

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

2020141

<input checked="" type="checkbox"/> PHOTOS TAKEN	<input type="checkbox"/> OH-2	<input checked="" type="checkbox"/> OH-3	LOCAL INFORMATION
<input type="checkbox"/> SECONDARY CRASH	<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME*
<input type="checkbox"/> PRIVATE PROPERTY			RICHFIELD POLICE
			NCIC* 07726

COUNTY* 77	LOCALITY* 2 1-CITY 2-VILLAGE 3-TOWNSHIP	LOCATION: CITY, VILLAGE, TOWNSHIP* RICHFIELD	HIT/SKIP 1-SOLVED 2-UNSOLVED	NUMBER OF UNITS 1	UNIT IN ERROR 98-ANIMAL 99-UNKNOWN
			CRASH DATE / TIME* 12/16/2020		CRASH SEVERITY 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY

ROUTE TYPE	ROUTE NUMBER	PREFIX N-NORTH S-SOUTH E-EAST W-WEST	LOCATION ROAD NAME 3245 HENRY	ROAD TYPE RD	LATITUDE DECIMAL DEGREES 41.276728
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ROUTE TYPE	ROUTE NUMBER	PREFIX N-NORTH S-SOUTH E-EAST W-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) COLUMBIA	ROAD TYPE RD	LONGITUDE DECIMAL DEGREES 81.622670
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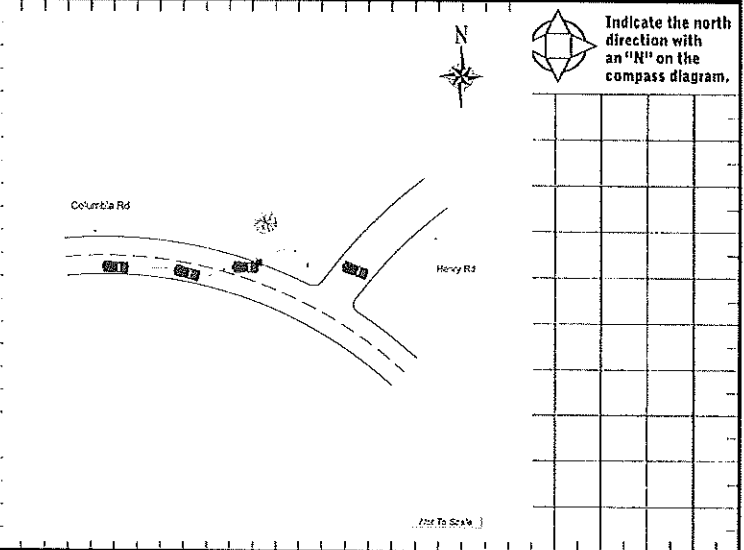
REFERENCE POINT 1-INTERSECTION 2-MILE POST 3-HOUSE # 1	DIRECTION N-NORTH S-SOUTH E-EAST W-WEST S	ROUTE TYPE IR-INTERSTATE ROUTE(TP) US-FEDERAL US ROUTE SR-STATE ROUTE CR-NUMBERED COUNTY ROUTE TR-NUMBERED TOWNSHIP ROUTE	ROAD TYPE AL-ALLEY AV-AVENUE BL-BOULEVARD CR-CIRCLE CT-COURT DR-DRIVE HE-HEIGHTS	ROAD TYPE HW-HIGHWAY LA-LANE MP-MILEPOST OV-OVAL PK-PARKWAY PI-PIKE PL-PLACE	RD-ROAD SQ-SQUARE ST-STREET TE-TERRACE TL-TRAIL WA-WAY	INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA	NUMBER OF APPROACHES	ROADWAY <input type="checkbox"/> ROADWAY DIVIDED
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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 4	MANNER OF CRASH COLLISION/IMPACT 1-NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2-REAR-END 3-HEAD-ON 4-REAR-TO-REAR 5-BACKING 6-ANGLE 7-SIDESWIPE, SAME DIRECTION 8-SIDESWIPE, OPPOSITE DIRECTION 9-OTHER / UNKNOWN 1	DIRECTION OF TRAVEL N-NORTH S-SOUTH E-EAST W-WEST	MEDIAN TYPE 1-DIVIDED FLUSH MEDIAN (<4 FEET) 2-DIVIDED FLUSH MEDIAN (>4 FEET) 3-DIVIDED, DEPRESSED MEDIAN 4-DIVIDED, RAISED MEDIAN (ANY TYPE) 9-OTHER/UNKNOWN
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<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE	WORK ZONE TYPE 1-LANE CLOSURE 2-LANE SHIFT/CROSSOVER 3-WORK ON SHOULDER OR MEDIAN 4-INTERMITTENT OR MOVING WORK 5-OTHER	LOCATION OF CRASH IN WORK ZONE 1-BEFORE THE 1ST WORK ZONE WARNING SIGN 2-ADVANCE WARNING AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA	CONTOUR 3 1-STRAIGHT LEVEL 2-STRAIGHT GRADE 3-CURVE LEVEL 4-CURVE GRADE 9-OTHER/UNKNOWN	CONDITIONS 1 1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN	SURFACE 2 1-CONCRETE 2-BLACKTOP, BITUMINOUS, ASPHALT 3-BRICK/BLOCK 4-SLAG, GRAVEL, STONE 5-DIRT 9-OTHER/UNKNOWN
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LIGHT CONDITION 1-DAYLIGHT 2-DAWN/DUSK 3-DARK - LIGHTED ROADWAY 4-DARK - ROADWAY NOT LIGHTED 5-DARK - UNKNOWN ROADWAY LIGHTING 9-OTHER / UNKNOWN 4	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 1
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Unit 1, was traveling eastbound on Columbia Rd when the driver fell asleep at the wheel. Unit 1, then went left of the center line striking the curb. Unit 1, continuing on the roadside struck the support of a telephone pole. Continuing eastbound driving off the curb and ending up at final rest on Henry Rd.



CRASH REPORTED DATE / TIME 12/16/2020 01:46	DISPATCH DATE / TIME 12/16/2020 01:48	ARRIVAL DATE / TIME 12/16/2020 01:52	SCENE CLEARED DATE / TIME 12/16/2020 02:47	REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME* DOUGLAS MCARTOR	Checked by OFFICER'S NAME* <i>[Signature]</i>
			OFFICER'S BADGE NUMBER* 744	Checked by OFFICER'S BADGE NUMBER* #704
				<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO CSRS)

UNIT # 01 **OWNER NAME: LAST, FIRST, MIDDLE () (SAME AS DRIVER)** KUNG TAI DUH **OWNER PHONE: INCLUDE AREA CODE () (SAME AS DRIVER)** 330-903-0148
OWNER ADDRESS: STREET, CITY, STATE, ZIP () (SAME AS DRIVER) 563 ALAHO ST AKRON OH 44305
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP **COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE**

LP STATE OH **LICENSE PLATE #** HIZ2881 **VEHICLE IDENTIFICATION #** 1C4HJXEG8JW123283 **VEHICLE YEAR** 2018 **VEHICLE MAKE** JEEP
 INSURANCE VERIFIED **INSURANCE COMPANY** GEICO **INSURANCE POLICY #** 4557531888 **COLOR** WHI / **VEHICLE MODEL** WRA
 COMMERCIAL **GOVERNMENT** **IN EMERGENCY RESPONSE** **US DOT #** **TOWED BY: COMPANY NAME** WORLD
 INTERLOCK DEVICE EQUIPPED **HIT/SKIP UNIT** **#OCCUPANTS** 1 **VEHICLE WEIGHT GVWR/GCWR** 1- <=10K LBS. 2- 10,001 - 26K LBS. 3- >26K LBS. **HAZARDOUS MATERIAL**
 MATERIAL RELEASED **PLACARD** **CLASS #** **PLACARD ID #**

UNIT TYPE 1- PASSENGER CAR 7- MOTORCYCLE 2-WHEELED 12- GOLF CART 18- LIMO (LIVERY VEHICLE) 23- PEDESTRIAN / SKATER
 2- PASSENGER VAN (MINIVAN) 8- MOTORCYCLE 3-WHEELED 13- SNOWMOBILE 19- BUS (16+ PASSENGERS) 24- WHEELCHAIR (ANY TYPE)
 3- SPORT UTILITY VEHICLE 9- AUTOCYCLE 14- SINGLE UNIT TRUCK 20- OTHER VEHICLE 25- OTHER NON-MOTORIST
 4- PICK UP 10- MOPED OR MOTORIZED BICYCLE 15- SEMI-TRACTOR 21- HEAVY EQUIPMENT 26- BICYCLE
 5- CARGOVAN 11- ALL TERRAIN VEHICLE (ATV/UTV) 16- FARM EQUIPMENT 22- ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27- TRAIN
 6- VAN (9-15 SEATS) 17- MOTORHOME 99- UNKNOWN OR HIT/SKIP

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0- NO AUTOMATION 3- CONDITIONAL AUTOMATION 9- UNKNOWN
 1- YES 2- NO 9- OTHER / UNKNOWN 1- DRIVER ASSISTANCE 4- HIGH AUTOMATION 5- FULL AUTOMATION 2- PARTIAL AUTOMATION

SPECIAL FUNCTION 1- NONE 6- BUS - CHARTER/TOUR 11- FIRE 16- FARM 21- MAIL CARRIER
 2- TAXI 7- BUS - INTERCITY 12- MILITARY 17- MOWING 99- OTHER / UNKNOWN
 3- ELECTRONIC RIDE SHARING 8- BUS - SHUTTLE 13- POLICE 18- SNOW REMOVAL
 4- SCHOOL TRANSPORT 9- BUS - OTHER 14- PUBLIC UTILITY 19- TOWING
 5- BUS - TRANSIT/COMMUTER 10- AMBULANCE 15- CONSTRUCTION EQUIPMENT 20- SAFETY SERVICE PATROL

CARGO BODY TYPE 1- NO CARGO BODY TYPE / NOT APPLICABLE 3- VEHICLE TOWING ANOTHER MOTOR VEHICLE 5- INTERMODAL CONTAINER CHASSIS 8- POLE 12- CONCRETE MIXER
 2- BUS 4- LOGGING 6- CARGO VAN/ENCLOSED BOX 7- GRAIN/CHIPS/GRAVEL 9- CARGO TANK 10- FLAT BED 11- DUMP 13- AUTO TRANSPORTER
 14- GARBAGE/REFUSE 99- OTHER / UNKNOWN

VEHICLE DEFECTS 1- TURN SIGNALS 4- BRAKES 7- WORN OR SLICK TIRES 9- MOTOR TROUBLE 99- OTHER / UNKNOWN
 2- HEAD LAMPS 5- STEERING 8- TRAILER EQUIPMENT DEFECTIVE 10- DISABLED FROM PRIOR ACCIDENT
 3- TAIL LAMPS 6- TIRE BLOWOUT

NON-MOTORIST LOCATION AT IMPACT 1- INTERSECTION - MARKED CROSSWALK 3- INTERSECTION - OTHER 6- BICYCLE LANE 9- MEDIAN/CROSSING ISLAND 12- FIRST RESPONDER AT INCIDENT SCENE
 2- INTERSECTION - UNMARKED CROSSWALK 4- MIDBLOCK - MARKED CROSSWALK 7- SHOULDER / ROADSIDE 10- DRIVEWAY ACCESS 11- SHARED USE PATHS OR TRAILS
 5- TRAVEL LANE - OTHER LOCATION 8- SIDEWALK 11- SHARED USE PATHS OR TRAILS 99- OTHER / UNKNOWN

ACTION 1- NON-CONTACT 1- STRAIGHT AHEAD 7- MAKING U-TURN 13- NEGOTIATING A CURVE 18- APPROACHING OR LEAVING VEHICLE
 2- NON-COLLISION 2- BACKING 8- ENTERING TRAFFIC LANE 14- ENTERING OR CROSSING SPECIFIED LOCATION 19- STANDING
 3- STRIKING 3- CHANGING LANES 9- LEAVING TRAFFIC LANE 15- WALKING, RUNNING, JOGGING, PLAYING 20- OTHER NON-MOTORIST
 4- STRUCK PRE-CRASH ACTIONS 4- OVERTAKING/PASSING 10- PARKED 16- WORKING 21- STANDING OUTSIDE DISABLED VEHICLE
 5- BOTH STRIKING & STRUCK 5- MAKING RIGHT TURN 11- SLOWING OR STOPPED IN TRAFFIC 17- PUSHING VEHICLE 99- OTHER / UNKNOWN
 9- OTHER / UNKNOWN 6- MAKING LEFT TURN 12- DRIVERLESS

CONTRIBUTING CIRCUMSTANCES 1- NONE 7- LEFT OF CENTER 13- IMPROPER START FROM A PARKED POSITION 17- VISION OBSTRUCTION 21- LYING IN ROADWAY
 2- FAILURE TO YIELD 8- FOLLOWING TOO CLOSE / ACDA 14- STOPPED OR PARKED ILLEGALLY 18- OPERATING DEFECTIVE EQUIPMENT 22- NOT DISCERNIBLE
 3- RAN RED LIGHT 9- IMPROPER LANE CHANGE 15- SWERVING TO AVOID 19- LOAD SHIFTING/FALLING/SPILLING 23- OPENING DOOR INTO ROADWAY
 4- RAN STOP SIGN 10- IMPROPER PASSING 16- WRONG WAY 20- IMPROPER CROSSING 99- OTHER IMPROPER ACTION
 5- UNSAFE SPEED 11- DROVE OFF ROAD 17- PUSHING VEHICLE
 6- IMPROPER TURN 12- IMPROPER BACKING

SEQUENCE OF EVENTS
 1- OVERTURN/ROLLOVER 6- EQUIPMENT FAILURE 11- CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16- RAILWAY VEHICLE 22- WORK ZONE MAINTENANCE EQUIPMENT
 2- FIRE/EXPLOSION 7- SEPARATION OF UNITS 12- DOWNHILL RUNAWAY 17- ANIMAL - FARM 23- STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
 3- IMMERSION 8- RAN OFF ROAD RIGHT 13- OTHER NON-COLLISION 18- ANIMAL - DEER 24- OTHER MOVABLE OBJECT
 4- JACKKNIFE 9- RAN OFF ROAD LEFT 14- PEDESTRIAN 19- ANIMAL - OTHER 20- MOTOR VEHICLE IN TRANSPORT 21- PARKED MOTOR VEHICLE
 5- CARGO / EQUIPMENT LOSS OR SHIFT 10- CROSS MEDIAN 15- PEDALCYCLE
COLLISION WITH FIXED OBJECT - STRUCK
 25- IMPACT ATTENUATOR / CRASH CUSHION 31- GUARDRAIL END 37- TRAFFIC SIGN POST 43- CURB 50- WORK ZONE MAINTENANCE EQUIPMENT
 26- BRIDGE OVERHEAD STRUCTURE 32- PORTABLE BARRIER 38- OVERHEAD SIGN POST 44- DITCH 51- WALL
 27- BRIDGE PIER OR ABUTMENT 33- MEDIAN CABLE BARRIER 39- LIGHT / LUMINARIES SUPPORT 45- EMBANKMENT 52- BUILDING
 28- BRIDGE PARAPET 34- MEDIAN GUARDRAIL BARRIER 40- UTILITY POLE 46- FENCE 53- TUNNEL
 29- BRIDGE RAIL 35- MEDIAN CONCRETE BARRIER 41- OTHER POST, POLE OR SUPPORT 47- MAIL BOX 54- OTHER FIXED OBJECT
 30- GUARDRAIL FACE 36- MEDIAN OTHER BARRIER 42- CULVERT 48- TREE 99- OTHER / UNKNOWN

FIRST HARMFUL EVENT 1 **MOST HARMFUL EVENT** 3

LOCAL REPORT NUMBER 2020141

DAMAGE
DAMAGE SCALE
 1 - NONE 3 - FUNCTIONAL DAMAGE
 2 - MINOR DAMAGE 4 - DISABLING DAMAGE
 9 - UNKNOWN
 4

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY
 1 2 10 11 12

HAZARDOUS MATERIAL
 MATERIAL RELEASED **PLACARD** **CLASS #** **PLACARD ID #**

NO DAMAGE [0] **UNDERCARRIAGE** [14]
 TOP [13] **ALL AREAS** [15]
 UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT
 0 - NO DAMAGE 14 - UNDERCARRIAGE
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
 13 - TOP 99 - UNKNOWN
 11

TRAFFIC
TRAFFICWAY FLOW 1- ONE-WAY 2- TWO-WAY 2
TRAFFIC CONTROL 1- ROUNDABOUT 4- STOP SIGN 2- SIGNAL 5- YIELD SIGN 3- FLASHER 6- NO CONTROL 6

OF THROUGH LANES ON ROAD 2 **RAIL GRADE CROSSING** 1- NOT INVOLVED 2- INVOLVED-ACTIVE CROSSING 3- INVOLVED-PASSIVE CROSSING 1

UNIT / NON-MOTORIST DIRECTION
 FROM 4 TO 3
 1 - NORTH 5 - NORTHEAST
 2 - SOUTH 6 - NORTHWEST
 3 - EAST 7 - SOUTHEAST
 4 - WEST 8 - SOUTHWEST
 9 - OTHER / UNKNOWN

UNIT SPEED 25 **DETECTED SPEED** 1- STATED / ESTIMATED SPEED 2- CALCULATED / EOR 3- UNDETERMINED 1

POSTED SPEED 25



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
2020141

UNIT # 01	NAME: LAST, FIRST, MIDDLE KUNG TAIDUH	DATE OF BIRTH 08/27/1964	AGE 56	GENDER M
ADDRESS: STREET, CITY, STATE, ZIP 563 ALAHO ST AKRON OH 44305		CONTACT PHONE - INCLUDE AREA CODE 330-903-0148		
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 4
OL STATE OH	OPERATOR LICENSE NUMBER RP555126	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
OL CLASS 4	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
		CONDITION 5	ALCOHOL TEST STATUS: 1 TYPE: 1 VALUE: 1	
		DRUG TEST(S) STATUS: 1 TYPE: 1 RESULT: 1		

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED
		CONDITION	ALCOHOL TEST	
		DRUG TEST(S)		

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED
		CONDITION	ALCOHOL TEST	
		DRUG TEST(S)		

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- CDL INTRASTATE ONLY	2- MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2- TEST REFUSED
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, CONTAMINATED SAMPLE / UNUSABLE
4- POSSIBLE INJURY	4- SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4- DEPLOYED BOTH FRONT / SIDE	4- REGULAR CLASS (OHIO - D)	4- FARM WAIVER	4- TALKING ON HAND-HELD COMMUNICATION DEVICE	4- TEST GIVEN, RESULTS KNOWN
5- NO APPARENT INJURY	5- SECOND - MIDDLE	5- NOT APPLICABLE	5- M/C MOPED ONLY	5- EXCEPT CLASS A BUS & CLASS B BUS	5- OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5- TEST GIVEN, RESULTS UNKNOWN
INJURED TAKEN BY	6- SECOND - RIGHT SIDE	9- DEPLOYMENT UNKNOWN	6- NO VALID OL	7- EXCEPT TRACTOR-TRAILER	6- PASSENGER	ALCOHOL TEST TYPE
1- NOT TRANSPORTED / TREATED AT SCENE	7- THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION	H- HAZMAT	8- INTERMEDIATE LICENSE RESTRICTIONS	7- OTHER DISTRACTION INSIDE THE VEHICLE	1- NONE
2- EMS	8- THIRD - MIDDLE	1- NOT EJECTED	M- MOTORCYCLE	9- LEARNER'S PERMIT RESTRICTIONS	8- OTHER DISTRACTION OUTSIDE THE VEHICLE	2- BLOOD
3- POLICE	9- THIRD - RIGHT SIDE	2- PARTIALLY EJECTED	P- PASSENGER	10- LIMITED TO DAYLIGHT ONLY	9- OTHER / UNKNOWN	3- URINE
9- OTHER / UNKNOWN	10- SLEEPER SECTION OF TRUCK CAB	3- TOTALLY EJECTED	N- TANKER	11- LIMITED TO EMPLOYMENT	CONDITION	4- BREATH
SAFETY EQUIPMENT	11- PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4- NOT APPLICABLE	Q- MOTOR SCOOTER	12- LIMITED - OTHER	1- APPARENTLY NORMAL	5- OTHER
1- NONE USED	12- PASSENGER IN UNENCLOSED CARGO AREA	TRAPPED	R- THREE-WHEEL MOTORCYCLE	13- MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	2- PHYSICAL IMPAIRMENT	DRUG TEST TYPE
2- SHOULDER BELT ONLY USED	13- TRAILING UNIT	1- NOT TRAPPED	S- SCHOOL BUS	14- MILITARY VEHICLES ONLY	3- EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	1- NONE
3- LAP BELT ONLY USED	14- RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2- EXTRICATED BY MECHANICAL MEANS	T- DOUBLE & TRIPLE TRAILERS	15- MOTOR VEHICLES WITHOUT AIR BRAKES	4- ILLNESS	2- BLOOD
4- SHOULDER & LAP BELT USED	15- NON-MOTORIST	3- FREED BY NON-MECHANICAL MEANS	X- TANKER / HAZMAT	16- OUTSIDE MIRROR	5- FELL ASLEEP, FAINTED, FATIGUED, ETC.	3- URINE
5- CHILD RESTRAINT SYSTEM - FORWARD FACING	99- OTHER / UNKNOWN			17- PROSTHETIC AID	6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	4- BREATH
6- CHILD RESTRAINT SYSTEM - REAR FACING				18- OTHER	9- OTHER / UNKNOWN	5- OTHER
7- BOOSTER SEAT						DRUG TEST RESULT(S)
8- HELMET USED						1- AMPHETAMINES
9- PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						2- BARBITURATES
10- REFLECTIVE CLOTHING						3- BENZODIAZEPINES
11- LIGHTING - PEDESTRIAN / BICYCLE ONLY						4- CANNABINOIDS
99- OTHER / UNKNOWN						5- COCAINE
						6- OPIATES / OPIOIDS
						7- OTHER
						8- NEGATIVE RESULTS



TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER 202041	REPORTING AGENCY Richfield Police	DATE OF CRASH 12 16 2020
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FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, Tai-Dun Kong HEREBY MAKE THIS VOLUNTARY STATEMENT TO

PRINTED

AT Columbia Rd

OFFICER'S NAME

LOCATION

around 1:40 AM ON Dec 16, 2020 I felt asleep on the wheel on my Jeep.

2020/11

VEHICLE INFORMATION

YEAR	MAKE	MODEL	COLOR	LIC. PLATE	STATE
2018	Jeep	Wagoneer	white	HIZ 3881	Ohio

ESTIMATED SPEED (MPH): <u>25</u>	Air Bag Deployed- (YES) / NO	SAFETY RESTRAINT USED: (YES) / NO
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Insurance Co: <u>Geico</u>	Policy: <u>4557531888</u>
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ADDRESS OF WITNESS: <u>562 Alabur St Akron OH 44305</u>	PHONE NUMBER: <u>330-903-048</u>
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SIGNATURE OF WITNESS: <u>Tai-Dun Kong</u>	OFFICER SIGNATURE: <u>[Signature] #744</u>
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