OHIO ORAFFIC CRASH REPORT	LOCAL REPORT NUMBER * CRASH SEVERITY HIT/SKIP 1 - SOLVED						
EDUCATION TERROR PROTECTION LOCAL REFORMATION	L ₁ P ₁ 1 ₁ 8 ₁ 0 ₁ 3 ₁ 0 ₁ 6 ₁ 0 ₁ 0 ₁ 1 ₁ 0 ₁ 7 ₁ 2 ₁ 2 _{2-EXARY} 2-EXARY 3-PEO	2 - UNSOLVED					
☑ PHOTOS TAKEN ☐ PDO UNDER STATE ☐ PRO UNDER PROPERTY ☐ PROPERTY ☐ REPORTING AGENCY NICLO* REPORTING AGENC	Police Department \[\begin{array}{c c} arra	- UNKNOWN					
COUNTY* CITY, VILLAGE, TOWNSHIP* 8 3	CRASH DATE 1 DAY TIME OF CRASH DAY LT LT LT LT LT LT LT L	OF WEEK					
DEGREES / MINUTES / SECONDS	DECIMAL DEGREES						
O / // CONSTUDE O / //	R 3 9 , 5 0 1 9 4 4)					
ROADWAYDMSON DIMOED LANE DIRECTION OF TRAVEL N. NORTHBOUND E. EASTBOUND N. V. V. STBOUND N. V. V. V. STBOUND N. V. V. STBOUND N. V. V. V. STBOUND N. V. V. V. STBOUND N. V. V. V. STBOUND N. V. V. STBOUND N. V. V. STBOUND N. V. V. STBOUND N. V. V. V. STBOUND N. V. V. V. STBOUND N. V. V. STBOUND N. V. V. V. STBOUND N. V. V. V. STBOUND N. V. V. V. V. V. STBOUND N. V. V. V. STBOUND N. V. V. V. STBOUND N. V.							
S R LOCATION ROUTE NUMBER LOCATION ROAD NAME T	LOCATION ROAD TYPE 2 LOCATION ROAD TYPE 2 ROUTE TYPES 1 IR - INTERSTATE ROUTE (INC. TURNPIKE) IR - INDAMERED COUNTY R IR - INDAMERED TOWNSING SR - STATE ROUTE						
DISTANCE FROM REFERENCE MILES MILES N. S. P. REFERENCE ROUTE NUMBER REF PREFIX ROUTE N. S. P. W. F. Type J. L.	REFERENCE NAME (ROAD, MILEPOST, HOUSE #) 4224	REFERENCE ROAD TYPE ²					
3 1-INTERSECTION 0 1 02-FOUR-WAY INTERSECTION 07-ON FAMP 12-	RAILWAY GRADE CROSSING SHARED-USE PATHS OR TRAILS UNKNOWN DIFFERENCE ON RELATED DIFFERENCE ON TRAILS UNKNOWN LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWY 5 - ON GORE 2 - ON SHOULDER 6 - OUTSIDE TRAFFIC 3 - IN MEDIAN 9 - UNKNOWN 4 - ON ROADSIDE	DWAY					
ROAD CONTOUR 1 - STRAIGHT LEVEL 4 - CURVE GRADE 2 - STRAIGHT GRADE 9 - UNKNOWN 3 - CURVE LEVEL ROAD CONTOURS PRIMARY PRIMARY SECONDARY 02 - W 03 - SN 04 - IC	ET 06 - WATER (STANDING, MOVING) 10 - OTHER OW 07 - SLUSH 99 - UNIKNOWN	CONDITION ONLY					
MANNER OF CRASH COLUSION/MPACT 1. HOT COLUSION BETWEEN 2. REAR-END 5. BACKING 8. SIDESWIPE, OPPOSITE TY/O MOTOR VEHICLES 3. HEAD-ON 6. ANGLE DIRECTION 1. HOT RANSPORT 4. REAR-TO REAR 7. SIDESWIPE, SAME DIRECTION 9. UNKNOWN WEATHER 1. CLEAR 4. RAIN 7. SEVERE CROSSWINDS 2. CLOUDY 5. SLEET, HAIL 8. BLOWING SAND, SOIL, DIRT, SNOW 9. OTHERAINKNOWN							
ROAD SURFACE 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS. ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, 5 - DIRT 5 - DIRT 4 - SLAG, GRAVEL, 5 - PRIMARY 5 - DIRT 3 - DUSK 4 - DARK - LIGHT 5 - DRIMARY 5 - DRIMARY 4 - DARK - LIGHT 5 - DRIMARY 5 - DRIMARY 4 - DARK - LIGHT 5 - DRIMARY 5 - DRIMARY 4 - DARK - LIGHT 5 - DRIMARY 5 - DRIMARY 6 - DRIMARY 6 - DRIMARY 7 - DAYLIGHT 7 - DAY	7-GLARE* RELATED YES, SC						
WORKERS PRESENT WORK LAW ENFORCEMENT PRESENT YPE OF WORK ZONE 1- LANE CLOSURE 1- LANE CLOSURE 2- LANE SHIFT/CROSSOVER 5- OTHER LAW ENFORCEMENT PRESENT WORK ON SHOULDER OR MEDIAN WHITE CLOSURE 3- WORK ON SHOULDER OR MEDIAN WHITE CLOSURE 3- WORK ON SHOULDER OR MEDIAN	LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE FIRST WORK ZONE WARNING SIGN 4 - ACTIVITY 2 - ADVANCE WARNING AREA 5 - TERMINAT 3 - TRANSITION 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.							
21W 87E							
REPORT TAKEN BY SUPPLEMENT (CORRECTION OR ADDITION TO		 _ _ 1					
DATE GIVEN THE GIVEN							
OFFICER'S NAME -	OFFICER'S BADGE NUMBER CHECKED BY Pag	ge 1 of 4					
McWhorter, Brian - LP	1 L 3 2 GAG200						

OHIO STANSON UNIT						ORT NUMBER 11 8 0 3 0 6 0 0 1 0	0,7,2,	
UNIT NUMBER OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE NUMBER - INC. AREA CODE (OWNER PHONE NUMBER - INC. AREA CODE (OWNER ADDRESS: CITY, STATE, ZIP (SAME AS DRIVER)								
8835 Clearcreek RD, Sprin		HIGLE IDENTIFICATION NUMBER			#OCCUI	PANTS 2 - MINOR		
1		9 6 3 0	1 3 - FUNCTIONAL 08 11 10	04				
2 0 0 5	DODG	Grand	Caravan		GRY	4 - DISABLING 07 06		
PROOF OF INSURANCE COMPANY HOME-	owners Ins Co	POLICY NUMBER 4837441801 Fugat			Fugates	9 - UNKNOWN REA	R	
CARRIER NAME, ADDRESS, CITY, STATE, ZIP						CARRIER PHONE-INCLUDE AREA CODE		
HM PLAGARD IO No.	IGIIT GWWR/GCWR ESS THAN OR EQUAL TO 10K LBS. 0,001 TO 26,000 LBS. AORE THAN 26,000 LBS. ZARDOUS MATERIAL EASED	GO BODY TYPE 01 - NO CARGO BODY 02 - BUSKNAN (9-16 SEA 03 - BUS (16+ SEATS, II) 04 - VEHICLE TOWNIG 05 - LOGGING 06 - INTERMODAL COI 07 - CARGO VAVIENCIL 08 - GRAIN, CHIPS, GR	IC DRIVER) ANOTHER VEHICLE YTAINER CHASSIS OSED BOX	09 - POLE 10 - CARGO TA 11 - FŁAT BEG 12 - DUMP 13 - CONCRET 14 - AUTO TRAI 15 - GARBAGE 99 - OTHERUK	TE MIXER NSPORTER 5-C	Y DESCRIPTION TWO-WAY, NOT DIVIDED TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LAI TWO-WAY, DIVIDED, UNFROTECTED (PAINTED OR GRAS TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER ONE-WAY TRAFFICWAY		
NON-MOTORIST LOCATION PRIOR TO IMPACT 01 - INTERSECTION - MARKED 02 - INTERSECTION - NO CROS 03 - INTERSECTION - OTHER 04 - MIDBLOCK - MARKED CRC 05 - TRAVEL LANIE - OTHER LO 06 - BICYCLE LANIE 07 - SHOULDER/ROADSIDE 08 - SICEWALK 09 - MEDIANICROSSING ISLAN 10 - DRIVEWAY ACCESS 11 - SHARED LISE PATH OR TI 12 - NON-TRAFFICWAY AREA 99 - OTHERSULKNOWN	CROSSWALK SWALK 1 - PERSONAL CATION 2 - COMMERCIAL 3 - GOVERNMENT ID IN EMERGENCY	01 - SUB-COM 99 - UNKNOWN 99 - UNKNOWN 03 - MID SIZE 05 - MINIVAN 06 - SPORT UT 07 - PICKUP 08 - VAN 09 - MOTORCY 10 - MOTORIZI 11 - SNOWMC	TILITY VEHICLE TOLE ED BICYCLE	13 - SIN 14 - SIN 15 - SIN 16 - TRI 17 - TRI 18 - TRI 19 - TRI	ANY TRUCKS OR COMBO UNICLE UNIT TRUCK OR VANICLE UNIT TRUCK; 3+A-XINCLE UNIT TRUCK/TRAIL UNIT TRUCK/TRAILER ACTOR/JEMIL TRAILER ACTOR/JEMIL FACTOR/JEMIL FACTOR/J	1 - DUSANAN (9-16 SEATS, INC 12 - BUS (16+ SEATS, INC DRIV LER	DRIVER) ER)	
SPECIAL FUNCTION 01 - NONE 02 - TAXI 03 - RENTAL TRUCK (OVE 04 - BUS - SCHOOL (PUBLIC 05 - BUS - TAXNSIT 06 - BUS - CHARTER 07 - BUS - SHUTTLE 08 - BUS - OTHER			0 2	T U4 - RIGHT	FRONT 10 - TOP AND SIDE 11 - UNDERCO REAR 12 - LOAD/T CENTER 13 - TOTAL (A	RONT 3S D WINDOWS CARRINGE 4S FALLER 5S ALLAREAS) 9U	on-contact on-collision triking truck triking/struck nknown	
PRE-CRASH ACTIONS MOTORIST 01 - STRAUGHT A HEAD 07 - MAKING U-TURN 13 - NEGOTIATING A CURVE 15 - ENTERING OR CROSSING SPECIFIED LOCATION 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING 17 - WORKING 03 - CHANGING LANES 04 - OVERTAKING/PASSING 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 05 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 19 - APPROACHING OR LEAVING VEHICLE 20 - STANDING								
CONTRIBUTING CIRCUMSTANCES PRIMARY MOTORIST 01 - NONE 02 - FAILURE TO 03 - RAN RED LI 04 - RAN STOP S SECONDARY 05 - EXCEEDED 2 06 - UNSAFE SPI 07 - IMPROPER T 08 - LEFT OF CEI 99 - UNKNOWN 09 - FOLLOWED 1 10 - IMPROPER LI (PASSING/O	GIT 13 - STOPPEI IGN 14 - OPERAT SPEED 16 - WRONG URN 17 - FAILURE ITER 18 - VISION C TOO CLOSELYIACDA 19 - OPERAT ANE CHANGE 20 - LOAD SI	ER BACKING ER START FROM PARKED POSITIO D OR PARKED ILLEGALLY ING VEHICLE IN NEGLIGENT MAN GO TO AVOID (DUE TO EXTERNAL C SIDEAWRONG WAY TO CONTROL BISTRUCTION ING DEFECTIVE EQUIPMENT HIS TINGSFALLING'SPILLING MPROPER ACTION	22 N 23 INER 24 INER 25 INER 25 INER 26 INER 26 INDER	6 - FAILURE TO YIE 7 - NOT VISIBLE (D 8 - INATTENTIVE	ILLEGALLY IN ROADWAY ELD RIGHT OF WAY)ARK CLOTHING) SECER SECER OF THE ROAD	VEHICLE DEFECTS 01 - TURN SIGNALS 02 - HEAD LAMPS 03 - TAIL LAMPS 04 - BRAKES 05 - STEERING 08 - TIRE BLOWOUT 07 - WORN OR SLICK T 09 - TITALLER EQUIPME 09 - MOTOR TROUBLE 10 - DISABLED FROM P 11 - OTHER DEFECTS	NT DEFECTIVE	
SEQUENCE OF EVENTS 1 0 8 2 4 4 3 4 5 6 6 01 - OVERTURINFOLLOVER 06 - EQUIPMENT FAILURE 10 - CROSS MEDIAN 02 - FIREAEXPLOSION (QLOYNTIRE, BRAKE FAILURE, ETC) 11 - CROSS CENTER LINE 07-OFOSITE DIRECTION OF TRAVEL FIRST 2 HARMFUL 2 99 - UNKNOWN 99 - UNKNOWN 06 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY 05 - CARGO//EQUIPMENT LOSS OR SHIFT 99 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION								
COLLISION WITH PERSON. VEHICLE OR OBJ 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE (TRAIN, ENGINE) 17 - ANIMAL - FARM 19 - ANIMAL - OLEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT	ECT NOT FIXED. 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE: 23 - STRUCK BY PALLING, SHIFTIN OR ANYTHING SET IN MOTION MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	26 - BRIDGE OVERS EQUIPMENT 27 - BRIDGE PIER IG CARGO 28 - BRIDGE PARAS	JUATOR/CRASH CUSHIO HEAD STRUCTURE OR ABUTMENT PET FACE END	34 - MEDIAN 35 - MEDIAN 36 - MEDIAN 37 - TRAFFIG 38 - OVERHI	CABLE BARRIER N GUARDRAIL BARRIER CONCRETE BARRIER N OTHER BARRIER C SIGN POST LEAD SIGN POST LUMINARIES SUPPORT Y POLE	41 - OTHER POST, POLE OR SUPPORT 49 - FIRE HYDR: 40 - CULVERT 50 - WORK ZON 43 - CURB 51 - WALL, BUIL 44 - DITCH 51 - WALL, BUIL 46 - FENGE 47 - MAILBOX	E MAINTENANCE F DING, TUNNEL	
UNIT SPEED POSTED SPEED 4 5 5 5 STATED STATED STIMATED	TRAFFIC CONTROL 11 - HO CONTROLS 12 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGNA 05 - TRAFFIC FLASH 06 - SCHOOL ZONE		RS 14 - WA 15 - OTI ARRIGADE 16 - NO OFFICER)	DSSWALK LINES LKÆDON'T WALK HER T REPORTED	UNIT DIRECTION FROM 2	TO 1 1. NORTH 5. NORTHEAST 2. SOUTH 8. NORTHWEST 3. FAST 7. SOUTHEAST 4. WEST 8. SOUTHWEST	9 - имкноwn age 2 of 4	

	OHIO MORANION SAFETY	OTORIST /	No	М-И	OTOR	ist / C	CCUPAN	T LOCAL REPORT N	18 ₁ 0 ₁ 3 ₁ 0 ₁	6 ₁ 0 ₁ 0 ₁ 1	101712
UNIT NUMBER NAME: LAST, FIRST, MIDDLE 0 1 Cope, William P							DATE OF BIRTH	MI	AGE	GENDER F - FEMALE M - MALE	
ADDRESS	ADDRESS, CITY, STATE, ZIP CONTACT PHONE-INCLUDE AREA CODE (0.27)7 AP. 4.204										
8835	Clearcreek R	D, Springboro, Oh	10 4506		EDICAL FACILITY IN	JURED TAKEN TO	SAFETY EQUIPMENT U	JSED DOT COMPLIE	ANT SEATING POSITIO	AIR BAG USAG	
2	2	MEDIC21	LCLAS\$		Atrium	ALCOHOL/DRUG SL	99	HELMET		UE DRUG YEST S	TATUS DRUG TEST TYPE
OLSTATE O H	PERATOR LIGENSI	RUMBER	— I₋	Linear III I	ND. 6	2	1	1	<u> </u>		ER DISTRACTED BY
4511.2	CHARGED (100)	al code)	1	: DESCRIPTION ration Wi	thout Rea	sonable Co	ntrol CITATION NUMBER	016817	HANDS Device USED	FFREE I	EXDISTRACTED BY
UNIT NUME	BER NAME: LAST, FI	RST, MIODLE						DATE OF BIRTH	11[]	AGE	F - FEMALE M - MALE
ADDRESS,	CITY, STATE, ZIP							Co	ONTACT PHONE- INCLUDE	EAREA CODE	
INJURIES	INJURED TAXEN BY	EMS AGENCY		M	EDIGAL FAGILITY II	JURED TAKEN TO	SAFETY EQUIPMENT	☐ MOTORCYCLE		N AIR BAG USAG	GE EJECTION TRAPPED
OL STATE	OPERATOR LIGENS	E NUMBER C	L CLASS	_NO _	CONDITION	ALCOHOL/DRUG SI	ISPECTED ALCOHOL TEST \$T.	ATUS ALCOHOL TEST TY	PE ALCOHOL TEST VA	LUE DRUG TEST S	STATUS ORUG YEST TYPE
OFFENSE	CHARGED (LOC	AL CODE)		VALID OL	ENO.		CITATION NUMBER			AS-LINE -	VER DISTRACTED BY
- Declaration							· UNKNOWN SAFETY EQUIPME	LAY	USEC		<u> </u>
2-P09	INJURY / NONE REPORT SSIBLE	TREATED AT SCENE	D/		ED - VEHICLE OGG	UPANT 05	- CHILD RESTRAINT SYSTEM - I - CHILD RESTRAINT SYSTEM - I	FORWARD FACING	NON-MOTORIST 09 - NONE USED 10 - HELMET USED	1:	2 - REFLECTIVE CLOTHING 3 - LIGHTING
3 - NON-RICAPACITATING 4 - INCAPACITATING 5 - PATAL 4 - OTHER 9 - UNKNOWN											
01 - FR	S POSITION ONT - LEFT SIDE (MOTO)	KCYCLE DRIVER)		HIRD - LEFT SIDE	E (MOTORCYCLE S)	DE CAR)	12 - PASSENGER IN UN 13 - TRAILING UNIT	NENCLOSED GARGO AREA		NIR BAG USAGE 1 - NOT DEPLOYE 2 - DEPLOYED FR	
03 - FR 04 - SE	ONT - MIDDLE ONT - RIGHT SIDE COND - LEFT SIDE (MOTO COND - MIDDLE	RCYCLE PASSENGER)	09 - T 10 - Si 11 - Pa	HIRD - RIGHT SI LEEPER SECTIO ASSENGER IN O	N OF CAB (TRUCK) THER ENCLOSED O		14 - RIDING ON VEHICL 15 - NON MOTORIST 16 - OTHER	E EXTERIOR (NON-TRAILL)	ig unit)	3 - DEPLOYED SI 4 - DEPLOYED BO 5 - NOT APPLICAL	OTH FRONT/SIDE BLE
EJECTI	COND -RIGHT SIDE ON T FJFGTED	rrapped	OPER/	ION-TRAILING UNI ATOR LICENSE LASS A	T SUCH AS A BUS, PK	K UP WITH CAP) CONDITION 1 - APPARENTLY F	99 - UNKNOWN	5-FELLASLEEP, FA		9 - DEPLOYMENT ALCOHOL/DRUG S 1 - NONE	
2 - TO1 3 - PAR	TALLY EJECTED STIALLY EJECTED TAPPLICABLE	2 - EXTRICATED BY MECHANICAL MEANS 3 - EXTRICATED BY	2-CI 3-CI 4-RE	LASS B LASS C EGULAR CLASS (2 - PHYSICAL IMP		6 - UNDER THE INFLI MEDICATIONS, DI 7 - OTHER	agraph (conservation on programmes)	2 - YES - ALCOHO 3 - YES - HBD NO 4 - YES - DRUGS 6 - YES - ALCOHO	OT IMPAIRED
19.550000000000000	DL TEST STATUS		5 - M LCOHOL TES 1 - NONE		JG TEST STATUS NONE GIVEN		DRUG TEST T	\$25.17 March 100 100 St. \$20 S	CTED BY		ER INSIDE THE VEHICLE
-2-TES 3-TES	NE GIVEN ST REFUSED ST GIVEN, CONTAMINAT ST GIVEN, RESULTS KN	ED SAMPLE/UNUSABLE DWN	2 - BLOOD 3 - URINE 4 - BREATH	2- 3 4	TEST REFUSED TEST GIVEN, CON TEST GIVEN, RES		2 : BLOOD JUNUSABLE 3 - URINE 4 - OTHER	20.00000 1000000000000000000000000000000	IC COMMUNICATION DE		ERNAL DISTRACTION
6 - TES	ST GIVEN, RESULTS UN	KHOWN FIRST, MIDDLE	5-ONER	5	TEST GIVEN, RES	ULTS UNKNOWN		DATE OF BIRTH	CTRONIC DEVICE N DEVICE; RADIO, DVD)	AGE	GENDER F-FEMALE
L ADDRES	S, CITY, STATE, ZIP								CONTACT PHONE: INCLU	DE AREA CODE	M - MALE
NUMBES	INJURED TAKEN BY	EMS AGENCY			MEDICAL FACILITY	INJUREO TAKEN TO	SAFEYY FQUIPMEN	IT USED BOT COME	PLIANT SEATING POSIT	ION AIR BAG US	AGE EJECTION TRAPPED
			3					MOTORCYC HELMET		100	TOENIGE9
UNIT NUMBER NAME: LASY, FIRST, MIDDLE DATE OF BIRTH AGE GENDER F - FEMALE M - MALE											
ADDRESS, CITY, STATE, ZIP CONTACT PHONE- INCLUDE AREA CODE											
NJURIES	S INJURED TAKEN B	Y EMS AGENCY			MEDICAL FACILIY	YINJURED TAKEN TO	SAFETY EQUIPMEN	T USED DOT COMI		TION AIR BAG US	SAGE EJECTION TRAPPED
								HELMET			Page 3 of 4

OHIO STATES TRAFFIC ACC	IDENT - DIAGRAM/NARRAT	IVE CONTINUATION	OH-2 (REV. 1/82)					
LOCAL REPORT LP18030600107 NUMBER	REPORTING AGENCY Clearcreek Twp. P	Police Department	DATE OF ACCIDENT 03/06/2018					
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.								