

TRAFFIC CRASH REPORT

10201488

Five

OH-1 (Rev. 10/99)



CRASH SEVERITY: 1 FATAL, 2 INJURY, 3 UNKOWN (2 INJURY selected)
 PRIVATE PROPERTY:
 HIT/SKIP: 1 NOT HIT/SKIP, 2 SOLVED, 3 UNSOLVED (1 NOT HIT/SKIP selected)
 PHOTOS TAKEN:
 OH-2: OH-3: OH-IP: OTHER:
 REPORTING AGENCY: * OHP89 STATE HIGHWAY PATROL
 CRASH LOCATION: IR-80 (OHIO TURNPIKE) 3
 TYPE LOC: 3
 TYPE LOCATION POINT USED: 1 NAMED STREET, 2 NUMBERED STREET, 3 NUMBERED ROUTE (3 NUMBERED ROUTE selected)
 LOCAL INFORMATION: EXIT 71
 DAY OF WEEK: SUN
 NAME (OF CITY, VILLAGE OR TOWNSHIP): LAKE
 LATITUDE: 87
 LONGITUDE: 07012007

CRASH OCCURRED ON: IR-80 (OHIO TURNPIKE) 3
 TYPE LOC: 3
 TYPE LOCATION POINT USED: 3 NUMBERED ROUTE
 LOCAL INFORMATION: EXIT 71
 AT REFERENCE: .3m W
 DIST REFERENCE: 72
 REF POINT: 01 STATE LINE, 02 INTERSECTION 2 STREETS, 03 COUNTY LINE (01 STATE LINE selected)
 REFERENCE POINT USED: 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

DL STATE: PA
 DL #:
 LP STATE: PA
 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"): SAME
 ADDRESS (STREET, CITY, STATE, ZIP CODE): WASHINGTON, PA
 HOME PHONE #:
 WORK PHONE #:

YEAR: 1988 MAKE: CHEVROLET MODEL: CORVETTE COLOR: BLACK INSURANCE COMPANY: STATE FARM TOWING SERVICE: NONE OWNER PHONE #:
 OFFENSE CHARGED:
 OFFENSE DESCRIPTION:
 NAME (LAST, FIRST, MIDDLE):
 ADDRESS (STREET, CITY, STATE, ZIP CODE):
 HOME PHONE #:
 WORK PHONE #:

DL STATE: PA
 DL #:
 LP STATE: PA
 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"): SAME
 ADDRESS (STREET, CITY, STATE, ZIP CODE):
 HOME PHONE #:
 WORK PHONE #:

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):
 HOME PHONE #:

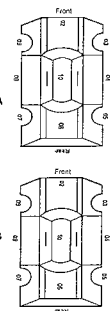
INJURED TAKEN BY: 1 NONE, 4 OTHER, 2 EMS, 5 UNKNOWN, 3 POLICE
 TRANSPORTED BY:
 INJURED TAKEN TO:
 NAME (LAST, FIRST, MIDDLE):
 HOME PHONE #:
 ADDRESS (STREET, CITY, STATE, ZIP CODE):
 HOME PHONE #:

01 FRONT - LEFT (MC DRIVER)	04	SAFETY EQUIPMENT	5	AIR BAG	1	AIR BAG SWITCH	1	EJECTION	1	TRAPPED	1	INJURIES	1
02 FRONT - MIDDLE		01 NONE USED		1 NOT-DEPLOYED		1 NOT PRESENT		1 NOT EJECTED		1 NOT TRAPPED		1 NO INJURY	
03 FRONT - RIGHT		02 SHOULDERS BELT ONLY		2 DEPLOYED-FRONT		2 IN ON POSITION		2 TOTALLY EJECTED		2 EXTRICATED BY MECHANICAL		2 POSSIBLE	
04 SECOND - LEFT (MC PASS)		03 LAP BELT ONLY		3 DEPLOYED-SIDE		3 IN OFF POSITION		3 PARTIALLY EJECTED		3 NON-MECHANICAL		3 NON-	
05 SECOND - MIDDLE		04 SHOULDERLAP SEAT		4 DEPLOYED BOTH		4 UNKNOWN		4 NOT APPLICABLE		3 FREED BY MEANS		4 INCAPACITATING	
06 SECOND - RIGHT		05 CHILD SAFETY SEAT		5 NOT APPLICABLE				5 UNKNOWN		4 NON-MECHANICAL		5 FATAL INJURY	
07 THIRD - LEFT (MC PASSENGER/SIDE CAR)		06 MC HELMET USED		6 UNKNOWN						4 UNKNOWN		6 UNKNOWN	
08 THIRD - MIDDLE		07 USE UNKNOWN											
09 THIRD - RIGHT		08 NONE USED											
10 SLEEPER SECTION OF CAB		09 HELMET USED											
11 ENCLOSED CARGO AREA		10 PROTECTIVE PADS											
12 UNENCLOSED CARGO AREA		11 REFLECTIVE CLOTHING											
13 TRAILING UNIT		12 LIGHTING											
14 EXTERIOR		13 OTHER											
15 NON-MOTORIST		14 UNKNOWN											
16 UNKNOWN													
17 UNKNOWN													

BLANK FOR WITNESS: 07

Motorist/Non-Motorist

Occupant

<p>UNIT NUMBERS 01</p> <p>Non-Motorist Location</p> <p>01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NOT 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</p> <p>TYPE OF UNIT 03</p> <p>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/SEMI-TRAILER 14 TRACTOR/DOUBLE SHEET 15 TRACTOR/DOUBLE LONG 16 FIFTH WHEEL OR CONVERTER DOLLY 17 TRACTOR/THIRPLES 18 MOTORCYCLE 19 MOTORBIKE/BICYCLE 20 SCHOOL BUS 21 CHURN/BUS 22 PUBLIC BUS 23 OTHER BUS 24 POLICE VEHICLE 25 FIRE TRUCK 26 AMBULANCE/RESCUE 27 TAXI 28 MOTOR HOME 29 TRAM 30 FARM VEHICLE 31 FARM EQUIPMENT 32 SNOWMOBILE 33 CONSTRUCTION EQUIPMENT 34 ALL OTHERS NON-MOTORIST 35 ANIMAL W/DRIVER 36 ANIMAL W/DRUGGY 37 BICYCLE 38 PEDESTRIAN 39 PEDALCYCLIST 40 SKATER 41 OTHER NON-MOTORIST 42 UNKNOWN</p> <p>IN EMERGENCY RESPONSE</p> <p>1 NO 2 YES 3 UNKNOWN</p> <p>DAMAGE SCALE 2</p> <p>1 NONE 2 NON-FUNCTIONAL DAMAGE 3 FUNCTIONAL DAMAGE 4 DESTRUCTIVE DAMAGE 5 SEVERE 6 UNKNOWN</p>	<p>DAMAGE AREA</p>  <p>MOST DAMAGED AREA 14</p> <p>POINT OF IMPACT 01</p> <p>ACTION 2</p> <p>STRIKING VEHICLE: OVERSIDE / UNDERSIDE 1</p>	<p>PRE-CRASH ACTIONS 13</p> <p>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 UNUSUAL 15 UNKNOWN NON-MOTORIST 16 ENTERING/CROSSING IN SPECIFIED LOCATION 17 WALKING, RUNNING, JOGGING, PLAYING, CYCLING 18 WORKING 19 PUSHING VEHICLE 20 APPROACHING/LEAVING VEHICLE 21 PLAYING/TORQUING ON VEHICLE 21 STANDING 22 OTHER 23 UNKNOWN</p> <p>CONTRIBUTING CIRCUMSTANCES 19</p> <p>MOTORIST 01 NONE 02 FAILURE TO YIELD 03 RAN RED LIGHT, OR STOP SIGN 04 EXCEEDED SPEED LIMIT 05 UNLAWY SPEED 06 IMPROPER TURN 07 LEFT OF CENTER 08 FOLLOWS TOO CLOSELY/VICCA 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, NEGLECTFUL OR AGGRESSIVE MANNER 14 SWERVING TO AVOID (DUE TO WIND, SUPPLEY, 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 LOOSY SHIRTING/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 OTHER DEVICES 31 WRONG SIDE OF THE ROAD 32 OTHER 33 UNKNOWN</p> <p>VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE</p> <p>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</p>	<p>SEQUENCE OF EVENTS 02</p> <p>NON-COLLISION 01 OVERTAKING/TOLLOVER 02 FIRE/EXPLOSION 03 IMMERSION 04 JACKKNIFE 05 CARGO/LOADMENT 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 FALLWAY 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</p> <p>FIRST HARMFUL EVENT 1</p> <p>MOST HARMFUL EVENT 1</p> <p>OF THE SEQUENCE OF EVENTS - WHICH ONE IS THE FIRST HARMFUL EVENT (1-4)</p> <p>OF THE SEQUENCE OF EVENTS - WHICH ONE IS THE MOST HARMFUL EVENT (1-4)</p> <p>SPEED DETECTED 0</p> <p>SPEED 0</p>	<p>POSTED SPEED 65</p> <p>TRAFFIC CONTROL 16</p> <p>01 NO CONTROLS 02 STOP SIGN 03 YIELD SIGN 04 TRAFFIC SIGNAL 05 TRAFFIC FLASHERS 06 SCHOOL ZONE 07 RAILROAD CROSSINGS 08 RAILROAD FLASHERS 09 RAILROAD GATES 10 CONSTRUCTION BARRICADE 11 POLICE OFFICER 12 PAVEMENT MARKINGS 13 CROSSWALK SIGN 14 WALK/DON'T WALK SIGN 15 TRAFFIC CONTROL DEVICE OPERATIVE, MISSING, OBSOLETE 16 OTHER</p> <p>DIRECTION 3 4</p> <p>1 NORTH 2 SOUTH 3 EAST 4 WEST 5 NORTHEAST 6 NORTHWEST 7 SOUTHWEST 8 SOUTHWEST 9 UNKNOWN</p> <p>CONDITION 1</p> <p>1 APPEARANTLY NORMAL 2 PHYSICAL IMPAIRMENT 3 EMOTIONAL 4 ILLNESS 5 FELL, SLEPT, FAINTED, FATIGUED, ETC 6 UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ALCOHOL 7 OTHER 8 UNKNOWN</p> <p>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</p> <p>ALCOHOL TEST STATUS 1</p> <p>1 NONE 2 TEST REFUSED 3 TEST GIVEN, CONTAMINATED 4 TEST GIVEN, RESULTS UNKNOWN 5 TEST GIVEN, RESULTS KNOWN 6 UNKNOWN</p> <p>ALCOHOL TEST TYPE 1</p> <p>1 NONE 4 BREATH 2 BLOOD 3 URINE</p> <p>ALCOHOL TEST RESULT 1</p> <p>1 NONE 4 BREATH 2 BLOOD 3 URINE</p>	<p>DRUG TEST STATUS 1</p> <p>1 NONE 2 TEST REFUSED 3 TEST GIVEN, CONTAMINATED 4 TEST GIVEN, RESULTS KNOWN 5 TEST GIVEN, RESULTS UNKNOWN 6 UNKNOWN</p> <p>DRUG TEST TYPE</p> <p>DRUG TEST 1&2 RESULT</p> <p>1 NONE 2 MARIJUANA 3 COCAINE 4 OPiates 5 AMPHETAMINES 6 PCP 7 OTHER 8 UNKNOWN AT TIME OF REPORTING</p> <p>TYPE OF INTERSECTION 01</p> <p>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/ACCESS 11 RAILWAY GRADE CROSSING 12 SHARED-USE PATHS OR TRAILS 13 UNKNOWN</p> <p>OCCURRENCE 4</p> <p>1 ON ROADWAY 2 ON SHOULDER 3 IN MEDIAN 4 ON ROADSIDE 5 ON GORE 6 OUTSIDE TRAFFICWAY 7 UNKNOWN</p> <p>ROAD CONTOUR 1</p> <p>1 STRAIGHT LEVEL 2 STRAIGHT GRADE 3 CURVE LEVEL 4 CURVE GRADE</p> <p>ROAD CONDITIONS 01</p> <p>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</p>
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10-89-0303

Narrative

UNIT #1 WAS EXITING THE CHIC TURNPIKE WESTBOUND AT GATE 71 WHEN AN ELECTRICAL FIRE WAS DISCOVERED IN THE INTERIOR OF THE VEHICLE.

MANNER OF COLLISION OR IMPACT

- 1 NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT
 2 REAR-END
 3 HEAD-ON
 4 REAR-TO-REAR
 5 BACKING
 6 ANGLE
 7 SIDESWIFE, SAME DIRECTION
 8 SIDESWIFE, OPPOSITE DIRECTION
 9 UNKNOWN

WEATHER

- 01 CLEAR
 02 CLOUDY
 03 FOG, SHOG, SMOKE
 04 RAIN
 05 SLEET, HAIL (FREEZING RAIN DRIZZLE)
 06 SNOW
 07 SEVERE CROSSWINDS
 08 BLOWING SAND, SOUL, DIRT, SNOW
 09 OTHER
 10 UNKNOWN

LIGHT CONDITIONS

- PRIMARY** **SECONDARY**
 1 DAYLIGHT
 2 DAWN
 3 DUSK
 4 DARK - LIGHTED ROADWAY
 5 DARK - NOT LIGHTED
 6 DARK - UNKNOWN LIGHTING
 7 GLARE
 8 OTHER
 9 UNKNOWN

SCHOOL BUS RELATED

- 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 SHOULDER/CROSSOVER
 3 WORK ON SHOULDER OR MEDIAN
 4 INTERMITTENT/ MOVING WORK
 5 OTHER

LOCATION OF CRASH IN WORK ZONE

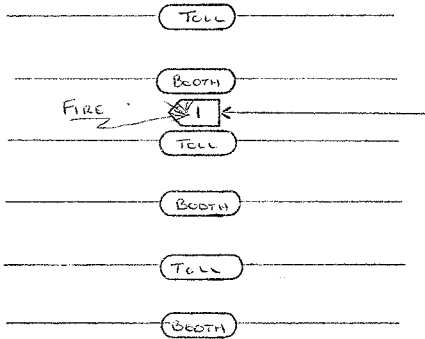
- 1 BEFORE FIRST WORK ZONE WARNING SIGN
 2 ADVANCE WARNING AREA
 3 TRANSITION AREA
 4 ACTIVITY AREA
 5 WORKERS PRESENT

- 1 NO
 2 YES
 3 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.

Unit #

COMPANY (FROM SHIPPING PAPERS)

COMPANY PHONE

ADDRESS (STREET, CITY, ST, ZIP CODE)

US DOT ICC MC PUCC TRAILER LP ST. TRAILER LP YEAR TRAILER LP # PLACARD # E-Reg

CARGO BODY TYPE
 01 NOT APPLICABLE
 02 BUS (IF 15 INCLUDING DRIVER)
 03 VAN/ENCLOSED BOX
 04 GRN/CHPS/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 - 25,000
 3 MORE THAN 25,000

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

DATE CRASH REPORTED 07012007 **REPORT ID** 0743 **DISPATCH** 0743 **ARRIVED** 0751 **CLEARED** 0833 **OTHER** **TOTAL MINUTES** 50

OFFICER'S NAME R. ASHENFELTER **REPORT #** 0529 **CHECKED BY** SGT. LAMBERTS **DATE REPORT FILE #** 07012007

REPORT TAKEN BY 1 POLICE AGENCY 2 MOTORIST **REPORT TAKEN AT** 1 SCENE 2 STATION 3 OTHER **SUPPLEMENT #** * YES NO **LOG #** 16-89-0303

LOCAL REPORT NUMBER 10-89-0303	REPORTING AGENCY State Highway Patrol	DATE OF CRASH M 07 10 01 1407
IN COUNTY OF WOOD	CRASH LOCATION IR-80 (OHIO TURNPIKE) MP 71.7 (GATE 71)	

UNIT #1

1988 CHEVROLET CORVETTE CONVERTIBLE
VIN: 1G1YY3187JS [REDACTED]

* ELECTRICAL FIRE - DRIVERS SEAT MOTOR
EXTINGUISHED WITH ASSISTANCE OF
TOLL COLLECTOR AND A FIRE EXTINGUISHER

LARE TOWNSHIP FIRE DEPARTMENT RESPONDED
TO THE SCENE ENGINE # 841

VEHICLE WAS CHOSEN TO BE DRIVEN AWAY
BY THE OWNER.

INSURANCE INFORMATION:

STATE FARM MUTUAL AUTOMOBILE
POLICY # [REDACTED]

AGENT PAUL BRADDOCK (724) 627-3777

EFFECTIVE DATES: APR 24, 2007 THROUGH OCT 24, 2008

OFFICER'S SIGNATURE

X

BADGE NUMBER

529

OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-3 REV 1/82

LOCAL REPORT NUMBER 10-89-0303	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH M 7 10 1987
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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
R. Ashenfelter (OFFICERS NAME) AT SCENE (Gate 71) (LOCATION)

I was driving west on Ohio Turnpike and exited at Exit 71 Route 280 to Detroit. Pulled into toll booth at approximately 7:45 AM. While paying toll noticed smoke inside of car. Smoke was increasing and I took the car thru the toll booth and off to the right to see what was causing the smoke. A worker from the toll booth brought a fire extinguisher and sprayed around the drivers seat and the smoke stopped. After lifting the seat bottom it appeared to be caused by a shorted wire beneath seat. I pulled all the wires from the plugs. I was not injured and the car didn't suffer major damage.

ADDRESS OF WITNESS SIGNATURE OF WITNESS [REDACTED]	Washington Pa [REDACTED] OFFICERS SIGNATURE <u>[Signature]</u>	PHONE [REDACTED] 529-89-10
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