

0163683

TRAFFIC CRASH REPORT



10-91-0285 3

CRASH SEVERITY
1 FATAL 3 PDO
2 INJURY 4 UNKNOWN

PRIVATE PROPERTY
HIT/SKIP
1 NOT HIT/SKIP
2 SOLVED
3 UNSOLVED

PHOTOS TAKEN
OH-2 OH-3 OH-1P OTHER
X

OH P 91

REPORTING AGENCY *
STATE HIGHWAY PATROL

01 01

98 = ANIMAL
99 = UNKNOWN

05252006

1505 THU X

NAME (OF CITY, VILLAGE OR TOWNSHIP) *
STRONGSVILLE 18

LATITUDE
LONGITUDE

CRASH OCCURRED ON
PREFIX CRASH LOCATION IR 80 (OHIO TURNPIKE) EB
TYPE LOC 3
TYPE LOCATION POINT USED
1 NAMED STREET 3 NUMBERED ROUTE
2 NUMBERED STREET

LOCAL INFORMATION
162.7 ED.

AT / REFERENCE
DIST REFERENCE DR PREFIX REFERENCE .3M W MILEPOST 163
REF POINT 06
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

0101

NAME (LAST, FIRST, MIDDLE)

ADDRESS (STREET, CITY, STATE, ZIP CODE)
GOULDSBORO, PA.

HOME PHONE #
WORK PHONE #

03281959 47 M

DL STATE DL # PA LP STATE LP # IL INJURED TAKEN BY 1 NONE 4 OTHER 2 EMS 5 UNKNOWN 3 POLICE

TRANSPORTED BY INJURED TAKEN TO

OWNER NAME (IF SAME, WRITE "SAME") ENTERPRISE TRANSPORTATION COMPANY
ADDRESS (STREET, CITY, STATE, ZIP CODE) 23160A E. EAMES, CHANNAHON, IL. 60410

YEAR MAKE MODEL COLOR INSURANCE COMPANY TOWING SERVICE OWNER PHONE #
2006 INTL CONV BLUE WHITE NAT'L UNION FIRE INS. CO. OF PITTS. PA NONE

OFFENSE CHARGED OFFENSE DESCRIPTION

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 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

NAME (LAST, FIRST, MIDDLE)

HOME PHONE #

ADDRESS (STREET, CITY, STATE, ZIP CODE)

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

NAME (LAST, FIRST, MIDDLE)

HOME PHONE #

ADDRESS (STREET, CITY, STATE, ZIP CODE)

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
- 16 NON-MOTORIST
- 17 UNKNOWN

- SAFETY EQUIPMENT
- 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 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

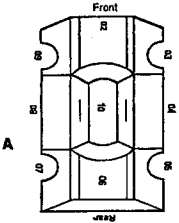
- TRAPPED
- 1 NOT TRAPPED
- 2 EXTRICATED BY MECHANICAL MEANS
- 3 FREED BY NON-MECHANICAL MEANS
- 4 UNKNOWN

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

BLANK FOR WITNESS

24

0393

UNIT NUMBERS	DAMAGE AREA	PRE-CRASH ACTIONS	SEQUENCE OF EVENTS	POSTED SPEED	DRUG TEST STATUS
01		01	06	65	1
NON-MOTORIST LOCATION		MOTORIST		TRAFFIC CONTROL	
01 MARKED CROSSWALK AT INTERSECTION		01 MOVEMENTS ESSENTIALLY STRAIGHT AHEAD		12	1 NONE
02 INTERSECTION/ NO CROSSWALK		02 BACKING			2 TEST REFUSED
03 NON-INTERSECTION CROSSWALK		03 CHANGING LANES			3 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE
04 DRIVEWAY ACCESS CROSSWALK		04 OVERTAKING/PASSING			4 TEST GIVEN, RESULTS KNOWN
05 IN ROADWAY		05 TURNING RIGHT			5 TEST GIVEN, RESULTS UNKNOWN
06 NOT IN ROADWAY		06 TURNING LEFT			6 UNKNOWN
07 MEDIAN (BUT NOT SHOULDER)		07 MAKING U-TURN			DRUG TEST TYPE
08 ISLAND		08 ENTERING TRAFFIC LANE			1
09 SHOULDER		09 LEAVING TRAFFIC LANE			
10 SIDEWALK		10 PARKED			
11 WITHIN 10 FEET OF ROADWAY (NOT SHOULDER, MEDIAN, SIDEWALK, ISLAND)		11 SLOWING/STOPPED IN TRAFFIC			
12 BEYOND 10 FEET OF ROADWAY (WITHIN TRAFFICWAY)		12 DRIVERLESS			
13 OUTSIDE TRAFFICWAY		13 OTHER			
14 SHARED USE PATHS OR TRAILS		14 UNKNOWN			
15 UNKNOWN		NON-MOTORIST			
TYPE OF UNIT		15 ENTERING/CROSSING IN SPECIFIED LOCATION			
13		16 WALKING, RUNNING, JOGGING, PLAYING, CYCLING			
MOTORIST		17 WORKING			
01 SUB-COMPACT		18 PUSHING VEHICLE			
02 COMPACT		19 APPROACHING/LEAVING VEHICLE			
03 MID SIZE		20 PLAYING/WORKING ON VEHICLE			
04 FULL SIZE		21 STANDING			
05 MINIVAN		22 OTHER			
06 SPORT UTILITY VEHICLE		23 UNKNOWN			
07 PICKUP		CONTRIBUTING CIRCUMSTANCES			
08 PANEL/VAN		19			
09 SINGLE UNIT TRUCK; 2 AXLES, 6 TIRES		MOTORIST			
10 SINGLE UNIT TRUCK; 3+ AXLES		01 NONE			
11 TRUCK/TRAILER		02 FAILURE TO YIELD			
12 TRUCK TRACTOR (BOBTAIL)		03 RAN RED LIGHT, OR STOP SIGN			
13 TRACTOR/SEMI-TRAILER		04 EXCEEDED SPEED LIMIT			
14 TRACTOR/DOUBLE SHORT		05 UNSAFE SPEED			
15 TRACTOR/DOUBLE LONG		06 IMPROPER TURN			
16 FIFTH WHEEL OR CONVERTER DOLLY		07 LEFT OF CENTER			
17 TRACTOR/TRIPLES		08 FOLLOWED TOO CLOSELY/ACDA			
18 MOTORCYCLE		09 IMPROPER LANE CHANGE/ DROVE OFF ROAD/ IMPROPER PASSING			
19 MOTORIZED BICYCLE		10 IMPROPER BACKING			
20 SCHOOL BUS		11 IMPROPER START FROM PARKED POSITION			
21 CHURCH BUS		12 STOPPED OR PARKED ILLEGALLY			
22 PUBLIC BUS		13 OPERATING VEHICLE IN ERRATIC, RECKLESS, CARELESS, NEGLIGENT OR AGGRESSIVE MANNER			
23 OTHER BUS		14 SWERVING TO AVOID (DUE TO WIND, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC)			
24 POLICE VEHICLE		15 FAILURE TO CONTROL			
25 FIRE TRUCK		16 VISION OBSTRUCTION			
26 AMBULANCE/RESCUE		17 DRIVER INATTENTION			
27 TAXI		18 FATIGUE/ASLEEP			
28 MOTOR HOME		19 OPERATING DEFECTIVE EQUIPMENT			
29 TRAIN		20 LOAD SHIFTING/FALLING/SPILLING			
30 FARM VEHICLE		21 OTHER IMPROPER ACTION			
31 FARM EQUIPMENT		22 UNKNOWN			
32 SNOWMOBILE		NON-MOTORIST			
33 CONSTRUCTION EQUIPMENT		23 NONE			
34 ALL OTHERS		24 IMPROPER CROSSING			
NON-MOTORIST		25 DARTING			
35 ANIMAL W/RIDER		26 LYING AND/OR ILLEGALLY IN ROADWAY			
36 ANIMAL W/BUGGY		27 FAILURE TO YIELD RIGHT OF WAY			
37 BICYCLE		28 NOT VISIBLE (DARK CLOTHING)			
38 PEDESTRIAN		29 INATTENTIVE			
39 PEDALCYCLIST		30 FAILURE TO OBEY TRAFFIC SIGNS, SIGNALS, OR OFFICER			
40 SKATER		31 WRONG SIDE OF THE ROAD			
41 OTHER-NON MOTORIST		32 OTHER			
42 UNKNOWN		33 UNKNOWN			
IN EMERGENCY RESPONSE		VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE			
1 No					
2 Yes					
3 UNKNOWN					
DAMAGE SCALE					
4					
1 NONE					
2 NON-FUNCTIONAL DAMAGE					
3 FUNCTIONAL DAMAGE					
4 DISABLING DAMAGE					
5 SEVERE					
6 UNKNOWN					
STRIKING VEHICLE: OVERRIDE/ UNDERRIDE					
1 NO UNDERRIDE OR OVERRIDE					
2 UNDERRIDE, COMPARTMENT INTRUSION					
3 UNDERRIDE, NO COMPARTMENT INTRUSION					
4 UNDERRIDE, COMPARTMENT INTRUSION UNKNOWN					
5 OVERRIDE, MOTOR VEHICLE IN TRANSPORT					
6 OVERRIDE, OTHER VEHICLE					
7 UNKNOWN					
SPEED DETECTED					
1 STATED					
2 ESTIMATED SPEED					
SPEED					
60					
ALCOHOL TEST STATUS					
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 NONE					
4 BREATH					
2 BLOOD					
5 OTHER					
3 URINE					
ALCOHOL TEST RESULT					
1 NONE					
2 BLOOD					
3 URINE					
ALCOHOL/DRUG SUSPECTED					
1 NONE					
2 YES - ALCOHOL SUSPECTED					
3 YES - HBD NOT IMPAIRED					
4 YES - DRUGS SUSPECTED					
5 YES - ALCOHOL/ DRUGS SUSPECTED					
6 UNKNOWN					
ALCOHOL/DRUG SUSPECTED					
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 NONE					
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2 PHYSICAL IMPAIRMENT					
3 EMOTIONAL					
4 ILLNESS					
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7 OTHER					
8 UNKNOWN					
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ALCOHOL/DRUG SUSPECTED					
1 APPARENTLY NORMAL					
2 PHYSICAL IMPAIRMENT					
3 EMOTIONAL					
4 ILLNESS					

Narrative

UNIT #1 WAS EASTBOUND ON THE OHIO TURNPIKE IN THE RIGHT LANE. UNIT #1'S LEFT REAR TRAILER TIRE BLEW-OUT CAUSING DAMAGE TO THE TRAILER. UNIT #1 PULLED OVER TO THE SOUTH BERM.

"UNIT #1 - COMM-A"

MANNER OF COLLISION OR IMPACT SCHOOL BUS RELATED

- | | |
|---|----------------------------|
| 1 NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT | 1 No |
| 2 REAR-END | 2 YES, DIRECTLY INVOLVED |
| 3 HEAD-ON | 3 YES, INDIRECTLY INVOLVED |
| 4 REAR-TO-REAR | 4 UNKNOWN |
| 5 BACKING | |
| 6 ANGLE | |
| 7 SIDESWIPE, SAME DIRECTION | |
| 8 SIDESWIPE, OPPOSITE DIRECTION | |
| 9 UNKNOWN | |

WEATHER

02

- | | |
|--|------------------------------|
| 01 CLEAR | 1 LANE CLOSURE |
| 02 CLOUDY | 2 LANE SHIFT/CROSSOVER |
| 03 FOG, SMOG, SMOKE | 3 WORK ON SHOULDER OR MEDIAN |
| 04 RAIN | 4 INTERMITTENT/ MOVING WORK |
| 05 SLEET, HAIL (FREEZING RAIN DRIZZLE) | 5 OTHER |
| 06 SNOW | |
| 07 SEVERE CROSSWINDS | |
| 08 BLOWING SAND, SOIL, DIRT, SNOW | |
| 09 OTHER | |
| 10 UNKNOWN | |

LIGHT CONDITIONS

1

- | | |
|---------------------------|---------------------------------------|
| 1 DAYLIGHT | 1 BEFORE FIRST WORK ZONE WARNING SIGN |
| 2 DAWN | 2 ADVANCE WARNING AREA |
| 3 DUSK | 3 TRANSITION AREA |
| 4 DARK - LIGHTED ROADWAY | 4 ACTIVITY AREA |
| 5 DARK - NOT LIGHTED | |
| 6 DARK - UNKNOWN LIGHTING | |
| 7 GLARE | |
| 8 OTHER | |
| 9 UNKNOWN | |

WORK ZONE RELATED

- | |
|----------------------------|
| 1 No |
| 2 YES, DIRECTLY INVOLVED |
| 3 YES, INDIRECTLY INVOLVED |
| 4 UNKNOWN |

TYPE OF WORK ZONE

- | |
|-----------|
| 1 No |
| 2 YES |
| 3 UNKNOWN |

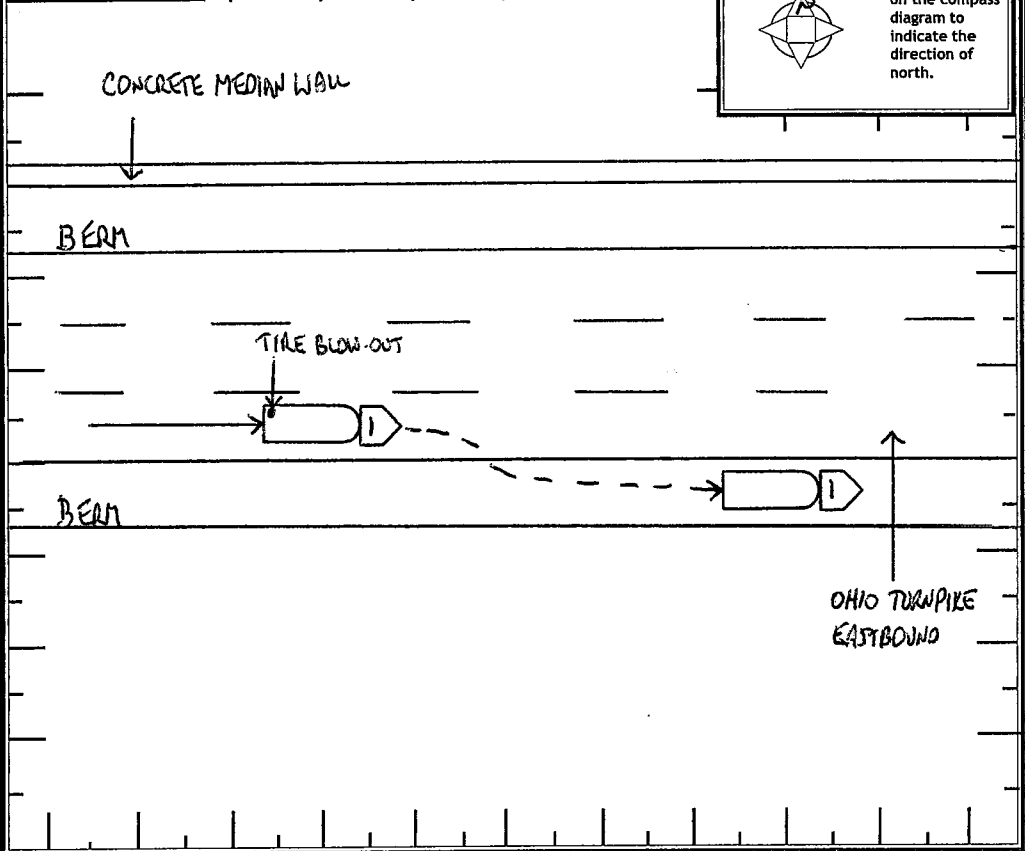
LOCATION OF CRASH IN WORK ZONE

- | |
|------------------------------|
| 1 LANE CLOSURE |
| 2 LANE SHIFT/CROSSOVER |
| 3 WORK ON SHOULDER OR MEDIAN |
| 4 INTERMITTENT/ MOVING WORK |
| 5 OTHER |

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 8 PERSONS, INCLUDING DRIVER.

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 INTERVENING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER.

COMPANY (FROM SHIPPING PAPERS)

HEXION SPECIALTY CHEMICALS INC

COMPANY PHONE

703-527-3887

ADDRESS (STREET, CITY, ST, ZIP CODE)

400 EAST COTTAGE PLACE, CARPENTERSVILLE, IL 60110

US DOT

115179

ICC MC

121496

PUCO

TRAILER LP ST.

1L

TRAILER LP YEAR

2006

TRAILER LP #

- | | | |
|-----------------|--------------------------------|---------------|
| CARGO BODY TYPE | 01 NOT APPLICABLE | 05 POLE |
| | 02 BUS (9-15 INCLUDING DRIVER) | 06 CARGO TANK |
| | 03 VAN/ENCLOSED BOX | 07 FLATBED |
| | 04 GRAIN/CHIPS/GRAVEL | 08 DUMP |

06

- | |
|---------------------|
| 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 |

3

CDL Class

- | |
|-----------|
| 1 CLASS A |
| 2 CLASS B |
| 3 CLASS C |
| 4 CLASS M |
| 5 CLASS D |

1

Hazardous Materials Placard

- | |
|-----------|
| 1 No |
| 2 YES |
| 3 UNKNOWN |

1

Hazardous Materials Released

- | |
|------------------|
| 1 No |
| 2 YES |
| 3 NOT APPLICABLE |
| 4 UNKNOWN |

1

Police Action

05252006 1556 1556 1556 1656 60

OFFICER'S NAME*

TPR. CP. BARNES

CHECKED BY

LT WCT BUTTS

DATE REPORT FILED *

05262006

REPORT TAKEN BY 1 POLICE AGENCY 2 MOTORIST

REPORT TAKEN AT 1

1 SCENE 2 STATION 3 OTHER

10-91-0285

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH - 2

LOCAL REPORT NUMBER 10.91-0285	REPORTING AGENCY OHIO STATE HIGHWAY PATROL	DATE OF ACCIDENT M 5 10 25 1990
IN COUNTY OF CUYAHOGA	ACCIDENT LOCATION OHIO TURNPIKE EB MP 162.7	

WEATHER CONDITIONS. PARTLY CLOUDY, APPROX 75°

ROAD CONDITIONS. DRY

UNIT #1

2006 INTL CONV TRACTOR
WHITE AND
BLUE IN COLOR

IL REGISTRATION P571740

NO CONTACT DAMAGE

UNIT #1'S - TRAILER

1999 POLR TANKER TRAILER

SILVER IN COLOR

IL REGISTRATION T221-820

CONTACT DAMAGE - LEFT REAR TIRE BLOW-OUT CAUSING THE MUD FLAP TO BE TORN OFF,
LEFT SIDE OF ICE BAR WAS BENT UPWARDS, LEFT SIDE TURN SIGNAL AND MOUNTING BRACKET
TORN APART, AND LEFT SIDE WHEEL WELL BENT.

TIRE DISTRIBUTORS INC, 16066 INDUSTRIAL AVE, CLEVELAND, OH. 44135, PHONE # 216-362-5544
CAME TO THE SCENE AND CHANGED THE TIRE.

BREAKDOWN SERVICES, PO BOX 137, NORTH OLMPSTEAD, OH. 44070, PHONE # 440-716-1467
CAME OUT TO THE SCENE AND REPAIRED THE ICE BAR, TAILLIGHT, AND WHEEL WELL.

OFFICER'S SIGNATURE

X TPR. CP. Banks

BADGE NUMBER

393

OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-3 REV 1/82

LOCAL REPORT NUMBER 10-91-0285	REPORTING AGENCY OHIO STATE HIGHWAY PATROL	DATE OF CRASH M 5 1025 14 06
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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. CP. BARNES (OFFICERS NAME) AT SCENE (LOCATION)

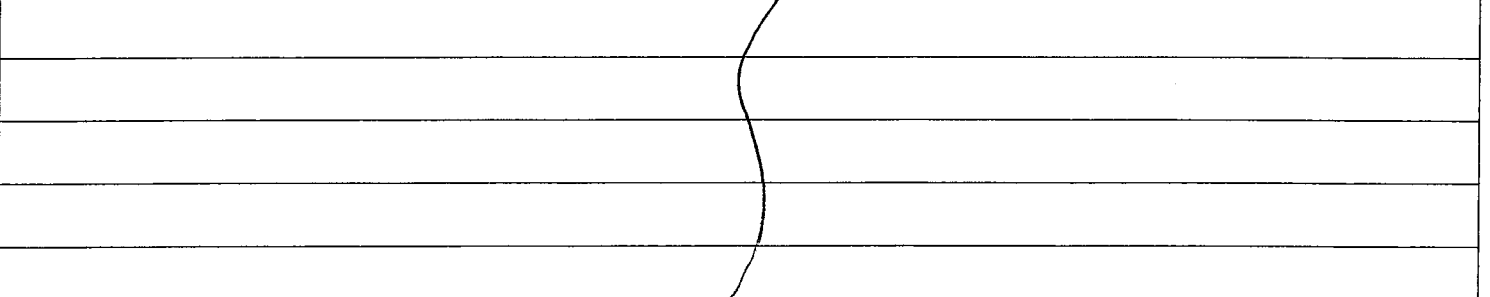
I, [REDACTED], WAS EASTBOUND ON THE OHIO TURNPIKE WAS DOING 60 MPH WHEN THE LEFT REAR POOL ON THE TRAILER BLOW OUT I PULLED OVER AT THE 161.7 MILE MARKER CHECKED THE TIRE SIZE WHEN I SAW THE BUMPER MUD FLAP FENDER & STOP TURN CLEAR LIGHT WERE ALL BENT OR MISSING CALLED MY TOWN THEY SAID TO CALL BAN D&G FOR THE TIRE TO BE FIX AND CALL FLEET MET AMERICA LLC TO FIX THE BUMPER MUD FLAP FENDER & STOP TURN CLEAR LIGHT BRACKET THE TIME THIS ALL WENT DOWN WAS AT 305 PM 5/25/06

Q. WERE YOU INJURED IN THE CRASH?
 A. NO

Q. WERE YOU WEARING YOUR SEAT BELT AT THE TIME OF THE CRASH?
 A. YES

Q. WHAT LANE WERE YOU IN AT THE TIME OF THE CRASH?
 A. THE RIGHT LANE

Q. WERE ANY OTHER VEHICLES INVOLVED IN THE CRASH?
 A. NO.



ADDRESS OF WITNESS [REDACTED]	PHONE [REDACTED]
SIGNATURE OF WITNESS [REDACTED]	OFFICERS SIGNATURE TPR. CP. Barns