

TRAFFIC CRASH REPORT

10163697

Five

OH-1 (Rev. 10/99)



10-91-0299 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 X X

REPORTING AGENCY *
0HP91 STATE HWY PATROL 01 01

98 = ANIMAL
99 = UNKNOWN
05262006

DAY OF WEEK
1020 FRI

NAME (OF CITY, VILLAGE OR TOWNSHIP) *
X SHALERSVILLE 67

LATITUDE
LONGITUDE

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

194.7WB

AT/REFERENCE
DIST REFERENCE DR PREFIX REFERENCE REF POINT
.3M W 195 MP 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

01 01 NAME [REDACTED]
ADDRESS (STREET, CITY, STATE, ZIP CODE)
[REDACTED] SOLON, OH [REDACTED]

HOME PHONE # WORK PHONE #
07151946 59 M 4403490329

DL STATE DL # LP STATE LP # INJURED TAKEN BY
OH [REDACTED] OH [REDACTED] 1
1 NONE 4 OTHER
2 EMS 5 UNKNOWN
3 POLICE

OWNER NAME (IF SAME, WRITE "SAME") ADDRESS (STREET, CITY, STATE, ZIP CODE)
[REDACTED] SOLON, OH [REDACTED]

YEAR MAKE MODEL COLOR INSURANCE COMPANY TOWING SERVICE OWNER PHONE #
2004 CHRYSLER CONCORDE GRAY SELF INSURED INTERSTATE [REDACTED]

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
[REDACTED] [REDACTED] [REDACTED] [REDACTED] 1
1 NONE 4 OTHER
2 EMS 5 UNKNOWN
3 POLICE

OWNER NAME (IF SAME, WRITE "SAME") ADDRESS (STREET, CITY, STATE, ZIP CODE)
[REDACTED] [REDACTED]

YEAR MAKE MODEL COLOR INSURANCE COMPANY TOWING SERVICE OWNER PHONE #
[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

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

Motorist/Non-Motorist

Occupant

- 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

03

0020

UNIT NUMBERS

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

04

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 (BOBTAIL)
- 13 TRACTOR/SEM-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/RIDER
- 36 ANIMAL W/BUGGY
- 37 BICYCLE
- 38 PEDESTRIAN
- 39 PEDALCYCLIST
- 40 SKATER
- 41 OTHER-NON MOTORIST
- 42 UNKNOWN

IN EMERGENCY RESPONSE

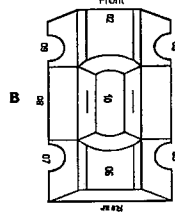
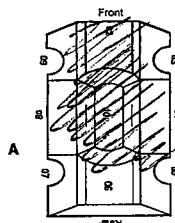
- 1 No
- 2 Yes
- 3 UNKNOWN

DAMAGE SCALE

5

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

DAMAGE AREA



MOST DAMAGED AREA

13

- 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

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

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
- 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

19

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 '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
- 14 COLLISION W/PERSON, VEHICLE, OR OBJECT NOT FIXED
- 15 PEDESTRIAN
- 16 PEDALCYCLE
- 17 RAILWAY VEHICLE
- 18 ANIMAL - FARM
- 19 ANIMAL - DEER
- 20 ANIMAL - OTHER
- 21 MOTOR VEHICLE IN TRANSPORT
- 22 PARKED MOTOR VEHICLE
- 23 WORK ZONE MAINTENANCE EQUIPMENT
- 24 OTHER MOVABLE OBJECT
- 25 UNKNOWN MOVABLE OBJECT

COLLISION WITH FIXED OBJECT

- 26 IMPACT ATTENUATOR/CRASH CUSHION
- 27 BRIDGE OVERHEAD STRUCTURE
- 28 BRIDGE PIER OR ABUTMENT
- 29 BRIDGE PARAPET
- 30 BRIDGE RAIL
- 31 GUARDRAIL FACE
- 32 GUARDRAIL END
- 33 MEDIAN BARRIER
- 34 HIGHWAY TRAFFIC SIGN POST
- 35 OVERHEAD SIGN POST
- 36 LIGHT/LUMINARIES SUPPORT
- 37 UTILITY POLE
- 38 OTHER POST, POLE OR SUPPORT
- 39 CULVERT
- 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

65

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

34

- 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

1

- 1 NONE
- 2 ESTIMATED SPEED
- 3 URINE
- 4 BREATH
- 5 OTHER

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

- 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/ROUNDBOUT
- 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

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 LEVEL
- 4 CURVE GRADE

ROAD CONDITIONS

02

- 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 CONDITIONS ONLY

10-91-0299

Narrative

Unit # 1 WAS TRAVELING WESTBOUND ON
 IR 80 (OHIO TURNPIKE) IN THE RIGHT DRIVING LANE
 WHEN THE ENGINE CAUGHT ON FIRE.

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 | WORK ZONE RELATED |
| 7 SIDESWIPE, SAME DIRECTION | 1 NO |
| 8 SIDESWIPE, OPPOSITE DIRECTION | 2 YES |
| 9 UNKNOWN | 3 UNKNOWN |

WEATHER

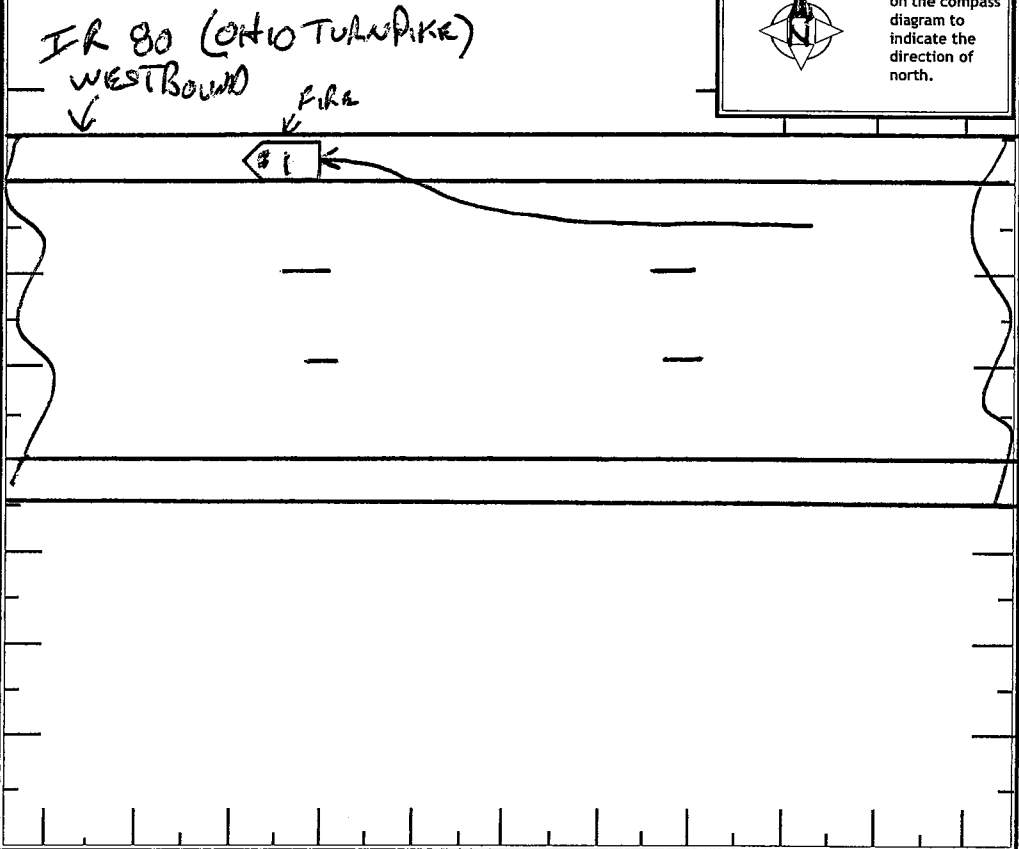
02

- | | |
|--|---------------------------------------|
| 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 | LOCATION OF CRASH IN WORK ZONE |
| 08 BLOWING SAND, SOIL, DIRT, SNOW | 1 BEFORE FIRST WORK ZONE WARNING SIGN |
| 09 OTHER | 2 ADVANCE WARNING AREA |
| 10 UNKNOWN | 3 TRANSITION AREA |

LIGHT CONDITIONS

- | | |
|---------------------------|------------------------|
| 1 DAYLIGHT | 1 NO |
| 2 DAWN | 2 YES |
| 3 DUSK | 3 UNKNOWN |
| 4 DARK - LIGHTED ROADWAY | |
| 5 DARK - NOT LIGHTED | WORKERS PRESENT |
| 6 DARK - UNKNOWN LIGHTING | 1 NO |
| 7 GLARE | 2 YES |
| 8 OTHER | 3 UNKNOWN |
| 9 UNKNOWN | |

Diagram



Write an "N" on the compass diagram to indicate the direction of north.

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.

**A
N
D**

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)

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 | 05 POLE |
| 02 BUS (9-15 INCLUDING DRIVER) | 06 CARGO TANK |
| 03 VAN/ENCLOSED BOX | 07 FLATBED |
| 04 GRAM/CHIPS/GRAVEL | 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

05262006 1031 1031 1042 1125 30 89

OFFICER'S NAME #

TPARB Hunt

CHECKED BY

LTWCT BUTTS

DATE REPORT FILED #

05262006

REPORT TAKEN BY

- | |
|-----------------|
| 1 POLICE AGENCY |
| 2 MOTORIST |

REPORT TAKEN AT

- | |
|-----------|
| 1 SCENE |
| 2 STATION |
| 3 OTHER |

10-91-0299

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

LOCAL REPORT NUMBER

10-91-0299

REPORTING AGENCY

STATE HWY PATROL

DATE OF ACCIDENT

M 5 10 26 1988

IN COUNTY OF

PORTAGE

ACCIDENT LOCATION

SR 80 (OHIO TURN PIKE) WESTBOUND 194.7 MI

X DAMAGE TO UNIT #1: FIRE DAMAGE TO ENTIRE VEHICLE (INSIDE & OUT).
 VIN# 2C3HD46R54H635838
 X UNKNOWN CAUSE OF FIRE - STARTED IN ENGINE COMPARTMENT.

OFFICER'S SIGNATURE

X [Signature]

BADGE NUMBER

20

LOCAL REPORT NUMBER 10-91-0299	REPORTING AGENCY STATE HWY PATROL	DATE OF CRASH M 5 / 26 / 06
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, [REDACTED] HEREBY MAKE THIS VOLUNTARY STATEMENT TO
 (PRINTED)
 TANN B HUNT AT SCRVA
 (OFFICERS NAME) (LOCATION)

X The smoke started coming out of
 Air ducts & car started losing power.
 I exited car & it started to smoke & burn
 I had seat belt on and I was not injured.

Q. How FAST were you TRAVELING?

A. 65 mph - CRUISE CONTROL

Q. were you TRAVELING ON FR 80 OHIO TURNPIKE WESTBOUND?

A. YES

Q. which LANE were you in when it STARTED smoking?

A. RIGHT

Q. were you INVOLVED in A crash EARLIER
 which MIGHT HAVE CAUSED DAMAGE TO THE
 ENGINE?

A. NO

Q. when WAS THE LAST TIME you HAD AN OIL
 CHANGE?

A. ONE week - PD, - CARLYLE MAY

Q. when WAS THE LAST TIME you LOOKED UNDER
 THE HOOD? No & DON'T -

Q. How MANY miles do you HAVE on it? A. 78,226

ADDRESS OF WITNESS X [REDACTED]	PHONE [REDACTED]
SIGNATURE OF WITNESS X [REDACTED]	OFFICERS SIGNATURE TANN B HUNT