OFFICE CRASH REPORT	LOCAL REPORT NUMBER *		CRASH SEVE	· · · · · · · · · · · · · · · · · · ·
OATE IT LOCAL INFORMATION	L <sub>1</sub> P <sub>1</sub> 1 <sub>1</sub> 8 <sub>1</sub> 0 <sub>1</sub>	3 <sub>1</sub> 0 <sub>1</sub> 6 <sub>1</sub> 0 <sub>1</sub> 0 <sub>1</sub> 1 <sub>1</sub> 0	7 2 2 2 1.FA	JURY 2 - UNSOLVED
M PHOTOSTAKER	olice Department		Number of units	UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN
COUNTY* CITY, VILLAGE, TOWNSHIP *	GR	ASH DATE *	TIME OF CRASH	DAY OF WEEK
8 3   VILLAGE*   Clearcreek		0 <sub>1</sub> 3 <sub>1</sub> 0 <sub>1</sub> 6 <sub>1</sub> 2 <sub>1</sub> 0 <sub>1</sub> 1	8 0 1 5	$\frac{2}{1}$ $\left  \frac{1}{1} \frac{1}{1}$
DEGREES / MINUTES / SECONDS LATITUDE O / // CONGITUDE O / //	O LATITUDE  R .3.95.0	4044	LONGITUDE	2 4 2 0
ROADWAY DIVIDED LANE DIRECTION OF TRAVEL HUMBER OF THRU LANES ROAD TYP	S OR MILEPOST 2	1 9 4 4	7014,141	3 <sub>1</sub> 1 <sub>1</sub> 3 <sub>1</sub> 9 <sub>1</sub>
□ DIVIDED  N-NORTHBOUND E-EASTBOUND S-SOUTHBOUND W-WESTBOUND  N-NORTHBOUND W-WESTBOUND  N-NORTHBOUND W-WESTBOUND  N-NORTHBOUND W-WESTBOUND  N-NORTHBOUND B-SOUTHBOUND  N-NORTHBOUND W-WESTBOUND	CR-CROLE HE- CT-COURT HW-	HEIGHTS MP : MLEPOST HEIGHWAY PK - PARKWAY LANE PI - PIKE	PL-PLACE ST-STRE RD-ROAD TE-TERRO SQ-SQUARE TL-TRAN	ACE.
S R LOCATION ROUTE NUMBER LOC PREFIX LOCATION ROAD NAME  7 4 1	LOC: ROA TYTE			NUMBERED COUNTY ROUTE NUMBERED TOWNSHIP ROUTE
DISTANCE FROM REFERENCE    MILES   MIL	REFERENCE NAME (ROAD), MILEP	OST, HOUSE #)		REFERENCE ROAD TYPE <sup>2</sup>
3 2-MILE POST 01 1 02-FOUR-WAY INTERSECTION 07-ON RAMP 12-SI	AILWAY GRADE CROSSING KARED-USE PATHS OR TRAILS KKNOWN	INTERSECTION RELATED	2 - ON SHOULDER	ENT 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 9 - UNKKNOWN
ROAD CONTOUR  1 - STRAIGHT LEVEL 4 - CURVE GRADE 2 - STRAIGHT GRADE 9 - UNKNOWN 3 - CURVE LEVEL  ROAD CONDITIONS PRIMARY SECONDARY 02 - WET 0 2 0 4 - ICE	05 - SAND, MUD, DIRT, 06 - WATER (STANDING, I V 07 - SLUSH 08 - DEBRIS*	•	ES, BUMPS, UNEVEN PAVEM (N	ENT *  * SECONDARY CONDITION ONLY
MANNER OF CRASH COLLISION/MPACT  1 - NOT COLLISION/MPACT  1 - NOT COLLISION/MPACT  1 - NOT COLLISION/MPACT  2 - REAR-END  5 - BACKING  6 - SIDESWIPE, OPPOSITE  DIRECTION  N TRANSPORT  4 - REAR-TO-REAR  7 - SIDESWIPE, SAME DIRECTION  9 - UNKNOWN	WEATHER  1 - CLEAR 2 - GLOUDY 3 - FOG, SMOG,	4 - RAIN 5 - SLEET, HAIL SMOKE 6 - SNOW	7 - SEVERE CROSSWIND 8 - BLOWING SAND, SOIL, 9 - OTHER/UNKNOWN	i
ROAD SURFACE  1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPINALT 3 - BRICKBLOCK 4 - SLAG, GRAVEL, 5 TONE 5 - DIRT 3 - DISK 4 - DARK - LIGHTE	7 - GLARE*	VAY NOT LIGHTED 9 - UN WIN ROADWAY LIGHTING * SECONDARY CONDI	IKNOWN SCHOOL ZONE RELATED	SCHOOL BUS RELATED  YES, SCHOOL BUS DIRECTLY INVOLVED  YES, SCHOOL BUS HORRECTLY INVOLVED
WORKERS PRESENT  WORK  UNW ENFORCEMENT PRESENT ZONE  (OFFICEMENTICE)  RELATED  LAW ENFORCEMENT PRESENT (OFFICEMENT PRESENT (OFFICEMENT PRESENT (OFFICEMENT PRESENT (OFFICEMENT PRESENT) (OFFICEMENT PR	NT OR MOVING WORK	ATION OF CRASH IN WORK ZONE  1 - BEFORE THE FIRST WORK 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA	ZONE WARNING SIGN	4 - ACTIVITY AREA 5 - TERMINATION AREA
Unit 1 was discovered in a ditch along the east side of SR 741 just south of house number 4224. It is believed Unit 1 was traveling north on SR 741 and ran off the right side of the road striking the ditch.	<b> </b>	SR SDALE	'  }{	4224
REPORT TAKEN BY  SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODES)	-  -  -  -  -		wsre	
DATE CRASH REPORTED TIME CRASH REPORTED DISPATCH TIME ARR			ER INVESTIGATION TIME	10114171
	CER'S BADGE NUMBER CHEC	LLILI IL. CKED BY AG200		Page 1 of 4

OHIO DE MAN POPULATION PROPERTY PROPERT					LOCAL REPORT NUM		0 0 1 1 0 7 2
UNIT NUMBER OWNER NAME: LAST, FIRST, MID  OUT Cope, William P  OWNER ADDRESS: CITY, STATE, ZIP (X) SAMEAS (	DRIVER)		OWNER PHONE NUMBER	R - INC. AREA CODE (			AGED AREA FRONT DA 03
8835 Clearcreek RD, Springboro, Ohio 45066  LP STATE   LICENSE PLATE NUMBER   VEHICLE IDENTIFICATION NUMBER   2   D   4   G   P   4   4   L   5   5   R   2   4   1   9   6   3     0   1    EYA6216   EYA6216					2 - MINOR  08 3 - FUNCTIONAL	10, 04	
VEHICLE YEAR VEHICLE MAKE	OODG	VEHICLE MODEL	Caravan	VEHICLE CO		4 - DISABLING 07	05
PROOF OF INSURANCE COMPANY Home-owners Ins Co		POLICY NUMBER 4837441801 TOWED BY Fugates		ates	9 - £10KNOMN	REAR	
CARRIER NAME, ADDRESS, CITY, STATE, ZIP						CARRIER PHONE-INCL	UDE AREA CODE
2 - 10,001 3 - MORE	AN OR EQUAL TO 10K LBS. TO 26,000 LBS. THAN 26,000 LBS. US MATERIAL	RGO BODY TYPE  01 - NO CARGO BODY  02 - BUS/AN (9-15 SEA  03 - BUS (16 - SEATS, IN  04 - VEHICLE TOWNING  05 - LOGGING  06 - INTERMODAL CON  07 - CARGO VANVENCIC.  08 - GRAIN, CI INTE, GR	TS, INC DRIVER) IC DRIVER) ANOTHER VEHICLE TAINER CHASSIS OSED BOX	09 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIXE 14 - AUTO TRANSPOR 15 - GARBAGE/REFU! 99 - OTHER/UNKNOW	2 - TWO-WAY 3 - TWO-WAY 4 - TWO-WAY 5 - ONE-WAY	, NOT DIVIDED , NOT DIVIDED, CONTINUOU , DIVIDED, UNPROTECTED (PI , DIVIDED, POSITIVE MEDIAN TRAFFICWAY	AINTED OR GRASS>4 FT.) MEDIAN
NON-MOTORIST LOCATION PRIOR TO IMPACT  01 - INTERSECTION - NO CROSSWALK 02 - INTERSECTION - OT CROSSWALK 03 - INTERSECTION - OTHER 04 - MIDBLOCK - MARKED CROSSWALK 05 - TRAVEL LANIE - OTHER LOCATION 06 - BICYCLE LANE 07 - SHOULDER/ROADSIDE 08 - SIDEWALK 09 - MEDIAN/CROSSING ISLAND 10 - ORIVEWAY ACCESS 11 - SHARED-USE PATH OR TRAIL 12 - NON-TRAFFICWAY AREA 99 - OTHER/UNKNOWN	WALK 1 - PERSONAL	99 - UNKNOWN 03 - MID SIZE 05 - MINIVAN 06 - SPORT UT 07 - PICKUP 08 - VAN 09 - MOTORCY 10 - MOTORIZE 11 - SNOWMO	(ILITY VEHICLE CLE ED BICYCLE	13 - SINGLE UI 14 - SINGLE UI 15 - SINGLE U 16 - TRUCKTIR 17 - TRACTOR 19 - TRACTOR 20 - OTHER M		8 TIRES 21 - BUSNAN( 22 - BUS (16+: NON-MOTORIS 23 - ANIMAL: 24 - ANIMAL 25 - BICYCLE 26 - PEDESTE	WITH RIDER MITH BUGGY, WAGON, SURREY IPEDACYCLIST
92 - TAXI 0 1 1 02 - TAXI 03 - RENTAL TRUCK (OVER 10K L) 04 - BUS - SCHOOL (PUBLIC OR PF 05 - BUS - TRANSIT 06 - BUS - SCHARTER 07 - BUS - SHUTTLE 88 - BUS - OTHER		20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NA NT	MOST DAMAGE  0 2  IMPACT AREA  0 2	O AREA  01 - NONE  02 - CENTER FROI  03 - RIGHT FRONT  04 - RIGHT SIDE  05 - RIGHT REAR  06 - REAR CENTEI  07 - LEFT REAR	19 - TOP AND WINDO 11 - UNDERCARRIAG 12 - LOAD/TRAILER	<b></b>	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKINGSTRUCK 9 - UNKNOWN
PRE-GRASH ACTIONS    0	N 11 - SLOWING OR STOPP	ANE	NG A CURVE 15 TORIST ACTION 16 17 18 18		_		N-MOTORIST ACTION
CONTRIBUTING CIRCUMSTANCES  PRIMARY  01 - NONE  117  02 - FAILURE TO YIELD  03 - RAN RED LIGHT  04 - RAN STOP SIGN  05 - EXCEEDED SPEED  06 - UNSAFE SPEED  07 - IMPROPER TURN  08 - LEFT OF CENTER  09 - FOLLOWED TOO CL  10 - IMPROPER LANE CL  //PASSINC/OFF RO.	12 - IMPROP 13 - STOPPE 14 - OPERAT LIMIT 15 - SWERVII 16 - WRONG 17 - FAILURE 18 - VISION OSELY/ACDA 19 - OPERAT ANGE 20 - LOAD S	ER BACKING ER START FROM PARKED POSITION D OR PARKED ILLEGALLY (ING VEHICLE, IN NEGLIGENT MAN NG TO AVOID (DUE TO EXTERNAL CO SIDEAWNROM GWAY E TO CONTROL OBSTRUCTION ING DEFECTIVE EQUIPMENT HIFTING/FALLING/SPILLING IMPROPER ACTION	22 - N N 23 - II 24 - D. NER 25 - L. ONDITIONS) 26 - F. 27 - N 28 - II 29 - F. 8	MOTORIST ONE MPROPER CROSSIN ARTING YING AND/OR ILLEGA ALLURE TO YIELD RIG NATTENTIVE ALLURE TO OBEY TRA SIGNALS/OFFICER (RONG SIDE OF THE ITHER NON-MOTORIS	LLY IN ROADWAY 3HT OF WAY .OTHING) WFIC SIGNS ROAD	02 - HE 03 - TA 04 - BR 05 - ST 00 - TIF 07 - WC 08 - TR 09 - MO 10 - DIS	RN SIGNALS  AND LAMPS  LLAMPS  LAKES  EERING  RE BLOWOUT  THO OR SLICK TIRES  ALLER EGUIPMENT DEFECTIVE  TORT ROUBLE  LABLED FROM PRIOR ACCIDENT  HER DEFECTS
SEQUENCE OF EVENTS  1 0 8 2 4 4 3 4 A S A S A S A S A S A S A S A S A S A	5 6 99 - UNKNOWN	NON-COLLISION EVE  01 - OVERTURNINO  02 - FIRE-EXPLOST  03 - IMMERSION  04 - JACKKNIFE  05 - CARGO/EQUIP	ILLOVER ( ION (	06 - EQUIPMENT FAIL (BLOWN TRE, BRAW 07 - SEPARATION OF 08 - RAN OFF ROAD 09 - RAN OFF ROAD	E FAILURE, ETC) 11 - CF UNITS OI RIGHT 12 - DC	ROSS MEDIAN ROSS CENTER LINE POSITE DIRECTION OF TR DWARHILL RUNAWAY PER NON-COLLISION	RAVEL
COLLISION WITH PERSON, VEHICLE OR OBJECT NO 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RALWAY VEHICLE (TRAIN, ENGINE) 17 - ANIMAL - FARM 18 - ANIMAL - OBER	21 FIXED. 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE 23 - STRUCK BY FALLING, SHIFTIR OR ANYTHING SET IN MOTION MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	26 - BRIDGE OVERN EQUIPMENT 27 - BRIDGE PIER O NG CARGO 28 - BRIDGE PARAP	UATORYCRASH CUSHION HEAD STRUCTURE DR ABUTMENT PET ACE END	33 - MEDIAN CABLE 34 - MEDIAN GUAR 35 - MEDIAN CONC 36 - MEDIAN OTHE 37 - TRAFFIC SIGN 38 - OVERHEAD SI 39 - LIGHTALUMINA 40 - UTILITY POLE	DRAIL BARRIER           RETE BARRIER         42           RE BARRIER         43           POST         44           EN POST         45           RIES SUPPORT         46	OR SUPPORT 4 CULVERT 5 CURB DITCH 5	IB - TREE IB - FIRE HYDRANT IB - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL, BUILDING, TUNNEL 52 - OTHER FIXEO OBJECT
UNIT SPEED POSTED SPEED TE	RAFFIC CONTROL  1 2 01 - NO CONTROLS 02 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGNA 05 - TRAFFIC FLASI 06 - SCHOOL ZONE		RS 14 - WALK/E 15 - OTHER RRICADE 16 - NOT RE DEFICER)		FROM 2 TO	1 2-SOUTH 6- 3-EAST 7-	NORTHEAST 9-UNKNOWN NORTHWEST SOUTHEAST SOUTHWEST  Page 2 of 4

OHIO OF PARISHE SECTION SECTIO	/ Non-Motorist / Occ	UPANT LUPIN 18,0,3,0,6,0,0,1,0,7,2
UNIT NUMBER NAME: LAST, FIRST, MODILE  1011 Cope, William P	DATE OF BIRTH  10   5   2   3   1   9   2   7   90	
ADDRESS, CITY, STATE, ZIP	CONTACT PHONE-INCLUDE AREA CODE	
8835 Clearcreek RD, Springboro, O	(937)748-1201  ETYEQUIPMENT USED	
2 2 MEDIC21	Atrium	9 9 MOTORCYCLE 0 1 1 1 1
O L STATE OPERATOR LIGENSE HUMBER  O H RJ476606	4 OVALID CI. END. 6 2	ALCOHOL TEST STATUS ALCOHOL TEST TYPE ALCOHOL TEST VALUE DRUG TEST STATUS DRUG TEST TYPE
offense charged (	Operation Without Reasonable Control	TATION NUMBER  016817  HANDS-FREE DEVICE USED  DRIVER DISTRACTED BY  1 1
UNIT NUMBER NAME: LAST, FIRST, MIDDLE		OATE OF BIRTH AGE GENDER  F - FEMALE  M - MALE
ADDRESS, CITY, STATE, ZIP		CONTACT PHONE- INCLUDE AREA CODE
INJURES INJURED TAKEN BY EMS AGENCY	MEDIGAL FACILITY INJURED TAKEN TO SAF	ETY EQUIPMENT USED DOT COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED MOTORCYCLE HELMET
OL STATE OPERATOR LICENSE NUMBER	OLCLASS NO CONDITION ALCOHOLDRUG SUSPECTED OLC	ALCOHOL TEST STATUS ALCOHOL TEST TYPE ALCOHOL TEST VALUE DRUG TEST STATUS DRUG TEST TYPE
OFFENSE CHARGED ( LOCAL CODE)	OFFENSE DESCRIPTION CIT	TATION NUMBER HANDS-FREE DRIVER DISTRACTED BY DEVICE USED
INJURIES INJURIED TAKEN BY  1 - NO INJURY / NONE REPORTED 1 - NOT TRAMSPORTE 2 - POSSIBLE TREATED AT SCEN	±D/ MOTORIST	AFETY EQUIPMENT  HON-MOTORIST  RAINT SYSTEM - FORWARD FACING 99 - NONE USED 12 - REFLECTIVE CLOTHING
3 - NON-INCAPACITATING 2 - EMS 4 - INCAPACITATING 3 - POLICE 5 - FATAL 4 - OTHER 9 - UNKNOWN		RAINT SYSTEM - REAR FACING 10 - HELMET USED 13 - LIGHTING EAT 11 - PROTECTIVE PADS USED 14 - OTHER
SEATING POSITION  01 - FRONT - LEFT SIDE (MOTOROYCLE DRIVER) 02 - FRONT - MIDDLE		AIR BAG USÁGE 1: NOT DEPLOYED
00 - FROM - RIGHT SIDE 01 - RECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 05 - SECOND - MIDDLE 06 - SECOND - RIGHT SIDE	09 - THIRD - RIGHT SIDE         14 - RI           10 - SLEEPER SECTION OF CAB (TRUCK)         15 - N           11 - PASSENGER IN OTHER ENCLOSED CARGO AREA         16 - O	RAILING UNIT 2 - DEPLOYED FRONT DINK ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 3 - DEPLOYED SIDE  ON MOTORIST 4 - DEPLOYED BOTH FRONT/SIDE THER 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN
EJECTION TRAPPED 1 - NOT EJECTED 1 - NOT TRAPPED 2 - TOTALLY EJECTED 2 - EXTRICATED BY	OPERATOR LICENSE CLASS CONDITION  1 - CLASS A 1 - AFPARENTLY NORMAL 2 - CLASS B 2 - PHYSICAL IMPAIRMENT	5 - FELL ASLEEP, FAINTED, FATIGUED 6 - UNDER THE INFLUENCE OF 2 - YES - ALCOHOL SUSPECTED
3 - FARTIALLY EJECTED MECHANICAL MEANS 4 - NOT APPLICABLE 3 - EXTRICATED BY NON-MECHANICAL MEANS	3 - GLASS G 4 - REGULAR GLASS (OHIO IS 'D') 5 - MCMOPED QNLY  3 - EMOTIONIAL (DEPRESSED, AING 4 - ILLNESS	
1 - NONE GIVEN 2 - TEST REFUSED	LCOHOL TEST TYPE 1 - NONE 1 - NONE 1 - NONE GIVEN 2 - BLOOD 2 - TEST REFUSED 3 - TEST GIVEN, CONTRAINATED SAMPLEAUNUSABLE	DRUG TEST TYPE  1 - NONE  1 - NONE  1 - NO DISTRACTION REPORTED  2 - BLOOD  2 - PHONE  7 - EXTERNAL DISTRACTION
3 - TEST GWEN, CONTAMINATED SAMPLEUNIUSABLE 4 - TEST GWEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	3 - URINE 3 - TEXTING/E-MAILING 4 - OTHER 4 - ELECTRONIC COMMUNICATION DEVICE 5 - OTHER ELECTRONIC DEVICE (MANIGATION DEVICE, RADIO, DVD)  3 - TEXTING/E-MAILING 5 - OTHER ELECTRONIC DEVICE (MANIGATION DEVICE, RADIO, DVD)	
UNIT NUMBER NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH  AGE  GENDER  F - FEMALE  M - MALE
ADDRESS, CITY, STATE, ZIP		CONTACT PHONE: INCLUDE AREA CODE
INJURIES INJURED TAKEN BY EMIS AGENCY	MEDICAL FACILITY INJURED TAKEN TO SAF	ETY EQUIPMENT USED DOT COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED MOTORCYCLE HELMET
UNIT NUMBER NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH AGE GENDER F - FEMALE M - MALE
ADDRESS, CITY, STATE, ZIP		CONTACT PHONE-INCLUDE AREA CODE
INJURIES INJURED TAKEN BY EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO SAF	ETY EQUIPMENT USED DOY COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED MOTORCYCLE
		HELMET Page 3 of 4

	OHIO DE APPOOR OF PUBLIC DECARDO - FORMACION	TRAFFIC ACCIDENT	- DIAGRAM/NARRATIVE CO
ſ	LOCAL		REPORTING

LOCAL REPORT NUMBER  LP180306001072  REPORTING AGENCY Clearcreek Twp. Police Department  ACCIDENT  ACCIDENT  DATE OF ACCIDE 03/06	NT 12018
IN COUNTY OF	
Warren ACCIDENT LOCATION	·
There was other damage discovered on Unit 1 along passenger side of vehicle and damage to passenger side mirror. This damage appeared to have occurred recently and does not appear to be related to Unit 1 going into the ditch.	
See incident report LLP180306001072.	
OFFICERS SIGNATURE	BADGE NO. 1L32