BUS
- 24 POLICE VEHICLE
- 25 FIRE TRUCK
- 26 AMBULANCE/RASCAL
- 27 TAXI
- 28 MOTOR HOME
- 29 TRAILER
- 30 FARM VEHICLE
- 31 FARM EQUIPMENT
- 32 SHOULDER
- 33 CONSTRUCTION EQUIPMENT
- 34 ALL OTHERS
- NON-MOTORIST**
- 35 ANIMAL W/O DRIVER
- 36 ANIMAL W/D DRIVER
- 37 BICYCLE
- 38 PEDESTRIAN
- 39 SKATEBOARDER
- 40 SKATER
- 41 OTHER NON-MOTORIST
- 42 UNKNOWN

EMERGENCY RESPONSE

- 1 No
- 2 Yes
- 3 Unknown

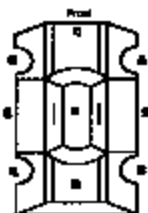
DAMAGE SCALE

5

- 1 NONE
- 2 NON-FUNCTIONAL DAMAGE
- 3 FUNCTIONAL DAMAGE
- 4 DESTRUCTIVE DAMAGE
- 5 BURN
- 6 UNKNOWN



A



B

MOST DAMAGED AREA

13

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

POINT OF IMPACT

03

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

ACTION

2

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

DRIVING VEHICLE OPERATOR/ PASSENGER

- 1 NO SEVERITY ON CRASH
- 2 UNKNOWN, COMPARTMENT INFLAMM
- 3 UNKNOWN, NO COMPARTMENT INFLAMM
- 4 UNKNOWN, COMPARTMENT INFLAMM, DAMAGE
- 5 CRASHED, MOTOR VEHICLE IN TRAFFICWAY
- 6 CRASHED, CRASH VEHICLE
- 7 UNKNOWN

01

MOTORIST

- 01 MOVEMENT ESSENTIALLY STRAIGHT AHEAD
- 02 BACKUP
- 03 CHANGING LANES
- 04 OVERTAKING/PASSING
- 05 TURNING RIGHT
- 06 TURNING LEFT
- 07 WHEELS 90-TURN
- 08 ENTERING TRAFFIC LANE
- 09 LEAVING TRAFFIC LANE
- 10 PENDING
- 11 SLOWING/DROPPED IN TRAFFIC
- 12 STOPPING
- 13 OTHER
- 14 UNKNOWN
- NON-MOTORIST**
- 15 ENTERING/CROSSING IN SPECIFIED LOCATION
- 16 WALKING, RUNNING, JUMPING, PLAYING, CYCLING
- 17 STOPPING
- 18 PUSHER VEHICLE
- 19 APPROACHING/LEAVING VEHICLE
- 20 PLAYING/WORKING ON VEHICLE
- 21 STRAYING
- 22 OTHER
- 23 UNKNOWN

CONTRIBUTING CIRCUMSTANCES

19

MOTORIST

- 01 NONE
- 02 FAILURE TO YIELD
- 03 BLUE FLAG LIGHT, OR STOP SIGN
- 04 EXCEEDED GREEN LIGHT
- 05 BRAKE GRIND
- 06 IMPROPER TURN
- 07 LEFT OF CENTER
- 08 FOLLOWED TOO CLOSELY/INADVERTENTLY
- 09 IMPROPER LANE CHANGING
- 10 DRIVE OFF ROAD/REVERSE/PAVING
- 11 TURNING BACKWARD
- 12 STOPPED ON PAVED SURFACE
- 13 OVERTAKING VEHICLE IN STREET, PARKING, CARPOOL, NEGLIGENT OR IMPROPER MANEUVER
- 14 BEHAVING TO ALCOHOL (DUE TO STOP, SLEEPY, DROWSY, TONIC, DELICIOUS, NON-MOVEMENT IN ROADWAY, ETC)
- 15 FAILURE TO CONTROL
- 16 VEHICLE OBSTRUCTION
- 17 DRIVER DISTRACTION
- 18 FATIGUE/SLEEP
- 19 CHANGING DIRECTION EQUIPMENT
- 20 LEAD SYSTEM/FOLLOWING/SHOULDER
- 21 OTHER IMPROPER ACTION
- 22 REASON
- NON-MOTORIST**
- 23 NONE
- 24 IMPROPER CROSSING
- 25 DAMAGED
- 26 LINES AND/OR SIGNALS IN TRAFFICWAY
- 27 FAILURE TO YIELD RIGHT OF WAY
- 28 NOT VISIBLE (BLIND CLOSING)
- 29 SIGHTING
- 30 FAILURE TO OBEY TRAFFIC SIGNAL, SIGNALS, OR OFFICER
- 31 WRONG SIDE OF THE ROAD
- 32 OTHER
- 33 UNKNOWN

VEHICLE DEFECT CODE ONLY IF "19" SELECTED ABOVE

11

- 01 TIRE SIGNAL
- 02 HEAD LAMP
- 03 TAIL LAMP
- 04 BRAKES
- 05 STEERING
- 06 TIRE RUBBING
- 07 WORN OR SLACK TIRE
- 08 TRAILER EQUIPMENT DEFECTIVE
- 09 MOTOR TROUBLE
- 10 DAMAGE FROM PRED CRASH
- 11 OTHER DEFECTS

02

- NON-COLLISION**
- 01 OVERTAKING/PASSING
- 02 PENDING/STOP
- 03 JAMMING
- 04 JAMMING
- 05 COLLISION/IMPACT LEG/SHOULDER
- 06 EQUIPMENT FAILURE
- 07 SEPARATION OF UNITS
- 08 NEW DR. ROAD POST
- 09 NEW DR. ROAD LEFT
- 10 CROSS MEDIAN/COUNTERLINE
- 11 DOUBLE TURNING
- 12 OTHER NON-COLLISION
- 13 UNKNOWN NON-COLLISION
- 14 COLLISION W/ PERSON, VEHICLE, OR OBJECT, NOT LISTED
- 15 PROXIMAL
- 16 PROXIMAL
- 17 FAILURE TO STOP
- 18 ANIMAL - FRONT
- 19 ANIMAL - REAR
- 20 ANIMAL - OTHER
- 21 MOTOR VEHICLE IN TRAFFICWAY
- 22 PAVED MOTOR VEHICLE
- 23 WORK ZONE MAINTENANCE EQUIPMENT
- 24 OTHER VEHICLE OBJECT
- 25 UNKNOWN MOVABLE OBJECT
- 26 COLLISION WITH FIXED OBJECT
- 27 IMPACT ATTERITION/CRASH CAUTION
- 28 BRIDGE OVERHEAD STRUCTURE
- 29 BRIDGE POLE OR ARMATURE
- 30 BRIDGE PAVEMENT
- 31 BRIDGE RAIL
- 32 BRIDGE FACE
- 33 BRIDGE END
- 34 MEDIAN BARRIER
- 35 IMPROPER TRAFFIC SIGN POST
- 36 OVERHEAD SIGN POST
- 37 LIGHT/ILLUMINATION SUPPORT
- 38 UTILITY POLE
- 39 OTHER POST, POLE OR SUPPORT
- 40 CURB
- 41 CURB
- 42 OTHER
- 43 ENCUMBRANCE
- 44 POLE
- 45 BRIDGE
- 46 TREE
- 47 OTHER FIXED OBJECT
- 48 WORK ZONE MAINTENANCE EQUIPMENT
- 49 UNKNOWN FIXED OBJECT
- 50 OTHER
- 51 UNKNOWN

PRIMARY HAZARDOUS EVENT

1

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

MOST HAZARDOUS EVENT

1

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

SEVERE DEFECTS

1

- 1 BRAKES
- 2 ESTIMATED SPEED

SPEED

65

65

TRAFFIC CONTROL

12

- 01 NO CONTROL
- 02 STOP SIGN
- 03 YIELD SIGN
- 04 TRAFFIC SIGNAL
- 05 TRAFFIC FLASHERS
- 06 ROAD BLOCK
- 07 ROADWORK CROSSBARS
- 08 FOLLOWING FLASHERS
- 09 FOLLOWING SIGN
- 10 CONSTRUCTION BARRICADE
- 11 POLICE OFFICER
- 12 PAVEMENT MARKINGS
- 13 CROSSWALK MARKINGS
- 14 WALKWAY/WALK SIGNAL
- 15 TRAFFIC CONTROL, DEVICE IMPROVEMENT, MISSING, OBLSCURED
- 16 OTHER

DIRECTION

43

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

CONNECTION

1

- 1 APPARENTLY NORMAL
- 2 PHYSICAL IMPEDIMENT
- 3 EXISTENTIAL
- 4 LANE
- 5 FULL ASSEMBLY, FRONTED, FORWARD, ETC
- 6 UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ALCOHOL
- 7 OTHER
- 8 UNKNOWN

ALCOHOL / DRUG SUSPECTED

1

- 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

1

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

ALCOHOL TEST TYPE

1

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

ALCOHOL TEST RESULT

1

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

DRUG TEST TYPE

1

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

DRUG TEST 1&2 RESULT

- 1 NONE
- 2 MARIJUANA
- 3 COCAINE
- 4 CRACK
- 5 AMPHETAMINE
- 6 PCP
- 7 OTHER
- 8 UNKNOWN AT TIME OF PROVISION

TYPE OF INTERSECTION

01

- 01 NOT AN INTERSECTION
- 02 FOUR-WAY INTERSECTION
- 03 T-INTERSECTION
- 04 Y-INTERSECTION
- 05 TRAFFIC CIRCLE/ROUNDABOUT
- 06 FIVE-WAY, OR MORE
- 07 ON RAMP
- 08 OFF RAMP
- 09 CRAWLER
- 10 DRIVEWAY/ACCESS
- 11 RAILWAY GRADE CROSSING
- 12 SLUICE-LIKE PATHS ON TRAILS
- 13 UNKNOWN

OCCURRENCE

1

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

ROAD CONTOUR

2

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

ROAD CONDITIONS

01

- 01 DRY
- 02 WET
- 03 SNOW
- 04 ICE
- 05 SAND, SILT, DIRT, CH, GRAVEL
- 06 WATER (STANDING, FLOWING)
- 07 SLUSH
- 08 OIL/GREASE
- 09 FUR, HAIR, BUMP, UNIDENTIFIED
- 10 OTHER
- 11 UNKNOWN

\* SEVERITY FROM CONDITIONS ONLY

10-90-730

**Narrative** UNIT #1 WAS EASTBOUND IN THE RIGHT LANE. DRIVER OF UNIT #1 NOTICED SMOKE COMING FROM THE ENGINE COMPARTMENT AND PULLED ONTO THE RIGHT BERM. UNIT #1 BECAME ENGULFED IN FIRE.

**NUMBER OF COLLISION OR IMPACT**  
1

**SCHOOL BUS RELATED**  
1

1 NOT COLLISION BETWEEN THE VEHICLE AND TRANSPORT  
2 FIRE-ON  
3 HOSE-ON  
4 HOSE-TO-ROCK  
5 BACKUP  
6 SILENT  
7 OVERTAKE, SAME DIRECTION  
8 OVERTAKE, OPPOSITE DIRECTION  
9 UNKNOWN

**WEATHER**  
01

01 CLEAR  
02 CLOUDY  
03 FOG, SMOG, SMOKE  
04 RAIN  
05 SLEET, RAIN/FREEZING RAIN DRIZZLE  
06 SNOW  
07 SPRING CHICKEN  
08 BLIZZARD/SNOW, SNOW, DRIZZLE/SNOW  
09 OTHER  
10 UNKNOWN

**LYRIC CONDITIONS**  
1

1 DROUGHT  
2 DRY  
3 OILY  
4 DARK - LIMITED ROADWAY  
5 DARK - NO LIGHTS  
6 DARK - UNKNOWN LIGHTING  
7 GLASS  
8 GREAS  
9 UNKNOWN

1 NO  
2 YES  
3 UNKNOWN

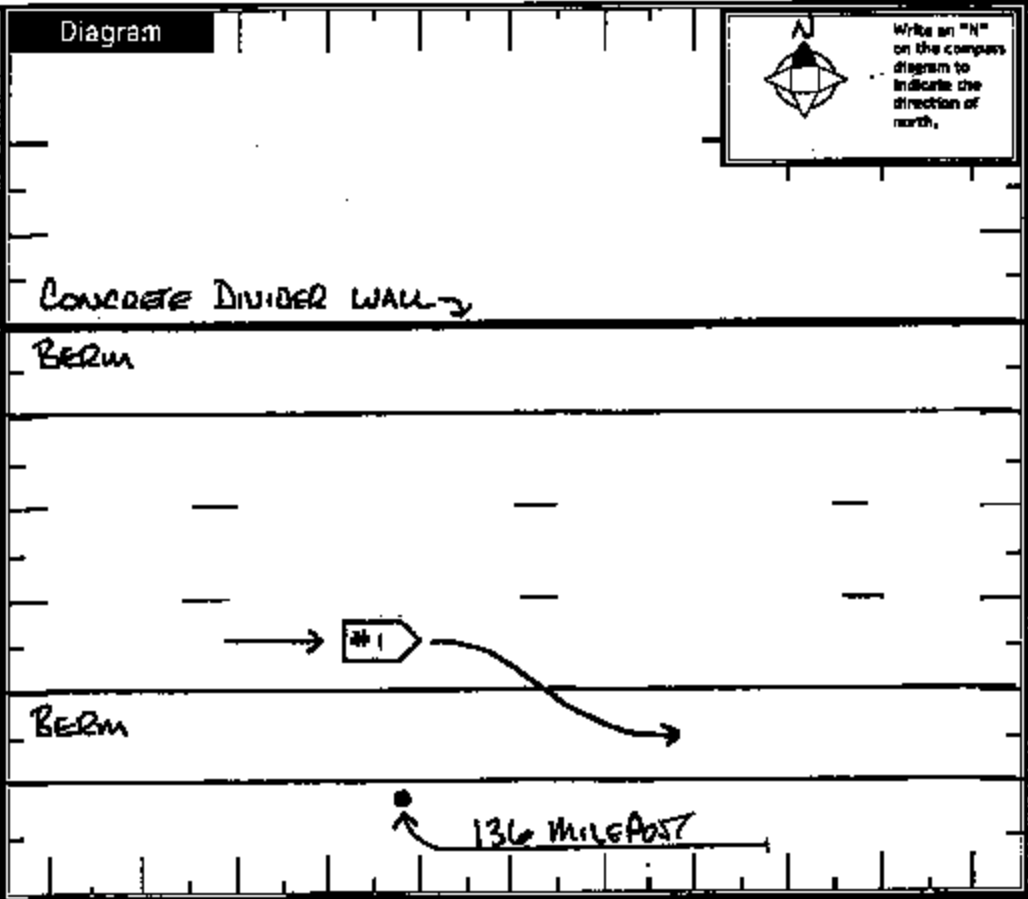
**WORK ZONE RELATED**  
1 NO  
2 YES, DIRECTLY INVOLVED  
3 YES, INDIRECTLY INVOLVED  
4 UNKNOWN

**TYPE OF WORK ZONE**  
1 LESS CLOSURE  
2 LESS STAFF/CHICKEN  
3 WORK ON STRUCTURE OR MACHINE  
4 INTERMITTENT MOVING WORK  
5 OTHER

**LOCATION OF CRASH IN WORK ZONE**  
01

1 BEFORE FIRST WORK ZONE WARNING SIGN  
2 ADVANCE WARNING AREA  
3 TRAVELER AREA  
4 ADVISORY AREA  
5 WORKERS PRESENT

1 NO  
2 YES  
3 UNKNOWN



**Truck/Bus**

The CRASH INVOLVED ONE OR MORE OF THE FOLLOWING:  
A TRUCK (WITH OR WITHOUT A GVWR MORE THAN 10,000 POUNDS); OR  
A TRUCK (WITH OR WITHOUT A GVWR MORE THAN 10,000 POUNDS); OR  
A BUS DESIGNED FOR AT LEAST 8 PERSONS, INCLUDING DRIVER.

**A** 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 DAMAGE DAMAGE OR REQUIRED INTERFERING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER.

**N**

**D**

COMPUT (FROM SHIPPING PAPERS) \_\_\_\_\_ COUNTRY PEOPLE \_\_\_\_\_

ADDRESS (STREET, CITY, ST, ZIP CODE) \_\_\_\_\_

US DOT \_\_\_\_\_ ICC NO \_\_\_\_\_ NUCO \_\_\_\_\_ TRAILER LP EC \_\_\_\_\_ TRAILER LP YEA \_\_\_\_\_ TRAILER LP F \_\_\_\_\_

COACH BODY TYPE	Weight (GVWR)	CDL Class	Hazardous Materials Placard	Hazardous Materials Registered
01 NOT APPLICABLE	1 LESS THAN 10,000	1 CLASS A	1 No	1 No
02 BUS (8-15 INCLUDING DRIVER)	2 10,001 - 25,000	2 CLASS B	2 Yes	2 Yes
03 VAN/ENCLOSURE BOX	3 MORE THAN 25,000	3 CLASS C	3 Unknown	3 NOT APPLICABLE
04 Other/CHASSIS/SEMI		4 CLASS M		4 UNKNOWN
		5 CLASS D		

**Police Action**

09 24 20 03 16 39 16 39 16 49 17 31 18 70

Officer's Name: TPR JR Miller 989

Dispatcher: Sgt Curran

DATE REPORT FILED: 09 25 20 03

REPORT TAKEN BY: 1 POLICE AGENCY 2 OTHER

REPORT TAKEN AT: 1 Scene 2 Station 3 Other

10-90-730

Top Copy - OUPB Bottom Copy - Agency

LOCAL REPORT NUMBER 10-90-730	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF ACCIDENT M 9   24   Y 03
IN COUNTY OF LORAIN	ACCIDENT LOCATION 136 MILEPOST EASTBOUND OHIO TURNPIKE	

DAMAGE TO UNIT #1 1993 BUICK CENTRAL 4 DR  
OHIO REG: BS944N  
- COMPLETELY DESTROYED BY FIRE.

## INSURANCE INFORMATION:

- STATE AUTO INSURANCE COMPANY  
POLICY # [REDACTED] EXP 11-29-03  
216.321.8033

## DAMAGE TO OHIO TURNPIKE PROPERTY:

- DAMAGE TO BERM FROM FIRE. THIS AREA WILL BE INSPECTED BY TURNPIKE OFFICIALS FOR DAMAGE.

OHIO TURNPIKE COMMISSION  
682 PROSPECT ST  
BEREA OH 44017  
440.234.2096

AMHERST FIRE DEPARTMENT RESPONDED TO THE SCENE WITH A TOTAL OF THREE TRUCKS AND TEN FIREMEN. AMHERST FIRE DEPT. WILL HAVE ITS OWN REPORT.

OFFICER'S SIGNATURE  
TPR JR MILLER

PAGE NO.  
485

LOCAL REPORT NUMBER 10-90-730	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH M 9 1984 Y 03
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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

TPR JR MILLER (OFFICER'S NAME) AT SCENE (LOCATION)

COMING DOWN THE ROAD THE CAR JERKED A LITTLE AND THE BATTERY LIGHT CAME ON. I HEARD A POP AND SAW SMOKE SO I PULLED OVER. I THOUGHT IT WAS A RADIATOR HOSE. I REALIZED IT WAS BLACK SMOKE NOT STEAM. I OPENED THE HOOD AND SAW FIRE.

- Q. WERE YOU INJURED? A. NO
- Q. WERE YOU WEARING A SEAT BELT? A. YES
- Q. HOW FAST WERE YOU DRIVING? A. 65 MPH.
- Q. WHAT LANE WERE YOU IN? A. RIGHT
- Q. HAVE YOU HAD ANY PROBLEMS WITH THE CAR?  
A. NO.

ADDRESS OF WITNESS [REDACTED]	PHONE [REDACTED]
SIGNATURE OF WITNESS [REDACTED]	OFFICER'S SIGNATURE TPR JR MILLER