OHIO DEPARTMENT OF PUBLIC SAFETY	RAFFIC	CRASH	LOCAL REPORT NUMBER*									
CHIO DEMANTATERITY TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT OH-2 OH-3 LOCAL INFORMATION OH-3 LOCAL INFORMATION							L P 1 9 0 5 2 8 0 0 2 6 4 1					
PHOTOSTAKEN OH-1P OTHER REPORTING AGENCY NAME*						NCIC*	HIT/SKIP	NUMBER OF UNITS				
SECONDARY CRASH PRIVATE PROPERTY CLEARCREEK TWP PD					, 0,	8, 3, 1, 6	1 - SOLVED	1	0 1 1 98 - ANIMAL 99 - UNKNOWN			
	CITY	OCATION: CIT	Y, VILLAGE, TOWNSHIP*			CRASH DATE / TIM			RASH SEVERITY			
8 3 3 3 3	TOWNSHIP C	LEARCR	EEK				0,5,2,8,2,0,1,9	.16.2.21 3	1 - FATAL 2 - SERIOUS INJURY			
ROUTE TYPE ROUTE NU	UMBER PREFIX	2 - SOUTH	LOCATION ROAD NAME			ROAD TYPE	LATITUDE OF		SUSPECTED			
		3 - EAST 4 - WEST					3,9,5,4,9	8,6,1,	3 - MINOR INJURY SUSPECTED			
ROUTE TYPE ROUTE NU	JMBER PREFIX	(1 - NORTH 2 - SOUTH	REFERENCE ROAD NAME (R	HOUSE #)	ROAD TYPE	LONGITUDE or	ECIMAL DEGREES	4 - INJURY POSSIBLE				
		3 - EAST 4 - WEST	RED LION-5 POINT		R D	-8 4 2 1 0 3 2 7 5- PROPERTY DAM						
REFERENCE POINT 1 - INTERSECTION	DIRECTION SADM REFERENC	9	ROUTE TYPE		ROAD TYPE			INTERSECTION RELAT				
1 2 - MILE POST	1 - NO 2 - SO	NUTU	INTERSTATE ROUTE(TP) FEDERAL US ROUTE	AL - ALLEY AV - AVENUE		RD - ROAD SQ - SQUARE	WITHIN INTE	RSECTION OR ON APPR	0ACH			
3 - HOUSE #	4 - W	ASI	STATE ROUTE	BL - BOULEVARI		T - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES					
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEAS		NUMBERED COUNTY ROUTE		E - TERRACE		ROADWAY	THE THE PARTIES				
	1 - M. 2 - FE	ILES TR -	NUMBERED TOWNSHIP ROUTE		L - TRAIL VA - WAY							
HE - HEIGHTS PL - PLACE												
1 - ON ROADWAY	N OF FIRST HAR	MFUL EVENT CROSSOVER			SH COLLISION/IMPA	СТ	DIRECTION OF TRAVEL	L MEDI	AN TYPE			
0 1 2-ON SHOULDE	ER 10	DRIVEWAY/	ALLEY ACCESS 6	DETWICEM	5 - BACKING		1 - NORTH 2 - SOUTH		1 - DIVIDED FLUSH MEDIAN (< 4 FEET)			
3 - IN MEDIAN 4 - ON ROADSID		RAILWAY GI !-SHARED US	RADE CRUSSING	VEHICLES IN	6 - ANGLE 7 - SIDESWIPE, SAME	DIRECTION	3 - EAST		2 - DIVIDED FLUSH MEDIAN (≥4 FEET)			
5 - ON GORE	AFFICINAL 13	TRAILS -BIKE LANE		REAR-END	8 - SIDESWIPE, OPPO 9 - OTHER / UNKNOW	SITE DIRECTION	4 - WEST	4 - WEST 3 - DIVIDED, DE				
6 - OUTSIDE TRA 7 - ON RAMP	14	-TOLL BOOTH		4 - DIVIDED (ANY TY), RAISED MEDIAN PE)							
8-OFF RAMP	99	-OTHER/UNI	CNOWN					9 - 0THER/U	INKNOWN			
WORK ZONE RELATI	ED	1 1	WORK ZONE TYPE		ON OF CRASH (N WO		CONTOUR	CONDITIONS	SURFACE			
WORKERS PRESENT	Т		.ANE CLOSURE .ANE SHIFT/CROSSOVER	1	- BEFORE THE 1ST V WARNING SIGN	VORK ZONE	_2_	<u> </u>	2			
LAW ENFORCEMEN	TPRESENT		VORK ON SHOULDER OR MEDIAN	The second	- ADVANCE WARNIN - TRANSITION AREA			1 - DRY	1 - CONCRETE			
ACTIVE SCHOOL ZON	NE	4 - 1	NTERMITTENT OR MOVING W	VORK 4	- ACTIVITY AREA	i		2 - WET 3 - SNOW	2 - BLACKTOP, BITUMINOUS,			
		5-0	THER	5	- TERMINATION ARE	A		4 - ICE	ASPHALT			
LIGHT CO 1 - DAYLIGHT	DNDITION		WEA 1 - CLEAR	ATHER			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,			
1 2 - DAWN/DUSK			. O. 1. 2-CLOUDY		CROSSWINDS			OIL, GRAVEL 6 - WATER (STANDING.	STONE			
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED			3 - FOG, SMOG, SM 4 - RAIN		G SAND, SOIL, DIRT, NG RAIN OR FREEZIN			MOVING)	5 - DIRT 9 - OTHER/UNKNOWN			
5 - DARK - UNKNO	OWN ROADWAY		5 - SLEET, HAIL		/ UNKNOWN	VG DRIZZLE	I le	7 - SLUSH 9 - OTHER/UNKNOWN				
9 - OTHER / UNKN	.OWN											
NARRATIVE					NOT	TO		N	Indicate the north			
UNIT 1 WAS	TRAV	ELING	EASTBOUN	D ON	SCALE		1 11	1 47	an "N" on the compass diagram.			
W SR 73 AN	D UNI	Γ 2 W.A	AS TRAVELIN	IG	SCALL	•		0 11	······································			
			73. UNIT 1 FA						ion-5			
				AILED		0		Point	S KG			
TO YIELD TH					/2	>		{				
TURNED LE	FT ON	TO RE	D LION-5 PC	STAIC	19							
ROAD IN FR	ONTC	F UNI	T 2. UNIT 2									
			LLED SEVER	⊋ΔΙ				(a) (-				
TIMES.		ID INC	LLLD OLVLI			_ //) =					
TIVILS.						1i	X					
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					WSK	72						
					vv _ər	- 12		1 1 1				
CRASH REPORTED DAT	re/TIME	DI	SPATCH DATE / TIME	ARP	IVAL DATE / TIME		SCENE CLEARED DA	ATE/TIME I D	REPORT TAKEN BY			
0,5,2,8,2,0,1,9	1,6,2,2	0 5 2 8	2,0,1,9, 1,6,2,2	2 0.5.2.8	2,0,1,9, 1,6	5.2.5 n	5, 2, 8, 2, 0, 1, 9					
TOTAL TIME	OTHER	TOTAL	OFFICER'S NAME*			11-11-1	ER'S NAME*		MOTORIST			
OADWAY CLOSED INVEST	IGATION TIME	MINUTES	ERIC D NEY			JASO		S \square	SUPPLEMENT (CORRECTION OF ADDITION			
0 4 3 0	3 0	0.7.	OFFICER'S	*	Снескей ву	CHECKED BY OFFICER'S BADGE NUMBER*						
			_4 _ 1 _ 2	5		1 1	1 6 1	1	1			



L,P,1,9,0,5,2,8,0,0,2,6,4,1 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER DAMAGE 0 1 GARMAN, DONNA, J 9 3 7 5 1 0 8 7 8 6 DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 3 - FUNCTIONAL DAMAGE 1 - NONE 799 CLARERIDGE LANE, CENTERVILLE, OH 45458 ☐ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP 9 - UNKNOWN COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE O_H_FGJ4236 1, H, G, C, M, 5, 6, 3, 5, 7, A, 1, 2, 9, 1, 4, 6, 12 | 0 | 0 | 7 | HONDA 0 INSURANCE COMPANY
VERIFIED CSAA INSURANCE POLICY # VEHICLE MODEL COLOR OHSS203927464 RED ACCORD TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE SANDYS HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED INTERLOCK CLASS # PLACARD ID # 1 - <10K LBS: HIT/SKIP UNIT 2 - 10,001 - 26K LBS EQUIPPED ٥_ 1 PLACARD 3 - >26K LBS. 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 0 1 3-SPORT UTILITY VEHICLE 19-BUS (16+ PASSENGERS) 24 - WHEFT CHAIR (ANY TYPE) 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE 5 - CARGO VAN BICYCLE 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) ANIMAL-DRAWN VEHICLE 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / IJTV) # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED: I - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 2 I 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION **AUTONOMOUS** MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16-FARM 21 - MAIL CARRIER 0 1 2 - TAXI 7 - RUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBILLANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 12 - CONCRETE MIXER 0.1 / NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK CARGO 2-BUS 13-AUTO TRANSPORTER 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 4 - LOGGING 14 - GARBAGE/REFUSE BODY 0 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99 - OTHER / UNKNOWN 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR DEFECTIVE **DEFECTS 3 - TAIL LAMPS** 6 - TIRE BLOWOUT ACCIDENT - NO DAMAGE [0] - undercarriage [14] 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE **□-TOP** | 13 | 10 - DRIVEWAY ACCESS □-ALL AREAS | 15 | NON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99 - OTHER / UNKNOWN 8 - SIDEWALK 11 - SHAREO USE PATHS OR LOCATION CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION - UNIT NOT AT SCENE | 16 | TRAILS 1-NON-CONTACT 1 - STRAIGHT AHEAD 13 - NEGOTIATING A CURVE 7 - MAKING U-TURN 18 - APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2-NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14-ENTERING OR CROSSING 0 6 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE 3-STRIKING SPECIFIED LOCATION 19-STANDING 9 - LEAVING TRAFFIC LANE 0 1 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10 - PARKED DIAGRAM 5- BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 99 - UNKNOWN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13 - TOP 16 - WORKING DISABLED VEHICLE & STRUCK 6 - MAKING LEFT TURN INTRAFFIC 17 - PUSHING VEHICLE 9 - OTHER / UNKNOWN 12 - DRIVERLESS 99 - OTHER / UNKNOWN TRAFFIC 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD 18-OPERATING DEFECTIVE 8 - FOLLOWING TOO CLOSE / ACDA 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED EQUIPMENT 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 2 - TW0-WAY 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 19 - LOAD SHIFTING/FALLING/ 4 - RAN STOP SIGN ROADINAY 10 - IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID SPILLING 99 - OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING 6 - IMPROPERTURN 12 - IMPROPER BACKING # of THROUGH LANES RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING _ 2 NON-COLLISION 1 2 0 1 - OVERTURN/ROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAIL WAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT OPPOSITE DIRECTION OF 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM TRAVEL 23 - STRUCK BY FALLING UNIT / NON-MOTORIST DIRECTION 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 19-ANIMAL - OTHER 1 - NORTH 5 - NORTHFAST L 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13-OTHER NON-COLLISION 2 - SOUTH 6 - NORTHWEST 5 - CARGO / EQUIPMENT 20 - MOTOR VEHICLE IN 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14 - PEDESTRIAN TRANSPORT 4 TO 1 3 - EAST 7 - SOUTHEAST LOSS OR SHIFT 24 - OTHER MOVABLE OBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE / CRASH CUSHION 32 - PORTABLE BARRIER EQUIPMENT 38 - OVERHEAD SIGN POST 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51 - WALL 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES 45 - EMBANKMENT STRUCTURE 1 - STATED / ESTIMATED SPEED 34 - MEDIAN GUARDRAIL SUPPORT 52 - BUILDING 46-FENCE , 0 , 1 , 5 , 27 - BRIDGE PIER OR ABUTMENT BARRIER 40 - UTILITY POLE 53 - TUNNEL 2 - CALCULATED / EDR 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OBJECT 48 - TREE 29 - BRIDGE RAIL 3 - UNDETERMINED POSTED SPEED BARRIER OR SUPPORT 99 - OTHER / UNKNOWN 49-FIRE HYDRANT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 5 0 1 MOST HARMFUL EVENT J FIRST HARMFUL EVENT

LOCAL REPORT NUMBER



L,P,1,9,0,5,2,8,0,0,2,6,4,1 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER DAMAGE 0, 2, H&R CONCRETE INC 9 3 7 8 8 5 2 9 1 0 DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (| SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 9120 N SR 48, CENTERVILLE, OH 45458 ☐ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE# VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE O H PKK5052 3, G, N, E, K, 1, 3, T, 3, 2, G, 2, 1, 4, 9, 3, 5, 2,0,0,2 CHEVROLET INSURANCE COMPANY
VERIFIED EMASCO INSURANCE POLICY # COLOR VEHICLE MODEL 5N46358 RED **AVALANCHE** TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE SANDYS 1 1 1 HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK DEVICE EQUIPPED MATERIAL CLASS # PLACARD ID # 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. HIT/SKIP UNIT , 0 , 1 , PLACARD 3 - >26K LBS. 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18-LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 0 4 3- SPORT UTILITY VEHICLE 9- AUTOCYCLE 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 14 - SINGLE UNITTRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE 5 - CARGO VAN BICYCLE 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) ANIMAL-DRAWN VEHICLE 17 - MOTORKOME 99 - UNKNOWN OR HIT/SKIP (ATV / UTV) __ # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED: 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 2 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - 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BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER CROSSWALK 4 - MIDBLOCK - MARKED 10 - DRIVEWAY ACCESS AT INCIDENT SCENE 7 - SHOULDER / ROADSIDE ☐ -TOP L 13 J ALL AREAS [15] NON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99 - OTHER / UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS - UNIT NOT AT SCENE [16] 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT 2-NON-COLLISION OR LEAVING VEHICLE 2 - BACKING B - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING O 1 3 - CHANGING LANES 3 0 - NO DAMAGE 14 - UNDERCARRIAGE → 3 - STRIKING 19-STANDING SPECIFIED LOCATION 9 - LEAVING TRAFFIC LANE 1 1 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 15 - WALKING, RUNNING, PRE-CRASH 4 - OVERTAKING/PASSING ACTION 4 STRUCK 10 - PARKED 20 - OTHER NON-MOTORIST DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 21 - STANDING DUTSINE 99 - UNKNOWN 11 - SLOWING OR STOPPED 13 - TOP 16 - WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 9 - OTHER / UNKNOWN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 12 - DRIVERLESS TRAFFIC 1 - NONE 13 - IMPROPER START FROM A 7 - LEFT OF CENTER 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD 8-FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED O 1 3 - RAN RED LIGHT EQUIPMENT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 2 - TWO-WAY 2 3-FLASHER 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 2 19-LOAD SHIFTING/FALLING/ 4 - RAN STOP SIGN RNADWAY 10 - IM PROPER PASSING CONTRIBUTING CIRCUMSTANCES 5 - UNSAFE SPEED 15 - SWERVING TO AVOID 6 - NO CONTROL SPILLING 11 - DROVE OFF ROAD 99 - OTHER IMPROPER ACTION 16 - WRONG WAY 20 - IMPROPER CROSSING 6 - IMPROPERTURN # of THROUGH LANES 12 - IMPROPER BACKING RAIL GRADE CROSSING ON ROAD 1 - NOT ENVOLVED SEQUENCE OF EVENTS _2 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 3 - INVOLVED-PASSIVE CROSSING 2 0 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 11 - CROSS CENTERLINE -6 - EQUIPMENT FAILURE 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF EQUIPMENT 7 - SEPARATION OF UNITS 17 - ANIMAL — FARM TRAVEL 23 - STRUCK BY FALLING, UNIT / NON-MOTORIST DIRECTION 3 - IMMERSION 18 - ANIMAL -- DEFR 8 - RAN OFF ROAD RIGHT 0 8 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST ☐ 4 - JACKKNIFE 19-ANIMAL - OTHER 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13 - OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - NORTHWEST 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14 - PEDESTRIAN TRANSPORT 3 _{T0} <u>4</u> LOSS OR SHIFT , 0 , 1 , 3 - EAST 7 - SOUTHEAST 24 - OTHER MOVARI F OBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 4 4 25-IMPACT ATTENUATOR 9 - OTHER / UNKNOWN 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CUR8 50 - WORK ZONE MAINTENANCE / CRASH CUSHION 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH EQUIPMENT UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51 - WALL 33 - MEDIAN CARLE BARRIER 39 - LIGHT / LUMINARIES 45 - EMBANKMENT STRUCTURE 1 - STATED / ESTIMATED SPEED SUPPORT 34 - MEDIAN GUARDRAIL 46-FENCE 52 - BUILDING 0 4 5, 27 - BRIDGE PIER OR ABUTMENT BARRIER 40 - UTILITY POLE 2 - CALCULATED/EDR 53 - TUNNEL 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OBJECT 48-TREE 3 - UNDETERMINED J 29 - BRIDGE RAIL POSTED SPEED BARRIER OR SUPPORT 99 - OTHER / UNKNOWN 49 - FIRE HYDRANT 36 - MEDIAN OTHER BARRIER 30 - GUARDRAIL FACE 42 - CULVERT 5 5 5 3 MOST HARMFUL EVENT J F1RST HARMFUL EVENT □

LOCAL REPORT NUMBER

OF PUBLIC SAFETY MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER								
	Similar Minima M							L,P,1,9,0,5,2,8,0,0,2,6,4,1							
UNIT#	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER							
0 1	1							0,9,/,1,6,/,1,9,3,6,8,2,F							
ADDRESS	DDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
799 CI	9 CLARERIDGE LANE, CENTERVILLE, OH 45458									3 7 5 1					
INJURIES 5	RIES INJURED EMS AGENCY (NAME) TAKEN BY				TAKENTO	O: MEDICAL FACILITY	(NAME, CITY	USED	DOT-COMPLIANT			E EJECTION	TRAPPED		
OL STATE		I ICENSE NUMBED		OCCC	NEE CHA	DCCD	10041	0 4		ELMET 0 1	1	_ 1			
ADDRESS 799 CL INJURIES 5 OL STATE OL H					OFFENSE CHARGED LOCAL CODE				OFFENSE DESCRIPTION FAIL TO YIELD - LEFT TURN			CITATION NUMBER 017463			
OL CLASS	ENDORSEMEN	T RESTRICTION SELEC	т ирто з	RIVER				CONDITION		COHOLTEST	DRUG TEST(S)				
	SELECT UPTO 2		D	ISTRACTED Y	STRACTED				STATUS	TYPE VALUE	STATUS TYP		T SELECT UPTO 4		
4		0 3		1	1 OTHER DRUG			1	1	1	_1	1			
UNIT#		, FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER		
0 2		, EDWARD, L							1,0	/ 0 5 / 1	9 6 2	5 6	M		
2	: STREET, CITY, S								CONTACT	PHONE - INCLUDE AREA C	DDE				
Θ		COURT, FRANKLIN,	OH 45	_					9 3 7 6 0 4 2 1 4 4						
INJURIES 4	TAKEN	EMS AGENCY (NAME) MEDIC 22				: MEDICAL FACILITY IG ER-FRANK		HEED	- DAT C		AIR BAG USAGE EJECTION TRAPPED				
OL STATE		LICENSE NUMBER						0 4	MC HE	LMET 0 1	1	_ 1	1		
O H	RT16195			OFFEN	ISE CHAI	KGED	CODE	OFFENSE DESC	RIPTION		CITATION NUMBER				
OL CLASS					VER ALCOHOL / DRUG SUSPECTED			CONDITION	I AI	COHOL TEST	DRUG TEST(S)				
ST STAGE	SELECT UP TO 2			ISTRACTED Y			-	CONDITION			STATUS TYPE RESULT SELECT UPTO				
_ 1				1	0	THER DRUG		1	1	1	1 1	Later	A A 1		
UNIT#	NAME: LAST,	FIRST, MIDDLE							DATE OF BIRTH AGE GENDE						
									C E E						
ADDRESS:	STREET, CITY, S	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
0.00															
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED	JURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-CO	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
OL STATE	OPERATOR LICENSE NUMBER			05551	OFFENSE CHARGED LOCAL					LMET	<u> </u>	_			
ORIS OF SIKIE	UPERATUR	LICENSE NUMBER		OFFENSE CHARGED LOCAL C			OFFENSE DESC	RIPTION		CITATION	NUMBER				
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	иртоз В	RIVER	ALCO	OHOL / DRUG SUSPE	CTED	CONDITION	AL	COHOL TEST	DRU	UG TEST(S	1		
	SELECT UPTO 2			STRACTED Y		LCOHOL MAR		- CONSTITUTE	STATUS T		STATUS TYP	E RESULT	SELECT UPTO 4		
					07	THER DRUG							اسالا		
INJU 1-FATAL	RIES	SEATING POSITION 1-FRONT-LEFT SIDE	1 - NOT DE	AIR BAG		OL CLASS 1 - CLASS A	5	OL RESTRIC 1-ALCOHOL INTER	MANAGE	DRIVER DISTRACT 1-NOT DISTRACTED	113	TEST STA	TUS		
	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOYED FROM					2 - CDL INTRASTAT		2 - MANUALLY OPERATING	AN 2-TE				
3-SUSPECTED I		2 - FRONT - MIDDLE 3 - DEPLOYE 3 - FRONT - RIGHT SIDE 4 - DEPLOYE						3 - CORRECTIVE LENSES		ELECTRONIC COMMUNI DEVICE (TEXTING, TYPI	D-10	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE			
	5-NO APPARENT INJURY 4- SECOND - LEFT S.		5 - NOT APPLICABLE			4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLASS A	A BUS	DIALING) 3 - TALKING ON HANDS-FREE		4 - TEST GIVEN, RESULTS KNOWN			
INJURED	(MOTORCYCLE PASSENGER) JURED TAKEN BY 5-SECOND - MIDDLE		9 - DEPLOYMENT UNKNOWN 5 - M/C MOPED ONLY 6 - NO VALID OL			6 - EXCEPT CLASS A & CLASS B BUS	4	COMMUNICATION DEVI	CE 5-TE	ST GIVEN, RES NKNOWN	ULTS				
1 - NOT TRANSPO	TRANSPORTED 6 - SECOND - RIGHT SIDE					7 - EXCEPT TRACTO	R-TRAILER	4 - TALKING ON HAND-HEL COMMUNICATION DEVI	CF	COHOL TES	TTYPE				
2 - EMS	S (MOTORCYCLE SIDE CAR)		EJECTION OL ENDORSEMENT 1-NOT EJECTED H-HAZMAT			AENI	8-INTERMEDIATE LICENSE RESTRICTIONS		5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		1 - NONE				
3 - POLICE	O THIRD DICHT CIDE		2 - PARTIALLY EJECTED M - MOTORCYCLE					9 - LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER		2 - BLOOD 3 - URINE			
9-UTHER/UNK	10 - SLEEPER SECTION		3-TOTALLY EJECTED P - PASSENGE 4-NOT APPLICABLE N - TANKER					10 - LIMITED TO DAYLIGHT ONLY		7 - OTHER DISTRACTION Inside the Vehicle		4 - BREATH			
1 - NONE USED	SAFETY EQUIPMENT OF IRUCK CAB			Q - MOTOR SCOOTER				11 - LIMITED TO EMPLOYMENT		8 - OTHER DISTRACTION OF THE VEHICLE	JTSIDE 5-OT	5- OTHER			
2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS,		TRAPPED R-THREE-WHEEL MOTORCYCI 1-NOTTRAPPED S-SCHOOL BUS			TORCYCLE	12 - LIMITED - OTHER 13 - MECHANICAL DEVICES		9 - OTHER / UNKNOWN		DRUG TEST TYPE					
3 - LAP BELT ONLY USED		PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	CATED BY				(SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION		1 - NONE 2 - BLOOD				
4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM –		CARGO AREA	ВҮ	Y - TANKER / HAZMAT			ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY		1 - APPARENTLY NORMAL	3 - UR	3 - URINE				
FORWARD FACING		13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	ECHANICAL M	HANICAL MEANS			15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED,		4 - OTHER				
6 - CHILD RESTRAINT SYSTEM - REAR FACING		(NON-TRAILING UNIT)					AIR BRAKES 16 - OUTSIDE MIRROR		ANGRY, DISTURBED)		DRUG TEST RESULT(S)				
7 - BOOSTER SEA 8 - HELMET USE		15 - NON-MOTORIST 99 - OTHER / UNKNOWN						17 - PROSTHETIC AID		4- ILLNESS 5- FELL ASLEEP, FAINTED,		1-AMPHETAMINES 2-BARBITURATES			
9 - PROTECTIVE I	PADS USED	USED						18-OTHER		FATIGUED, ETC. 6- UNDER THE INFLUENCE	3 - 8E	3 - BENZODIAZEPINES			
(ELBOW, KNEES, ETC.) O - REFLECTIVE CLOTHING										OF MEDICATIONS / DRUG	S 4-CA	4 - CANNABINDIDS 5 - COCAINE			
11 - LIGHTING - PI	EDESTRIAN									9- OTHER/UNKNOWN	6 - OP	6 - OPIATES / OPIOIDS			
/ BICYCLE ONLY 99 - OTHER / UNKNOWN											7 - OT 8 - NE	HER GATIVE RESUL	TS.		

OF PURICE SAFETY OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER							
- TITINESS ADDENOUS							L P 1 9	0 5 2	8 0 0	2 6	4 1			
UNIT	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDE						
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE							
ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
E THE ST	en Thumen	I made a							1_1_		1-1			
INJURI	ES INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAĞ USAGE	EJECTION	TRAPPED			
UNIT	NAME: LA	ST, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER			
							v v v v v							
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
ADDRESS: STREET, CITY, STATE, ZIP														
INJURIE	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facil	SAFETY EQUIPMENT USED	MC HELMET			EJECTION	TRAPPED				
UNIT	NAME: LAS	ST, FIRST, MIDDLE						E OF BIRTH		AGE	GENDER			
ADDRE:	SS: STREET, CITY	, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE							
ADDRE							AT 19 19 19 19 10 10 10 10 10 10 10 10 10 10 10 10 10							
INJURIE		EMS AGENCY (NAME)	INJURED TAKEN TO: Medical Facility (NAME,			SAFETY EQUIPMENT	207.0	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
	TAKEN BY					USED	DOT-COMPLIANT MC HELMET							
UNIT #	NAME: LAS	ME: LAST, FIRST, MIDDLE						E OF BIRTH		AGE	GENDER			
ADDECS VESS VIVIANA IN														
Addres	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
	o Indiana	T =					0 3 3	1 1 2		- 1	1 1			
INJURIE	S INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIP			DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
	TNU	JRIES	CAFETY	COULDMENT HEED		CE A TIMO DO O								
1 - FA		KILS	1 - NONE US	EQUIPMENT USED		SEATING POS	ITTON		AIR BAG U	SAGE				
		RIOUS INJURY		ED - 1 - FRONT – LEFT SIDE OCCUPANT (MOTORCYCLE DRIV			1 - NOT DEPLOYED (ER) 2 DEPLOYED EBONT							
		NOR INJURY	2 - SHOULDE	2 - SHOULDER BELT ONLY USED 2 - FRONT - MIDDLE				2 - DEPLOYED FRONT 3 - DEPLOYED SIDE						
	SSIBLE INJU		3 - LAP BELT	T ONLY USED 3 - FRONT - RIGHT SID			•							
			4 - SHOULDE	R & LAP BELT USED	ND – LEFT SIDE ORCYCLE PASS		FRONT/SIDE							
				STRAINT SYSTEM -		ND – MIDDLE		5 - NOT APPLICABLE						
1 NO				FORWARD FACING 6 - 9 6 - CHILD RESTRAINT SYSTEM - 7 - 1			Œ	9 - DEPLOYMENT UNKNOWN						
1 - NOTTRANSPORTED /TREATED AT SCENE			REAR FAC			D – LEFT SIDE DRCYCLE SIDE	CAR) EJE		EJECTIO	CTION				
2 - EMS			7 - BOOSTER	SEAT		O – MIDDLE		1 - NOT EJI						
3 - POLICE 8-			8 - HELMET	USED) – RIGHT SIDE			TALLY EJECTED					
9 - OTHER / UNKNOWN 9 - P				IVE PADS USED		ENGER IN OTH		3 - TOTALL	3 - TOTALLY EJECTED					
				(NEES, ETC.)	CARG	O AREA (NON-TR	AILING UNIT,	4 - NOT APPLICABLE						
			IVE CLOTHING	ICK-UP WITH CAP ENGER IN UNEI		TRAPPED								
11 - LIGHTIN / BICYCL			i – PEDESTRIAN : ONLY	OAREA		1 - NOTTRAPPED								
			99 - OTHER / U		RAILING UNIT IDING ON VEHICLE EXTERIOR		2 - EXTRICATED BY MECHANICAL			AL				
				TRAILING UNIT)		MEANS								
					15 - NON-N 99 - OTHE	MOTORIST R / UNKNOWN	3 - FREED BY NON-MECHANICA MEANS			\L				
NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER						
BROWN, STEPHEN, NATHANIEL							0 2 / 1 5 / 1 9 7 5 4 4 M							
ADDRESS: STREET, CITY, STATE, ZIP 7104 COPPERWOOD COLIDET SPRINGRODO OH 45066							CONTACT PHONE - INCLUDE AREA CODE							
7104 COPPERWOOD COURT, SPRINGBORO, OH 45066 NAME: LAST, FIRST, MIDDLE							9 3 7 3 2 1 7 9 1 5							
BLACK, MARVIN, WARREN							DATE OF BIRTH AGE GENDER 1 0 / 2 3 / 1 9 7 9 3 9 M							
ADDRESS: STREET, CITY, STATE, ZIP 147 DIAMOND DRIVE, DAYTON, OH 45458							CONTACT PHONE - INCLUDE AREA CODE 8 5 9 6 1 9 2 4 7 3							
NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER							
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							