10159474 Fire

OH-1 (Rev. 10/99)

TRAFFIC CRASH REPORT

OHIO PUBLIC SAFETY

[redacted]

Crash Severity: 1 Fatal 2 Injury 3 PDO 4 Unknown — 3

Private Property

Hit/Skip: 1 Not Hit/Skip 2 Solved 3 Unsolved — 1

Photos Taken: X

OH-2	OH-3	OH-1P	Other
X	X		

0 4 0 9 0

Reporting Agency: STATE HWY PATROL

0 1 0 1

[redacted]

5

Time: 1800

Day of Week: WED

Name (of City, Village or Township): X AMHERST 47

Latitude: | Longitude:

Crash Location: IR 80 (OHIO TURNPIKE) EASTBOUND

Type Loc: 3

Type Location Point Used: 1 Named Street 2 Numbered Route 3 Numbered Street

1395 Vermilion Valley

Dist. from Reference: .5 | Dir: E | Reference: MILEPOST 139 PLAZA | Ref Point: 06

Reference Point Used: 01 State Line 02 Intersection 03 County Line 04 House Number 05 Township Boundary 06 Mile Post 07 Corporation Limit 08 Place Name 09 Driveway 10 Street on Route

Y

0 1 0 1

Name (Last, First, Middle): [redacted]

Address (Street, City, State, Zip Code): [redacted] LIGONIER, PA. [redacted]

[redacted] M

Home Phone #: [redacted] | Work Phone #: [redacted]

DL State: PA | DL #: [redacted] | LP State: PA | LP #: [redacted]

Injured Taken By: 1 None 2 EMS 3 Police 4 Other 5 Unknown

Transported By | Injured Taken To

Owner Name: PRS CONSULTANTS INC. | Address: [redacted] LATROBE, PA [redacted]

Year	Make	Model	Color	Insurance Company	Towing Service	Owner Phone #
2001	[redacted]	INTREPID	GOLD	ATLANTIC STATES INS CO	[illegible]	[redacted]

Offense Charged | Offense Description

Motorist/Non-Motorist

Name (Last, First, Middle)

Address (Street, City, State, Zip Code)

Home Phone # | Work Phone #

DL State | DL # | LP State | LP # | Injured Taken By: 1 None 2 EMS 3 Police 4 Other 5 Unknown | 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

Occupant

Name (Last, First, Middle) | Home Phone #

Address (Street, City, State, Zip Code) | Injured Taken By: 1 None 2 EMS 3 Police 4 Other 5 Unknown | Transported By | Injured Taken To

Name (Last, First, Middle) | Home Phone #

Address (Street, City, State, Zip Code) | Injured Taken By: 1 None 2 EMS 3 Police 4 Other 5 Unknown | Transported By | Injured Taken To

Seating Position: 01

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 Trailer Unit
14 Exterior
15 Other
16 Non-Reportable
17 Unknown

Blank for Witness

03

Safety Equipment: 04

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 Pads
11 Reflective Clothing
12 Lighting
13 Other
14 Unknown

Air Bag: 1
1 Not Deployed
2 Deployed-Front
3 Deployed-Side
4 Deployed Both Front/Side
5 Not Applicable
6 Unknown

Air Bag Switch: 1
1 Not Present
2 In On Position
3 In Off Position
4 Unknown

Ejection: 1
1 Not Ejected
2 Totally Ejected
3 Partially Ejected
4 Not Applicable
5 Unknown

Trapped: 1
1 Not Trapped
2 Extricated By Mechanical Means
3 Freed By Non-Mechanical Means
4 Unknown

Injuries: 1
1 No Injury
2 Possible
3 Non-Incapacitating
4 Incapacitating
5 Fatal Injury
6 Unknown

HSY7001

1248

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Unit Number

01

Non-Motorist Location

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

Motorized
01 Sub-Compact
02 Compact
03 Mid Size
04 Full Size
05 Minivan
06 Sport Utility Vehicle
07 Pickup
08 Van
09 Single Unit Truck; 2 Axle, 6 Tires
10 Single Unit Truck; 3+ Axle
11 Truck/Trailer
12 Tractor Tractor Semi-Trailer
13 Tractor/Double
14 Tractor/Triples
15 Tractor [illegible]
16 Farm 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/Wrecker
27 Taxi
28 Motor Home
29 Train
30 Farm Vehicle
31 Farm Equipment
32 Snowmobile
33 Construction Equipment
34 All Others
Non-Motorized
35 Animal W/Rider
36 Animal W/Buggy
37 Bicycle
38 Pedestrian
39 Pedalcyclist
40 Skater
41 Other Non-Motorist
42 Unknown

3rd Emergency Response

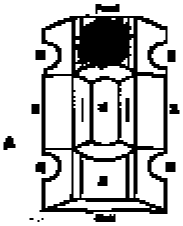
1 No
2 Yes
3 Unknown

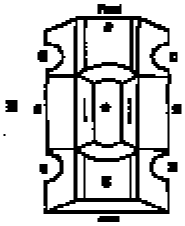
Damage Scale

4

1 None
2 Non-Functional Damage
3 Functional Damage
4 Disabling Damage
5 Scrapped
6 Unknown

Damage Area





Most Damaged Area

02

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

01

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

2

1 Non-Contact
2 Non-Collision
3 Striking
4 Struck
5 Both Striking And Struck
6 Unknown

Damaging Vehicle Operator/Passenger

1 No Damage Or Operator
2 Operator, Compartment Intrusion
3 Damaging, No Compartment Intrusion
4 Damaging, Compartment Intrusion Unknown
5 Overturn, Motor Vehicle In Transport
6 Overturn, Other Vehicle
7 Unknown

Pre-Crash Actions

01

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 Specified Location
16 Walking, Running, Jogging, Playing, Cycling
17 Working
18 Pushing Vehicle
19 Approaching/Leaving Vehicle
20 Playing/Standing On Vehicle
21 Standing
22 Other
23 Unknown

Contributing Circumstances

19

Motorist
01 None
02 Failure To Yield
03 Ran Red Light
04 Ran Stop Sign
05 Exceeded Speed Limit
06 Unsafe Speed
07 Improper Turn
08 Left Of Center
09 Followed Too Closely/ACDA
10 Improper Lane Change/Passing Off Road
11 Improper Backing
12 Improper Start From Parked Position
13 Stopped Or Parked Illegally
14 Operating Vehicle In Erratic, Reckless, Careless, Negligent Or Aggressive Manner
15 Swerving To Avoid (Due To Wet, Slippery Surface, Vehicle, Object, Non-Motorist In Roadway, Etc)
16 Failure To Control
17 Vision Obstruction
18 Driver Inattention
19 Fatigue/Asleep
20 Operating Defective Equipment
21 Load Shifting/Falling/Spilling
22 Other Improper Action
23 Unknown
Non-Motorist
24 None
25 Improper Crossing
26 Darting
27 Lying And/Or Illegally In Roadway
28 Failure To Yield Right Of Way
29 Not Visible (Dark Clothing)
30 Inattentive
31 Failure To Obey Traffic Signs, Signals, Or Officer
32 Wrong Side Of The Road
33 Other
34 Unknown

Vehicle Defect
Code Only If "19" Selected Above

09

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
11 Other Defects

Sequence Of Events

02

Non-Collision
01 Overturn/Rollover
02 Fire/Explosion
03 Immersion
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 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

1

Of the Sequence of Events – Which one is the First Harmful Event (1-4)

Most Harmful Event

1

Of the Sequence of Events – Which one is the Most Harmful Event (1-4)

Speed Detected

1

1 Stated
2 Estimated Speed

Speed

70

Posted Speed

65

Traffic Control

12

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

43

1 North
2 South
3 East
4 West
5 Northeast
6 Northwest
7 Southeast
8 Southwest
9 Unknown

Condition

1

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

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

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

1 None
2 Blood
3 Urine
4 Breath
5 Other

Alcohol Test Result

Drug Test Status

1

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

1 None
2 Blood
3 Urine
4 Other

Drug Test 1&2 Result

1 None
2 Marijuana
3 Cocaine
4 Opiates
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/Alley 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 Gore
6 Outside Trafficway
7 Unknown

Road Contour

1

1 Straight Level
2 Straight Grade
3 Curve Level
4 Curve Grade

Road Conditions

01

01 Dry
02 Wet
03 Snow
04 Ice
05 Sand, Mud, Dirt, Oil, Gravel
06 Water (Standing, Moving)
07 Slush
08 Debris*
09 Rut, Holes, Bumps, Uneven Pavement**
10 Other
11 Unknown
**Secondary Road Condition Only

[redacted]

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Narrative

UNIT #1 WAS TRAVELING EASTBOUND ON THE OHIO TURNPIKE AT MILEPOST 139 UNIT #1 BEGAN TO HAVE SPARKS COME FROM THE ENGINE. UNIT #1 DROVE INTO THE VERMILION VALLEY SERVICE WHEN THE ENGINE CAUGHT ON FIRE.

Manner 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 Sideswipe, Same Direction
8 Sideswipe, 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

Weather: 01

01 Clear
02 Cloudy
03 Fog, Smog, Smoke
04 Rain
05 Sleet, Hail (Freezing Rain or Drizzle)
06 Snow
07 Severe Crosswinds
08 Blowing Sand, Soil, Dirt, Snow
09 Other
10 Unknown

Type of Work Zone

1 Lane Closure
2 Lane Shift/Crossover
3 Work On Shoulder Or Median
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

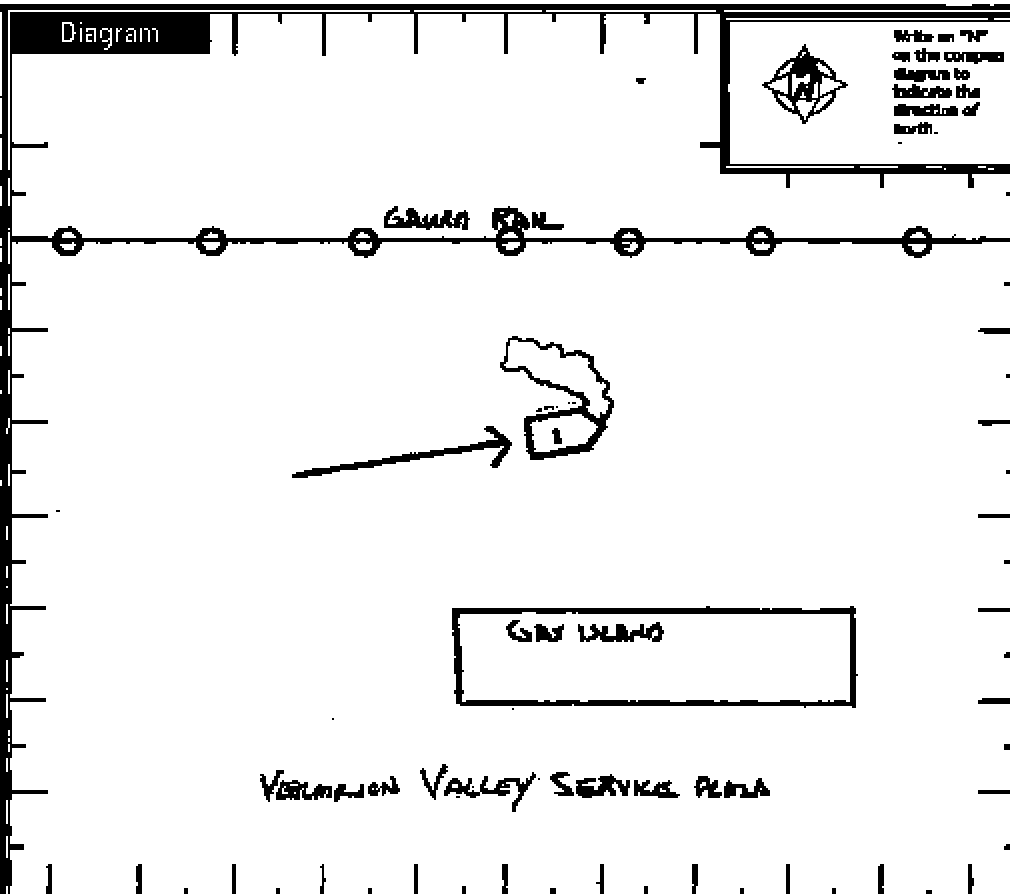
Light Conditions: 1

1 Daylight
2 Dawn
3 Dusk
4 Dark – Lighted Roadway
5 Dark – Not Lighted
6 Dark – Unknown Lighting
7 Glare
8 Other
9 Unknown

Workers Present

1 No
2 Yes
3 Unknown

Diagram



Truck/Bus

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 9 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 other towing assistance before proceeding under its own power.

Company (Name Shipping Papers)	Company Phone

Address (Street, City, St, Zip Code)

US DOT	ICC MC	PUCO	Trailer LP St.	Trailer LP Year	Trailer LP #

Cargo Body Type
01 Not Applicable
02 Bus (9-15 Including Driver)
03 Van/Enclosed Box
04 Grain/Chips/Gravel
05 Pole
06 Cargo Tank
07 Flatbed
08 Dump
09 Concrete Mixer
10 Auto Transporter
11 Garbage/Refuse
12 Other
13 Unknown

Weight (GVWR)
1 Less/Equal 10,000
2 10,001 - 26,000
3 More Than 26,000

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

Hazardous Materials Placard
1 No
2 Yes
3 Unknown

Hazardous Materials Released
1 No
2 Yes
3 Not Applicable
4 Unknown

Police Action

[redacted]

Dispatch	Arrived	Cleared	Other
1800	1800	1840	30

10

Officer's Name # [redacted] 1248

Checked By: Sgt. Ralston

Date Report Filed #: 04202006

Report Taken By: 1 — 1 Police Agency, 2 Motorist

Report Taken At: 1 — 1 Scene, 2 Station, 3 Other

[redacted]

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LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF ACCIDENT
18-SO-0324	STATE HWY PATROL	M 4 D 19 Y 06
IN COUNTY OF LORAIN	ACCIDENT LOCATION OHIO TURNPIKE VERMILION VALLEY SERVICE PLAZA 135 MILEPT	

UNIT #1

DAMAGE -

ALL OF ENGINE COMPARTMENT

INJURIES -

NONE

WEATHER AND ROAD -

CLEAR SUNNY SKIES, DRY ROADWAY, 72°F

* UNIT #1 BEGAN TO EXPERIENCE ENGINE PROBLEMS, UNIT #1 DROVE INTO THE VERMILION VALLEY SERVICE PLAZA WHERE THE ENGINE CAUGHT ON FIRE. INVESTIGATING OFFICER HAD TO PUT OUT FIRE WITH EXTINGUISHER

OFFICER'S SIGNATURE X [redacted] BADGE NUMBER 1248

OHIO TRAFFIC CRASH WITNESS STATEMENT **OH-3 REV 1/82**

LOCAL REPORT NUMBER [redacted]	REPORTING AGENCY State Hwy Patrol	DATE OF CRASH 11/18/06

FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

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

Trooper E. Lord (OFFICERS NAME) AT Scene (LOCATION)

TRAVELING WITH CRUISE CONTROL ON... HEARD A POP & WHEN I LOOKED IN REAR-VIEW MIRROR NOTICE SMOKE COMING. TURNED CRUISE CONTROL OFF AND PROCEEDED DOWN ROAD. WITHIN A MILE NOTICE HEAT GUAGE & & ENGINE COOLANT LIGHT COME ON. SLOWED DOWN TO RIGHT LANE & COOLANT LIGHT & HEAT GUAGE EVERYTHING. TRAVELED ABOUT 7 MILES LOOKING FOR SAFEST REST STOP. ± 5 MILES LATER HEARD A RATTLE & WAS LOOSING POWER & SMOKE / OIL COMING OUT OF BACK. ONCE I REACHED REST STOP, THE BRAKES WERE OUT & HAD TO STOP & EMERGENCY BRAKE. OPENED HOOD UP & HAD FIRE IN ENGINE. STATE TROOPER EXTINGUISHED.

Q- NOW AFTER HOME YOU GOING?

A- NO MPH

Q- WHICH LANE WERE YOU IN?

A- RIGHT LANE

[redacted]

Ligonier, PA [redacted]

ADDRESS OF WITNESS [redacted] Ligonier PA. [redacted]	PHONE [redacted]
SIGNATURE OF WITNESS [redacted]	OFFICERS SIGNATURE TPR Lord

HSY 7003 1/82