

10-10415951-1033 JUL 2 2011

INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) OH-1 (Rev. 10/99)

TRAFFIC CRASH REPORT



LOCAL REPORT #* **10-0450-90** CRASH SEVERITY **3** PRIVATE PROPERTY HIT/SKIP **1** PHOTOS TAKEN OH-2 OH-3 OH-1P OTHER

N.C.I.C.#* **0HP90** REPORTING AGENCY* **Ohio State Highway Patrol** # UNITS **01** UNIT ERROR **01** DATE OF CRASH* **06242011**

TIME OF CRASH **0114** DAY OF WEEK **FRI** CITY* VILLAGE* TWP* NAME (OF CITY, VILLAGE OR TOWNSHIP)* **Townsend** COUNTY #* **72** LATITUDE **41:21:11.73** LONGITUDE **82:52:19.66**

CRASH OCCURRED ON PREFIX **IR0080** TYPE LOC **3** TYPE LOCATION POINT USED **1** LOCAL INFORMATION **EB**

AT / REFERENCE DIST REFERENCE **.3M** DR **W** PREFIX REFERENCE **105** REF POINT **06** REFERENCE POINT USED **01** HOUSE NUMBER **08** PLACE NAME W/O REFERENCE **02** STATE LINE **09** DRIVEWAY **03** COUNTY LINE **10** STREET OR ROUTE W/O REFERENCE

A UNIT # **0106** # OF OCC. **6** NAME (LAST, FIRST, MIDDLE) **[REDACTED]**

ADDRESS (STREET, CITY, STATE, ZIP CODE) **[REDACTED] Chicago, Illinois [REDACTED]**

SOCIAL SECURITY NUMBER **[REDACTED]** DATE OF BIRTH **[REDACTED]** AGE **22** SEX **M** HOME PHONE # **[REDACTED]** WORK PHONE # **[REDACTED]**

DL STATE **IL** DL # **[REDACTED]** LP STATE **IL** LP # **[REDACTED]** INJURED TAKEN BY **3** TRANSPORTED BY **[REDACTED]** INJURED TAKEN TO **[REDACTED]**

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

YEAR **1998** MAKE **CHEV** MODEL **Blazer** COLOR **WHI** INSURANCE COMPANY **Magnum** TOWING SERVICE **Madison Motors** OWNER PHONE # **[REDACTED]**

OFFENSE CHARGED **[REDACTED]** OFFENSE DESCRIPTION **[REDACTED]** CITATION # **[REDACTED]** LOCAL CODE# **[REDACTED]**

B UNIT # **[REDACTED]** # OF OCC. **[REDACTED]** NAME (LAST, FIRST, MIDDLE) **[REDACTED]**

ADDRESS (STREET, CITY, STATE, ZIP CODE) **[REDACTED]**

SOCIAL SECURITY NUMBER **[REDACTED]** DATE OF BIRTH **[REDACTED]** AGE **[REDACTED]** SEX **[REDACTED]** HOME PHONE # **[REDACTED]** WORK PHONE # **[REDACTED]**

DL STATE **[REDACTED]** DL # **[REDACTED]** LP STATE **[REDACTED]** LP # **[REDACTED]** INJURED TAKEN BY **[REDACTED]** TRANSPORTED BY **[REDACTED]** INJURED TAKEN TO **[REDACTED]**

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

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

OFFENSE CHARGED **[REDACTED]** OFFENSE DESCRIPTION **[REDACTED]** CITATION # **[REDACTED]** LOCAL CODE# **[REDACTED]**

C UNIT # **01** NAME (LAST, FIRST, MIDDLE) **[REDACTED]** HOME PHONE # **[REDACTED]** DATE OF BIRTH **[REDACTED]** AGE **33** SEX **M**

ADDRESS (STREET, CITY, STATE, ZIP CODE) **[REDACTED] Chicago, Illinois [REDACTED]**

INJURED TAKEN BY **[REDACTED]** TRANSPORTED BY **[REDACTED]** INJURED TAKEN TO **[REDACTED]**

D UNIT # **01** NAME (LAST, FIRST, MIDDLE) **[REDACTED]** HOME PHONE # **[REDACTED]** DATE OF BIRTH **[REDACTED]** AGE **14** SEX **F**

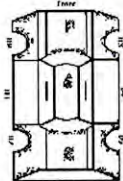
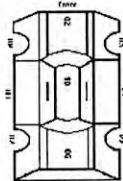
ADDRESS (STREET, CITY, STATE, ZIP CODE) **[REDACTED] Chicago, Illinois [REDACTED]**

INJURED TAKEN BY **[REDACTED]** TRANSPORTED BY **[REDACTED]** INJURED TAKEN TO **[REDACTED]**

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/SEDCAR) 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 04 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 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 EXTRACTED 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
---	--	---	---	--	---	--

BLANK FOR WITNESS **19**

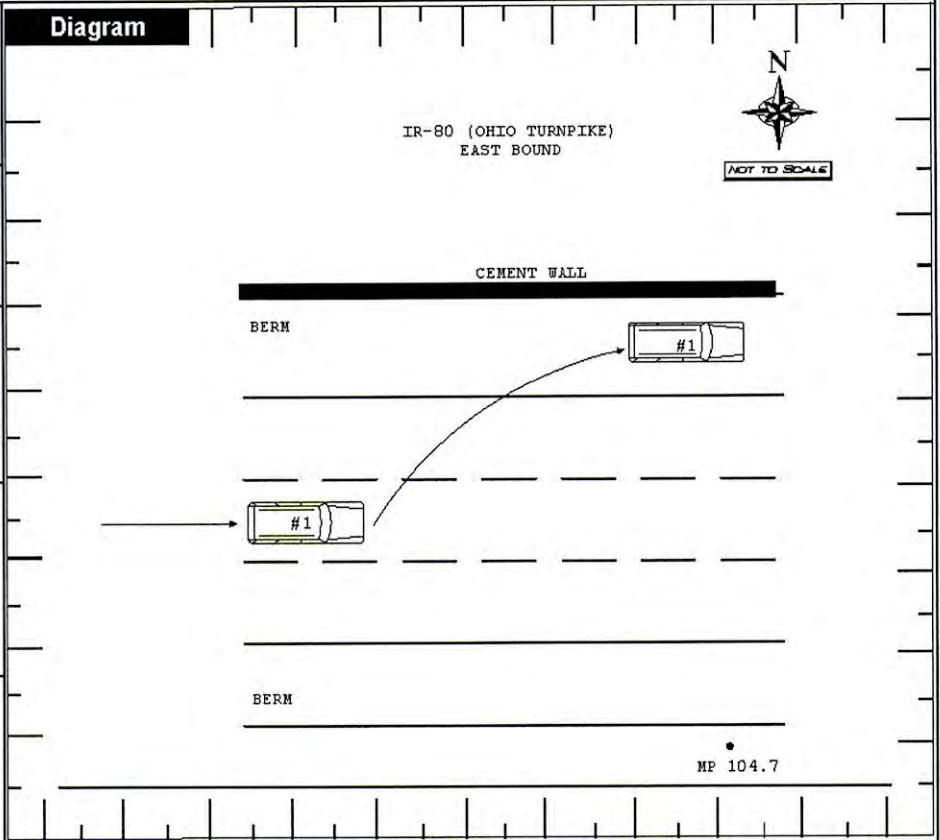
SUPPLEMENT * IF YES

UNIT NUMBERS <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 01 </div>	DAMAGE AREA  	PRE-CRASH ACTIONS <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 01 </div>	SEQUENCE OF EVENTS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">A</td> <td style="width:50%; text-align: center;">B</td> </tr> <tr> <td style="text-align: center;">0 2 1</td> <td style="text-align: center;">1</td> </tr> <tr> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> </tr> <tr> <td style="text-align: center;">3</td> <td style="text-align: center;">3</td> </tr> <tr> <td style="text-align: center;">4</td> <td style="text-align: center;">4</td> </tr> </table>	A	B	0 2 1	1	2	2	3	3	4	4	POSTED SPEED <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 70 </div>	DRUG TEST STATUS <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>
A	B														
0 2 1	1														
2	2														
3	3														
4	4														
NON-MOTORIST LOCATION <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>	MOST DAMAGED AREA <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 13 </div>	CONTRIBUTING CIRCUMSTANCES <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 19 </div>	NON-COLLISION <ol style="list-style-type: none"> 01 OVERTURN/ROLLOVER 02 FIRE/EXPLOSION 03 IMMERSION 04 JACKKNIFE 05 CAR/REQ EQUIPMENT LOSS/SHIFT 06 EQUIPMENT FAILURE 07 SEPARATION OF UNITS 08 RAN OFF ROAD RIGHT 09 RAN OFF ROAD LEFT 10 CROSS-MEDIA CENTERLINE 11 DOWNHILL RUNAWAY 12 OTHER NON-COLLISION 13 UNKNOWN NON-COLLISION 14 COLLISION W/PERSON, VEHICLE, OR OBJECT NOT FIXED 15 PEDESTRIAN 16 PEDAL CYCLE 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 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 GROUND RAIL FACE 32 GROUND RAIL 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 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 	TRAFFIC CONTROL <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 12 </div>	DRUG TEST TYPE <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>										
TYPE OF UNIT <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 06 </div>	POINT OF IMPACT <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 01 </div>	MOTORIST <ol style="list-style-type: none"> 01 SUB-COMPACT 02 COMPACT 03 MID SIZE 04 FULL SIZE 05 MINIVAN 06 SPORT UTILITY VEHICLE 07 PICKUP 08 PANELVAN 09 SINGLE UNIT TRUCK, 2 AXLES, 0 TIRES 10 SINGLE UNIT TRUCK, 3+ AXLES 11 TRUCK/TRAILER 12 TRUCK TRACTOR (BOBTAIL) 13 TRACTOR SEMI-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 	DIRECTION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">FROM</td> <td style="width:50%;">TO</td> </tr> <tr> <td style="text-align: center;">4</td> <td style="text-align: center;">3</td> </tr> </table>	FROM	TO	4	3	DRUG TEST 1&2 RESULT <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">A</td> <td style="width:50%; text-align: center;">B</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </table>	A	B	1	2	1	2	
FROM	TO														
4	3														
A	B														
1	2														
1	2														
MOTORIST <ol style="list-style-type: none"> 01 CENTER FRONT 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 <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 2 </div>	MOTORIST <ol style="list-style-type: none"> 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/CARDA 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, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTION 18 FATIGUE/SLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN 	CONDITION <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>	ALCOHOL/DRUG SUSPECTED <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>	ALCOHOL/DRUG SUSPECTED <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>										
NON-MOTORIST <ol style="list-style-type: none"> 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 	STRIKING VEHICLE: OVERRIDE/UNDERERRIDE <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>	NON-MOTORIST <ol style="list-style-type: none"> 01 NONE 02 LYING AND/OR ILLEGALLY IN ROADWAY 03 FAILURE TO YIELD RIGHT OF WAY 04 NOT VISIBLE (DARK CLOTHING) 05 INATTENTIVE 06 FAILURE TO OBEY TRAFFIC SIGN, SIGNALS, OR OFFICER 07 WRONG SIDE OF ROAD 08 OTHER 09 UNKNOWN 	ALCOHOL TEST STATUS <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>	ALCOHOL TEST STATUS <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>	ALCOHOL TEST STATUS <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>										
IN EMERGENCY RESPONSE <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>	DAMAGE SCALE <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 5 </div>	VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 11 </div>	MOST HARMFUL EVENT <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>	MOST HARMFUL EVENT <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>	SPEED DETECTED <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1 </div>	SPEED <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 70 </div>									
<ol style="list-style-type: none"> 01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NO CROSSWALK 03 NO INTERSECTION CROSSWALK 04 DRIVWAY 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 PATHS OR TRAILS 15 UNKNOWN 	<ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 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/CARDA 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, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTION 18 FATIGUE/SLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 TEST REFUSED 03 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 04 TEST GIVEN, RESULTS KNOWN 05 TEST GIVEN, RESULTS UNKNOWN 06 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 TEST REFUSED 03 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 04 TEST GIVEN, RESULTS KNOWN 05 TEST GIVEN, RESULTS UNKNOWN 06 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 BLOOD 03 URINE 04 OTHER 										
<ol style="list-style-type: none"> 01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NO CROSSWALK 03 NO INTERSECTION CROSSWALK 04 DRIVWAY 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 PATHS OR TRAILS 15 UNKNOWN 	<ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 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/CARDA 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, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTION 18 FATIGUE/SLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 TEST REFUSED 03 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 04 TEST GIVEN, RESULTS KNOWN 05 TEST GIVEN, RESULTS UNKNOWN 06 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 BLOOD 03 URINE 04 OTHER 	<ol style="list-style-type: none"> 01 NONE 02 MARIJUANA 03 COCAINE 04 OPiates 05 AMPHETAMINES 06 PCP 07 OTHER 08 UNKNOWN AT TIME OF REPORTING 										
<ol style="list-style-type: none"> 01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NO CROSSWALK 03 NO INTERSECTION CROSSWALK 04 DRIVWAY 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 PATHS OR TRAILS 15 UNKNOWN 	<ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 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/CARDA 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, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTION 18 FATIGUE/SLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 TEST REFUSED 03 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 04 TEST GIVEN, RESULTS KNOWN 05 TEST GIVEN, RESULTS UNKNOWN 06 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 BLOOD 03 URINE 04 OTHER 	<ol style="list-style-type: none"> 01 NONE 02 MARIJUANA 03 COCAINE 04 OPiates 05 AMPHETAMINES 06 PCP 07 OTHER 08 UNKNOWN AT TIME OF REPORTING 										
<ol style="list-style-type: none"> 01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NO CROSSWALK 03 NO INTERSECTION CROSSWALK 04 DRIVWAY 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 PATHS OR TRAILS 15 UNKNOWN 	<ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 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/CARDA 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, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTION 18 FATIGUE/SLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 TEST REFUSED 03 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 04 TEST GIVEN, RESULTS KNOWN 05 TEST GIVEN, RESULTS UNKNOWN 06 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 BLOOD 03 URINE 04 OTHER 	<ol style="list-style-type: none"> 01 NONE 02 MARIJUANA 03 COCAINE 04 OPiates 05 AMPHETAMINES 06 PCP 07 OTHER 08 UNKNOWN AT TIME OF REPORTING 										
<ol style="list-style-type: none"> 01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NO CROSSWALK 03 NO INTERSECTION CROSSWALK 04 DRIVWAY 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 PATHS OR TRAILS 15 UNKNOWN 	<ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 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/CARDA 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, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTION 18 FATIGUE/SLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 TEST REFUSED 03 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 04 TEST GIVEN, RESULTS KNOWN 05 TEST GIVEN, RESULTS UNKNOWN 06 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 BLOOD 03 URINE 04 OTHER 	<ol style="list-style-type: none"> 01 NONE 02 MARIJUANA 03 COCAINE 04 OPiates 05 AMPHETAMINES 06 PCP 07 OTHER 08 UNKNOWN AT TIME OF REPORTING 										
<ol style="list-style-type: none"> 01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NO CROSSWALK 03 NO INTERSECTION CROSSWALK 04 DRIVWAY 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 PATHS OR TRAILS 15 UNKNOWN 	<ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 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/CARDA 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, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER INATTENTION 18 FATIGUE/SLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 TEST REFUSED 03 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 04 TEST GIVEN, RESULTS KNOWN 05 TEST GIVEN, RESULTS UNKNOWN 06 UNKNOWN 	<ol style="list-style-type: none"> 01 NONE 02 BLOOD 03 URINE 04 OTHER 	<ol style="list-style-type: none"> 01 NONE 02 MARIJUANA 03 COCAINE 04 OPiates 05 AMPHETAMINES 06 PCP 07 OTHER 08 UNKNOWN AT TIME OF REPORTING 										
<ol style="list-style-type: none"> 01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NO CROSSWALK 03 NO INTERSECTION CROSSWALK 04 DRIVWAY 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 PATHS OR TRAILS 15 UNKNOWN 	<ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 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/CARDA 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, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION</													

Narrative

Unit #1 was traveling east on the Ohio Turnpike in the center lane. Driver of Unit #1 stated he heard a loud explosion come from the front of the vehicle. Unit #1 pulled over to the left berm where it caught on fire.

MANNER OF COLLISION OR IMPACT <input type="checkbox"/> 1 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	SCHOOL BUS RELATED <input type="checkbox"/> 1 1 NO 2 YES, DIRECTLY INVOLVED 3 YES, INDIRECTLY INVOLVED 4 UNKNOWN
WEATHER <input type="checkbox"/> 0 <input type="checkbox"/> 2 01 CLEAR 02 CLOUDY 03 FOG, SMOG, SMOKE 04 RAIN 05 SLEET, HAIL (FREEZING RAIN DRIZZLE) 06 SNOW 07 SEVERE CROSSWINDS 08 BLOWING SAND, SOIL, DIRT, SNOW 09 OTHER 10 UNKNOWN	WORK ZONE RELATED <input type="checkbox"/> 1 1 NO 2 YES 3 UNKNOWN
LIGHT CONDITIONS PRIMARY <input type="checkbox"/> 5 <input type="checkbox"/> SECONDARY 1 DAYLIGHT 2 DAWN 3 DUSK 4 DARK - LIGHTED ROADWAY 5 DARK - NOT LIGHTED 6 DARK - UNKNOWN LIGHTING 7 CLARE 8 OTHER 9 UNKNOWN	TYPE OF WORK ZONE <input type="checkbox"/> 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 <input type="checkbox"/> 1 BEFORE FIRST WORK ZONE WARNING SIGN 2 ADVANCE WARNING AREA 3 TRANSITION AREA 4 ACTIVITY AREA
	WORKERS PRESENT <input type="checkbox"/> 1 NO 2 YES 3 UNKNOWN



Truck/Bus UNIT # <input type="text"/> <input type="text"/>	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.	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 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 #	PLACARD #	# DIA
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 THAN 10,000 2 10,001 - 20,000 3 MORE THAN 20,000	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 0 6 2 4 2 0 1 1	TIME REC CALL 0 1 1 4	DISPATCH 0 1 1 4	ARRIVED 0 1 2 8	CLEARED 0 3 1 6	OTHER 4 5	TOTAL MINUTES 0 1 6 7	
OFFICER'S NAME * Anderson, Richard	BADGE # * 1 5 9 6	CHECKED BY BJGOCKSTETTER	DATE REPORT FILED * 0 6 2 5 2 0 1 1	REPORT TAKEN BY 1 1 POLICE AG ENCY 2 MOTORIST	REPORT TAKEN AT 1 1 SCENE 2 STATION 3 OTHER	SUPPLEMENT * "X" IF YES	LOCAL REPORT # * 1 0 - 0 4 5 0 - 9 0

TOP COPY - OOPS BOTTOM COPY - AG ENCY

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (REV. 1/82)

LOCAL REPORT NUMBER 10-0450-90	REPORTING AGENCY Ohio State Highway Patrol	DATE OF ACCIDENT 06/24/2011
IN COUNTY OF Sandusky	ACCIDENT LOCATION IR0080	

UNIT #1:

-1998 CHEVROLET BLAZER (WHITE)
-REG: [REDACTED]
-VIN: 1GNDT13W7W2 [REDACTED]

INSURANCE:

-DRIVER DID NOT HAVE INSURANCE CARD ON PERSON BUT STATED HE HAD:
-MAGNUM INSURANCE
-(773) 650-7740

DAMAGE:

-TOTALLED, BURNED COMPLETELY DOWN TO METAL

RESPONDING AGENCIES:

-TOWNSEND TOWNSHIP FIRE DEPARTMENT
-OHIO TURNPIKE MAINTENANCE

NOTES:

-UNABLE TO TELL WHAT CAUSED THE FIRE
-WHEN I ARRIVED ON SCENE, UNIT #1 WAS COMPLETELY ENGULFED IN FLAMES
-DRIVER OF UNIT #1 DOES NOT HAVE A LICENSE AND IS AN ILLEGAL IMMIGRANT, CONTACTED U.S. BORDER PATROL, THEY WERE UNABLE TO COME TO THE SCENE TO ASSIST
-ALL OCCUPANTS WERE LATER TRANSPORTED TO ERIE ISLANDS SERVICE PLAZA ON THE OHIO TURNPIKE TO WAIT FOR FAMILY.

-----FIELD SKETCH MEASUREMENTS-----

REFERENCE POINT (RP)= MP 104.7 EB
POINT ZERO ("0")= 50'10" NORTH OF RP
REFERENCE LINE= LEFT EDGE LINE
MEASUREMENTS TAKEN WITH: ROLL-O-TAPE FROM SP0174

PT AE FE DESCRIPTION

A 0'0" 5'6"N FINAL REST RIGHT FRONT TIRE
B 9'10"W 5'6"N FINAL REST RIGHT REAR TIRE

OFFICERS SIGNATURE	BADGE NO. 1596
--------------------	--------------------------

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (REV. 1/82)

LOCAL REPORT NUMBER 10-0450-90	REPORTING AGENCY Ohio State Highway Patrol	DATE OF ACCIDENT 06/24/2011
IN COUNTY OF Sandusky	ACCIDENT LOCATION IR0080	



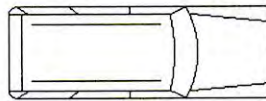
IR-80 (OHIO TURNPIKE)
EAST BOUND

NOT TO SCALE

CEMENT WALL



BERM



B A
"0"

REF LINE



BERM



RP

OFFICERS SIGNATURE	BADGE NO. 1596
--------------------	-------------------

