

Traffic Crash Report

REPORTING AGENCY NAME* RICHFIELD POLICE

LOCAL REPORT NUMBER* 2020012

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

REPORTING AGENCY NAME* RICHFIELD POLICE
 NCIC* 07726
 HITS/SKIP 01
 NUMBER OF UNITS 01
 UNIT IN ERROR 98 - ANIMAL
 01
 99 - UNKNOWN

COUNTY* LOCALITY* RICHFIELD
 3
 3 - TOWNSHIP
 2 - VILLAGE
 1 - CITY

LOCATION ROAD NAME BOSTON ROAD
 ROAD TYPE RD
 REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)
 HIGHLAND
 ROAD TYPE RD
 CRASH DATE / TIME* 01/22/2020 19:19
 CRASH SEVERITY 3
 1 - FATAL
 2 - SERIOUS INJURY
 3 - MINOR INJURY
 4 - INJURY POSSIBLE
 5 - PROPERTY DAMAGE ONLY

REFERENCE POINT
 1 - INTERSECTION
 2 - MILE POST
 3 - HOUSE #

ROUTE TYPE RICHFIELD
 PREFIX N - NORTH
 S - SOUTH
 E - EAST
 W - WEST
 DISTANCE FROM REFERENCE
 1 - MILES
 2 - FEET
 3 - YARDS
 DISTANCE FROM REFERENCE
 1 - INTERSECTION
 2 - MILE POST
 3 - HOUSE #

LOCATION OF FIRST HARMFUL EVENT
 1 - ON ROADWAY
 2 - ON SHOULDER
 3 - IN MEDIAN
 4 - ON ROADSIDE
 5 - ON GORE
 6 - OUTSIDE TRAFFIC WAY
 7 - ON RAMP
 8 - OFF RAMP

MANNEUR OF CRASH COLLISION/IMPACT
 1 - NOT COLLISION
 4 - REAR-TO-REAR
 5 - BACKING
 6 - ANGLE
 7 - SIDESWIPED, SAME DIRECTION
 8 - SIDESWIPED, OPPOSITE DIRECTION
 9 - OTHER / UNKNOWN

WORK ZONE RELATED
 WORKERS PRESENT
 LAW ENFORCEMENT PRESENT
 ACTIVE SCHOOL ZONE

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

LOCATION OF CRASH IN WORK ZONE
 1 - BEFORE THE 1ST WORK ZONE
 2 - ADVANCE WARNING AREA
 3 - TRANSITION AREA
 4 - ACTIVITY AREA
 5 - TERMINATION AREA

WEATHER
 1 - CLEAR
 2 - CLOUDY
 3 - FOG, SMOG, SMOKE
 4 - RAIN
 5 - SLEET, HAIL
 6 - SNOW
 7 - SEVERE CROSSWINDS
 8 - BLOWING SAND, SOIL, DIRT, SNOW
 9 - FREEZING RAIN OR FREEZING DRIZZLE
 99 - OTHER / UNKNOWN

LIGHT CONDITION
 1 - DAYLIGHT
 2 - DAWN/DUSK
 3 - DARK - LIGHTED ROADWAY
 4 - DARK - ROADWAY NOT LIGHTED
 5 - DARK - UNKNOWN ROADWAY LIGHTING
 9 - OTHER / UNKNOWN

CONTOUR
 1 - STRAIGHT LEVEL
 2 - STRAIGHT GRADE
 3 - CURVE LEVEL
 4 - CURVE GRADE
 9 - OTHER/UNKNOWN

CONDITIONS
 1 - DRY
 2 - WET
 3 - SNOW
 4 - ICE
 5 - SAND, MUD, DIRT, OIL, GRAVEL
 6 - WATER (STANDING, MOVING)
 7 - SLUSH
 9 - OTHER/UNKNOWN

SURFACE
 1 - CONCRETE
 2 - BLACKTOP
 3 - ASPHALT
 4 - SLAG, GRAVEL, STONE
 5 - DIRT
 9 - OTHER/UNKNOWN

Unit one was East bound on Boston Road and failed to navigate the curve to Highland Road, went off the right side of the road and made contact with the right front of the vehicle with a tree and then spun and hit a road arrow sign.

CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	SCENE CLEARED DATE / TIME
01/22/2020 19:19	01/22/2020 19:22	01/22/2020 19:55	01/22/2020 20:13

TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	CHECKED BY OFFICER'S NAME*	OFFICER'S BADGE NUMBER*
01/22/2020 19:19	01/22/2020 19:22	716	ANTHONY PADULA	ALYX	81

LP STATE OH LICENSE PLATE # ENU3314
 INSURANCE COMPANY AMICA MUTUAL
 INSURANCE POLICY # 90083420XC
 VEHICLE YEAR 2008 TOY
 VEHICLE MAKE JTEW44A18201613
 TOWED BY COMPANY NAME WORLD
 HAZARDOUS MATERIAL MATERIAL CLASS # PLACARD ID #
 RELEASED PLACARD
 VEHICLE WEIGHT GAWR/GCW 1 < 10K LBS. 2 10,001 - 26K LBS. 3 > 26K LBS.
 #OCCUPANTS 01
 TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE
 INTERLOCK DEVICE HITSKIP UNIT
 OWNER PHONE: INCLUDE AREA CODE () HAVE AS ENTERED

DAMAGE SCALE
 1 - NONE
 2 - MINOR DAMAGE
 3 - FUNCTIONAL DAMAGE
 4 - DISABLING DAMAGE
 9 - UNKNOWN
 DAMAGE AREA(S) INDICATE ALL THAT APPLY
 1 2 12
 2020012 LOCAL REPORT NUMBER

VEHICLE IDENTIFICATION # JTEW44A18201613
 COLOR BLK /
 VEHICLE MODEL HGH
 DAMAGE SCALE
 1 - NONE
 2 - MINOR DAMAGE
 3 - FUNCTIONAL DAMAGE
 4 - DISABLING DAMAGE
 9 - UNKNOWN
 DAMAGE AREA(S) INDICATE ALL THAT APPLY
 1 2 12
 2020012 LOCAL REPORT NUMBER

VEHICLE TYPE 1 - PASSENGER CAR 2 - MOTORCYCLE 3 - WHEELED 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS) 7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE 12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME 18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 28 - TRAM 29 - UNKNOWN OR HITSKIP

VEHICLE SIGNALS 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS 4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT 7 - WORK OR SLICK TIRES 8 - TRAILER EQUIPMENT 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 11 - DUMP 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARAGE/REFUSE 15 - OTHER / UNKNOWN

VEHICLE DEFECTS 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS 4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT 7 - WORK OR SLICK TIRES 8 - TRAILER EQUIPMENT 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 11 - DUMP 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARAGE/REFUSE 15 - OTHER / UNKNOWN

VEHICLE LOCATION AT IMPACT 1 - INTERSECTION - MARKED 2 - INTERSECTION - UNMARKED 3 - SHOULDER / ROADSIDE 4 - MIDDLE - MARKED 5 - TRAVEL LANE - OTHER LANE 6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK 9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER 13 - NEARBY CURVE 14 - ENTERING OR CROSSING OR LEAVING VEHICLE 15 - PARKING 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE 22 - DISABLING VEHICLE 23 - OTHER / UNKNOWN

VEHICLE ACTIONS 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 6 - MAKING RIGHT TURN 7 - MAKING LEFT TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED 12 - DRIVERS LESS 13 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING OR LEAVING VEHICLE 15 - PARKING 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE 22 - DISABLING VEHICLE 23 - OTHER / UNKNOWN

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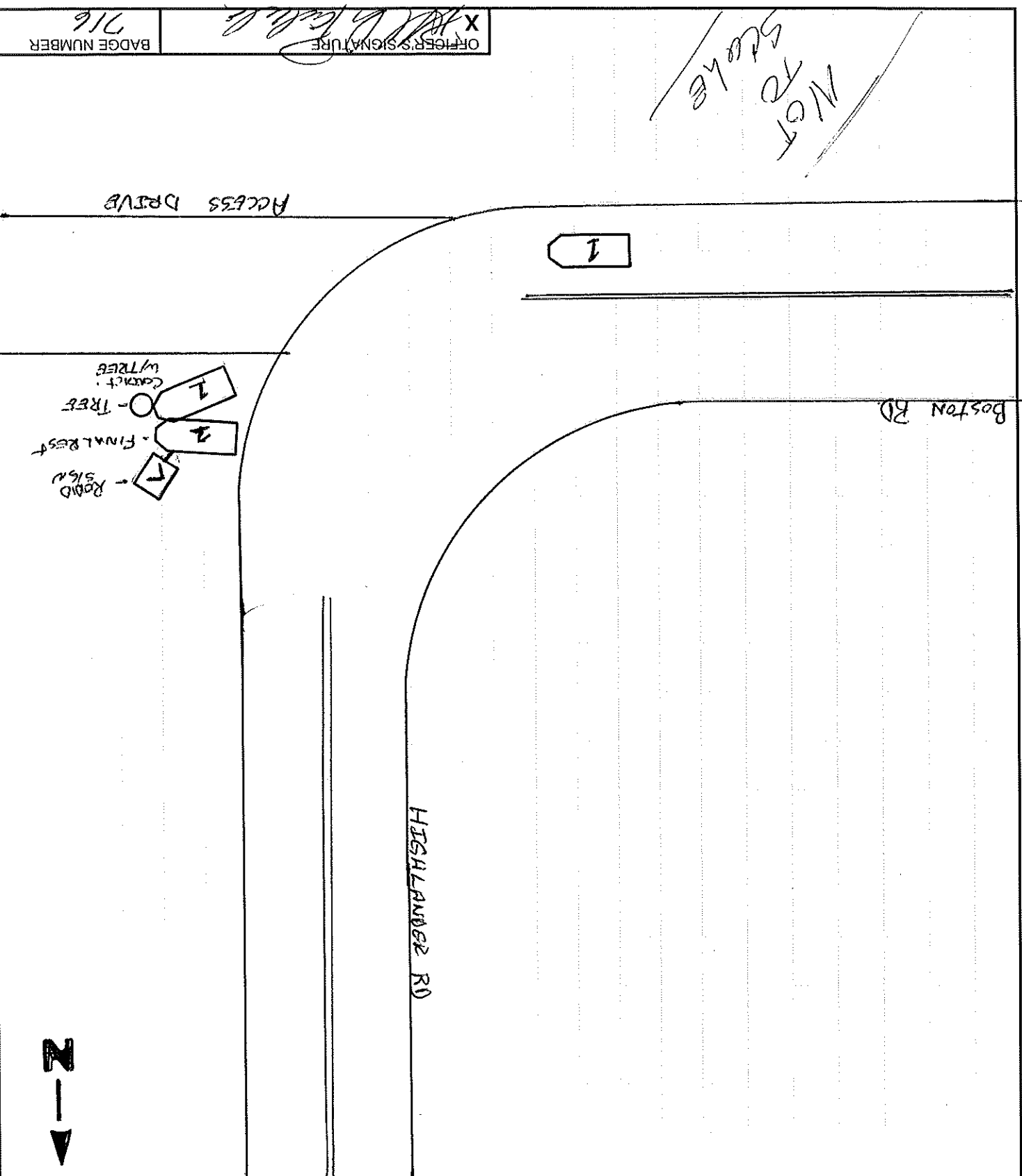
MOTORIST / NON-MOTORIST

UNIT # 01		NAME: LAST, FIRST, MIDDLE SCHWORM ROBERT K		DATE OF BIRTH 06/21/1948		AGE 71		GENDER M	
ADDRESS: STREET, CITY, STATE, ZIP 10153 HICKORY RIDGE BRECKSVILLE OH 44141									
UNIT # 3		INJURIES INJURED		EMSAGENCY (NAME) BRECKSVILLE FIRE		SAFETY EQUIPMENT USED 4		CONTACT PHONE - INCLUDE AREA CODE	
OL STATE 3		OPERATOR LICENSE NUMBER RH563333		OFFENSE CHARGED 4511.202		LOCAL CODE		OFFENSE DESCRIPTION FAILURE TO CONTROL	
OL CLASS OH		ENDORSEMENT		RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY 1		CONDITION 1	
ALCOHOL / DRUG SUSPECTED		ALCOHOL <input type="checkbox"/>		MARIJUANA <input type="checkbox"/>		OTHER DRUG <input type="checkbox"/>		STATUS TYPE VALUE	
ALCOHOL TEST		DRUG TEST(S)		STATUS TYPE VALUE		STATUS TYPE VALUE		STATUS TYPE VALUE	
UNIT # 4		NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH		AGE		GENDER	
ADDRESS: STREET, CITY, STATE, ZIP									
UNIT # 3		INJURIES INJURED		EMSAGENCY (NAME)		SAFETY EQUIPMENT USED		CONTACT PHONE - INCLUDE AREA CODE	
OL STATE 3		OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE		OFFENSE DESCRIPTION	
OL CLASS		ENDORSEMENT		RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY		CONDITION	
ALCOHOL / DRUG SUSPECTED		ALCOHOL <input type="checkbox"/>		MARIJUANA <input type="checkbox"/>		OTHER DRUG <input type="checkbox"/>		STATUS TYPE VALUE	
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UNIT # 3		NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH		AGE		GENDER	
ADDRESS: STREET, CITY, STATE, ZIP									
UNIT # 4		INJURIES INJURED		EMSAGENCY (NAME)		SAFETY EQUIPMENT USED		CONTACT PHONE - INCLUDE AREA CODE	
OL STATE 4		OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE		OFFENSE DESCRIPTION	
OL CLASS		ENDORSEMENT		RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY		CONDITION	
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ALCOHOL TEST		DRUG TEST(S)		STATUS TYPE VALUE		STATUS TYPE VALUE		STATUS TYPE VALUE	

INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1-FATAL	1-FRONT-LEFT SIDE (MOTORCYCLE DRIVER)	1-NOT DEPLOYED	1-CLASS A	1-ALCOHOL INTERLOCK DEVICE	1-NOT DISTRACTED	1-NONE GIVEN
2-SUSPECTED SERIOUS INJURY	2-FRONT-MIDDLE	2-DEPLOYED FRONT	2-CLASS B	2-COL INTRASTATE ONLY	2-MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2-TEST GIVEN, CONTAMINATED SAMPLE / UNSAMPLE
3-SUSPECTED MINOR INJURY	3-FRONT-RIGHT SIDE	3-DEPLOYED SIDE	3-CLASS C	3-CORRECTIVE LENSES	3-TALKING ON HANDS-FREE COMMUNICATION DEVICE	3-TEST GIVEN, RESULTS KNOWN
4-POSSIBLE INJURY	4-DEPLOYED BOTH FRONT / SIDE (MOTORCYCLE PASSENGER)	4-NOT APPLICABLE	4-REGULAR CLASS (OHIO=D)	4-FARM WAIVER	4-TALKING ON HANDS-FREE COMMUNICATION DEVICE	4-TEST GIVEN, RESULTS UNKNOWN
5-NOT APPARENT INJURY	5-SECOND-LEFT SIDE (MOTORCYCLE PASSENGER)	5-NOT APPLICABLE	5-MC MOPED ONLY	5-EXCEPT CLASS A BUS	5-OTHER ACTIVITY WITH AN COMMUNICATION DEVICE	
1-NOT TRANSPORTED	6-SECOND-RIGHT SIDE (MOTORCYCLE SIDE CAR)	6-NO VALIDOL	6-NO VALIDOL	7-EXCEPT TRACTOR-TRAILER & CLASS B BUS	6-PASSENGER PERMIT RESTRICTIONS	
2-EMS	7-THIRD-LEFT SIDE	8-HAZMAT	8-MOTORCYCLE	8-INTERMEDIATE LICENSE RESTRICTIONS	7-OTHER DISTRACTION INSIDE THE VEHICLE	
3-POLICE	8-THIRD-MIDDLE	9-TOTALY EJECTED	9-PASSENGER	9-LEARNER'S PERMIT RESTRICTIONS	8-OTHER DISTRACTION OUTSIDE THE VEHICLE	
9-OTHER / UNKNOWN	9-THIRD-RIGHT SIDE	10-LIMITED TO DAYLIGHT ONLY	10-MOTORCYCLE	10-LIMITED TO EMPLOYMENT ONLY	9-OTHER / UNKNOWN	
SAFETY EQUIPMENT						
1-NONE USED	11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1-NOT TRAPPED	1-TRUCK	11-LIMITED-OTHER	1-NONE	
2-SHOULDER BELT ONLY USED	12-PASSENGER IN UNENCLOSED CARGO AREA	2-EXTINGUISHED BY MECHANICAL MEANS	2-PARTIALLY EJECTED	12-LIMITED-OTHER	2-BLOOD	
3-LAP BELT ONLY USED	13-TRAILING UNIT	3-FREED BY MECHANICAL MEANS	3-TOTALY EJECTED	13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	3-URINE	
4-SHOULDER & LAP BELT USED	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	4-NOT APPLICABLE	4-NOT APPLICABLE	14-MILITARY VEHICLES WITHOUT AIR BRAKES	4-OTHER	
5-CHILD RESTRAINT SYSTEM - FORWARD FACING	15-NON-MOTORIST	5-TRUCK CAB	5-TRUCK CAB	15-MOTOR VEHICLES WITHOUT AIR BRAKES	5-OTHER	
6-CHILD RESTRAINT SYSTEM - REAR FACING	16-OUTSIDE MIRROR	6-BOOSTER SEAT	6-BOOSTER SEAT	16-OUTSIDE MIRROR	6-OTHER / UNKNOWN	
7-BOOSTER SEAT	17-PROSTHETIC AID	7-HELMET USED	7-HELMET USED	17-PROSTHETIC AID	7-OTHER	
8-HELMET USED	18-OTHER	8-PROTECTIVE PADS USED (ELBOW, KNEES, ETC)	8-PROTECTIVE PADS USED (ELBOW, KNEES, ETC)	18-OTHER	8-NEGATIVE RESULTS	
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC)		9-LIGHTING - PEDESTALIAN / BICYCLE ONLY	9-LIGHTING - PEDESTALIAN / BICYCLE ONLY			
10-REFLECTIVE CLOTHING (ELBOW, KNEES, ETC)						

OHIO TRAFFIC CRASH REPORT
 DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 2020012	REPORTING AGENCY RICHFIELD POLICE	DATE OF CRASH MO1 02 2020
IN COUNTY OF Summit	CRASH LOCATION Boston & Highlander Rds.	





TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER 2020012	REPORTING AGENCY RICHFIELD POLICE	DATE OF CRASH 1 24 20
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, **Robert K. Schworm** PRINTED
 Officer's Name: **Robert K. Schworm**
 Location: **AT RICHFIELD PD.**

HEREBY MAKE THIS VOLUNTARY STATEMENT TO

Wednesday evening, 7:30pm, traveling East on Boston Rd. per usual. As I approached Northbound with bright lines, eyes were down on right corner of windshield mainly in my position on road. Car passed, looked -- but too late, went straight at the Boston Rd right hand right angle curve, man into guard rail and sign.

Came to an abrupt stop - bags out, seat belt on -
 Backkville speed took me to Metro backkville CR.
 Got home to rest up.
 called insurance next day

VEHICLE INFORMATION

YEAR	2008	MAKE	TOYO	MODEL	HIGHLANDER	COLOR	SLV	AIR BAG Deployed (YES/NO)	SAFETY RESTRAINT USED (YES/NO)
ESTIMATED SPEED (MPH): 35									

Insurance Co: **Amica Mutual** Policy: **90083420XC**

ADDRESS OF WITNESS: **11016 3rd Keryn Bridge, Backkville Ohio 44141**
 PHONE NUMBER: **90083420XC**
 SIGNATURE OF WITNESS: **Robert K. Schworm**
 OFFICER SIGNATURE: **[Signature]** 718