TRAFFIC CRASH REPORT	LOCAL REPORT NUMBER		CRASH SEVERITY HIT/SKIP		
ECCENTION - BERIOLE - PROTECTION LOCAL INFORMATION	L <sub>1</sub> P <sub>1</sub> 1 <sub>1</sub> 7 <sub>1</sub>	0 <sub>1</sub> 9 <sub>1</sub> 0 <sub>1</sub> 1 <sub>1</sub> 0 <sub>1</sub> 0 <sub>1</sub> 4 <sub>1</sub> 1 <sub>1</sub>	0 6 3 1 - FATAL 2 - INJURY 3 - PDO 1 - SOLVED		
□ PHOTOSTAKEN     □ OH-2 □ OH-1P     □ OH-2 □ OH-1P □ ODLARAMOUNT     □ OH-3 □ OTHER     □ OH-3 □ OTHER     □ OH-3 □ OTHER     □ OH-3 □ OTHER     □ PROVATE PROPERTY     □ PROVATE PROPERTY     □ OH-8 □ 3 □ 1 □ 6 □ Clearcreek Twy	D. Police Departmen	t LO	NUMBER OF UNIT IN ERROR UNITS 99 - ANIMAL 99 - UNIKNOWN		
COUNTY* CITY, VILLAGE, TOWNSHIP*    8   3     VILLAGE*   CITY, VILLAGE, TOWNSHIP*    CITY   CITY, VILLAGE, TOWNSHIP*    CITY   CITY   CITY, VILLAGE, TOWNSHIP*   CITY   CITY   CITY, VILLAGE, TOWNSHIP*		CRASH DATE*	7 DAY OF WEEK FIRIT		
DEGREES / MINUTES / SECONDS LATITUDE O / // LONGITUDE O /	DECIMAL DEGREES LATITUDE	•	LONGITUDE		
	3 3 9 . 4	8 8 2 2 2 -	18 <sub>1</sub> 4 <sub>1</sub> 12 <sub>1</sub> 2 <sub>1</sub> 5 <sub>1</sub> 5 <sub>1</sub> 0 <sub>1</sub> 8 <sub>1</sub>		
DIVIDED  N. NORTHBOUND E-EASTBOUND S-SOUTHBOUND W-WESTBOUND  O 2  AL-7  AV-A  BL-E	OTYPES OR MILEPOST 2  LLEY CR - CIRCLE  VENUE CT - COURT  JOULEVARD DR - DRIVE	HW-HIGHWAY PK-PARKWAY F LA-LANE PI - PIKE S	PL - PLACE ST - STREET WA - WAY RO - ROAD TE - TERRACE RO - SQUARE TL - TRAIL		
LOCATION ROUTE NUMBER LOC PREFIX LOCATION ROAD NAME  ROUTE NVFE1 LOCATION ROAD NAME  ROUTE NVFE1 LOCATION ROAD NAME  Hart	R D	LOCATION ROAD IR -INTERSTATE ROUTE (IN US - US ROUTE SR - STATE ROUTE	C. TURNIPIKE) CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE		
	FIX REFERENCE NAME (ROAD, N., s., 122	MLEPOST, HOUSE #)	H W REFERENCE ROAD TYPE 2		
1 1 2-MILE POST	11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAILS 99 - UNKNOWN	INTERSECTION	ON OF FIRST HARMFUL EVENT  1 - ON ROADWAY  5 - ON GORE  2 - ON SHOULDER  6 - OUTSIDE TRAFFICWAY  3 - IN MEDIAN  9 - UNKNOWN  4 - ON ROADSIDE		
1 - STRAIGHT LEVEL 4 - CURVE GRADE PRIMARY SECONDARY 02 -	DRY 05 - SAND, MUD, D WET 06 - WATER (STANDI SNOW 07 - SLUSH ICE 08 - DEBRIS*		BUMPS, UNEVEN PAVEMENT *  *SECONDARY CONDITION ONLY		
MANNER OF CRASH COLLISION/IMPACT  1 - NOT COLLISION/IMPACT  TWO MOTOR VEHICLES 3 - HEAD-ON 6 - ANGLE DIRECTION  IN TRANSPORT 4 - REAR-TO-REAR 7 - SIDESWIPE, SAME DIRECTION 9 - UNKNOWN	4 2 - CLOUDY	5 - SLEET, HAIL 6	- SEVERE CROSSWINDS 1- BLOWING SAND, SOIL, DIRT, SNOW 1- OTHERJUNKNOWN		
ROAD SURFACE  1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPIALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, 5 - DIRT 5 - DIRT 3 - BRICK/BLOCK 6 - OTHER  LIGHT CONDITIONS SECONDARY 1 - DAYLIGH 2 - DAWN 3 - DUSK 4 - DARK - L		DADWAY NOT LIGHTED 9 - UNKN IKNOWN ROADWAY LIGHTING * SECONDARY CONDITION	ZONE DIRECTLY INVOLVED RELATED YES, SCHOOL BUS		
WORKERS PRESENT TYPE OF WORK ZONE  WORK LAW ENFORCEMENT PRESENT (OFFECENVERICLE)  RELATED LAW ENFORCEMENT PRESENT (VEHICLE ONLY)  LAW ENFORCEMENT PRESENT (VEHICLE ONLY)  LAW ENFORCEMENT PRESENT (VEHICLE ONLY)	MITTENT OR MOVING WORK	LOCATION OF CRASH IN WORK ZONE  1 - BEFORE THE FIRST WORK ZO 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA	NE WARNING SIGN 4 - ACTIVITY AREA 5 - TERMINATION AREA		
Unit 1 was traveling eastbound on West St. Rt. 122 approaching Hart Road. Unit 1 then attempted to make a right turn onto Hart Road. Failing to maintain control of the vehicle, unit 1 ran off the roadway to the left, striking a stop sign and a fence.					
		Unit 1			
			5100		
9					
		) tes			
		Hart Rd.			
	NOT TO	SCALE	-		
REPORT TAKEN BY		I.	* -		
REPORT TAKEN BY  SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)  DATE CRASH REPORTED  TIME CRASH REPORTED  DISPATCH TIME	ARRIVAL TIME	TIME CLEARED OTHER	INVESTIGATION TIME TOTAL MINUTES		
$\begin{bmatrix} 0 & 9 & 0 & 1 & 2 & 0 & 1 & 7 \end{bmatrix}$ $\begin{bmatrix} 1 & 2 & 4 & 5 \end{bmatrix}$ $\begin{bmatrix} 1 & 2 & 4 & 5 \end{bmatrix}$	1 <sub>1</sub> 2 <sub>1</sub> 4 <sub>1</sub> 5 <sub>1</sub>	1 3 4 5 3	0 0 0 9 0		
Holbrook, Carl - LP	0FFICER'S BADGE NUMBER 1 L 5 2	COH530	Page 1 of 4		

OHIO SAFETY UNIT					LOCAL REPORT NUM		0   0   4   1   0   6
1 0 4	T, MIDDLE ( SAME AS DRIVER)		OWNER PHONE NUMBER		SAME AS DRIVER)	DAMAGE SCALE DAM	AAGED AREA FRONT
U11 Hollon, Jade A (513)502-0658  OWNER ADDRESS: CITY, STATE, ZIP (☐ SAME AS DRIVER)				2			
736 B Deas DR, Lebanon, Ohio 45036-1265				1 - NONE 09			
LP STATE LICENSE PLATE NUMBER  GCZ	5367	/EHICLE IDENTIFICATION NUMBER LJ_T_6	0 <sub>1</sub> U <sub>1</sub> 4 <sub>1</sub> X <sub>1</sub> 0 <sub>1</sub> 0	1 <sub>1</sub> 7 <sub>1</sub> 6 <sub>1</sub> 2	3 0 1 1	2 - MINOR 08	10 10 04
VEHICLE YEAR  1 9 9 9	LEX	VEHICLE MODEL	X300	VEHICLE COLO	MAR	4 - DISABLING 07	5 06 05
PROOF OF INSURANCE COMPANY St	ate Farm	POLICY NUMBER 9551194B3		NED BY		9 - UNKNOWN	REAR
CARRIER NAME, ADDRESS, CITY, STATE, ZIP			·			CARRIER PHONE- INCL	UDE AREA CODE
HM PLAGARD ID No. 1 - Let 2 - 10, 3 - MC	SS THAN OR EQUAL TO 10K LBS. ,001 TO 26,000 LBS. DRE THAN 26,000 LBS.	RGO BODY TYPE  01 - NO CARGO BODY 1  02 - BUS/ANA (9-15 SEATS, IN  04 - VEHICL E TOWING  05 - LOGGING  06 - INTERMODAL CON  07 - CARGO VANZENCLG  08 - GRAIN, CHIPS, GRA	TS, INC DRIVER) 1 IC DRIVER) 1 ANOTHER VEHICLE 1 ITAINER CHASSIS 1 DSED BOX 1	00 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIXER 14 - AUTO TRANSPORTE 15 - GARBAGE/REFUSE 99 - OTHERJUNKNOWN	2 - YWO-WAY 3 - TWO-WAY 4 - TWO-WAY 5 - ONE-WAY	, NOT DIVIDED , NOT DIVIDED, CONTINUOL	PAINTED OR GRASS>4 FT.) MEDIAN
NON-MOTORIST LOCATION PRIOR TO IMPACT  O1 - INTERSECTION - MARKED CR 02 - INTERSECTION - NO CROSS 03 - INTERSECTION - OTHER 04 - MIDBLOCK - MARKED CROS 05 - TRAVEL LANE - OTHER LOCA 06 - BICYCK E LANE 07 - SHOULDERROADSIDE 08 - SICIEWALK 09 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED-USE PATH OR TRA 12 - NON-TRAFFICWAY AREA 99 - OTHERUNKNOWN	ROSSWALK WALK SWALK 1 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT	01 - SUB-COMP 69 - UNKNOWN 03 - MID SIZE 69 - UNKNOWN 03 - MID SIZE 04 - FLLL SIZE 05 - MINIVAN 06 - SPORT UT 07 - PICKUP 08 - VAN 09 - MOTORCY 10 - MOTORIZE 11 - SNOWMON	ILITY VEHICLE CLE D BICYCLE	13 - SINGLE UNI 14 - SINGLE UNI 15 - SINGLE UNI 16 - TRUCK/TRAC 17 - TRACTOR/OI 18 - TRACTOR/OI 20 - OTHER MEL	EMI-TRAILER OUBLE	6 TIRES 21 - BUSWAN 22 - BUS (16+ NON-MOTORI 23 - ANIMAL 24 - ANIMAL 25 - BICYCL 26 - PEDESTI	(9 OR MORE MICLIDING DRIVER) (9-15 SEATS, INC DRIVER) SEATS, INC DRIVER) ST WITH RIDER WITH BUGGY, WAGON, SURREY PEPEDACYCLIST RIANSKATER NON-MOTORIST
SPECIAL FUNCTION 01 - NONE 02 - TAXI 03 - RENTAL TRUCK (OVER 1 04 - BUS - SCHOOL (PUBLIC C 05 - BUS - TRANSIT 06 - BUS - CHARTER 07 - BUS - SHUTTLE 09 - BUS - OTHER		20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NAF NT	MOST DAMAGEI  0 7  MPACT AREA  0 2	DAREA  01 - NONE  02 - CENTER FRONT  03 - RIGHT FRONT  04 - RIGHT SIDE  05 - RIGHT REAR  06 - REAR CENTER  07 - LEFT REAR	08 - LEFT SIDE 09 - LEFT FRONT 10 - TOP AND WINDO 11 - UNDERCARRIAGE 12 - LOAD/TRAILER 13 - TOTAL (ALL AREA 14 - OTHER		1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKINGSTRUCK 9 - UNKNOWN
PRE-CRASH ACTIONS  MOTORIST  01 - STRAIGHT A HEAD  07 - MAKING U-TURN  13 - NEGOTIATING A CURVE  15 - ENTERING OR CROSSING SPECIFIED LOCATION  16 - WALKING, RUINNING, JOGGINS, PLAYINS, CYCLING  17 - WORKING  18 - PUSHING VEHICLE  19 - MAKING RIGHT TURN  11 - SLOWING OR STOPPED IN TRAFFIC  12 - OTHER MOTORIST ACTION  13 - WORKING  14 - OTHER MOTORIST ACTION  15 - WALKING, RUINNING, JOGGINS, PLAYINS, CYCLING  17 - WORKING  18 - PUSHING VEHICLE  19 - APPROACHING OR LEAVING VEHICLE  20 - STANDING							
CONTRIBUTING CIRCUMSTANCES  PRIMARY  MOTORIST  01 - NONE  22 - FAILURE TO YII  03 - RAN RED LIGI  04 - RAN STOP SIS  SECONDARY  05 - EXCEEDED SP  06 - LINSAFE SPERI  07 - IMPROPER TUN  99 - UNKNOWN  09 - FOLLOWED TOC  10 - IMPROPER LAN  IPASSING/OFF	IT 13 - STOPPEI N 14 - OPERAT EED LIMIT 15 - SWERVII D 16 - WRONG N 17 - FAILLRE ER 18 - VISION 0 10 - OPERAT 10 - OPERAT E CHANGE 20 - LOAO SI	ER BACKING ER START FROM PARKED POSITION D OR PARKED ILLEGALLY ING VEHICLE IN NEGLIGENT MANN K TO AVOID [DUE TO EXTERNAL GO SIDE/MRONIG WAY E TO CONTROL DESTRUCTION ING DEFECTIVE EQUIPMENT INFTING/FAL LINGS/PILLING MPROPER ACTION	22 - NO 23 - IM 24 - DA IER 25 - LY INDITIONS) 26 - FAI 27 - NO 28 - IN 29 - FAI 30 - WB	PROPER CROSSING	T OF WAY THING) FIC SIGNS DAD	02 - HE 03 - TA 04 - BR 05 - STI 06 - TIR 07 - WO 08 - TRA 09 - MO 10 - DIS	
SEQUENCE OF EVENTS  1 0 9 2 3 7 3 4 4  FIRST 2 HARMFUL 4  EVENT 4  COLLISION WITH PERSON, VEHICLE OR OBJECT  14 - PEODESTRIAN  15 - PEDALCYCLE  16 - RAILWAY VEHICLE (TRAIN, ENGINE)  17 - ANIMAL - FARM  19 - ANIMAL - OTHER  20 - MOTOR VEHICLE IN TRANSPORT	99 - UNKNOWN  Y NOT FIXED  21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE 23 - STRUCK BY FALLING, SHIFTIN OR ANYTHING SET IN MOTION MOTOR VEHICLE  24 - OTHER MOVABLE OBJECT	COLLISION WITH FIXE   26 - IMPACT ATTENU   26 - BRIDGE OVERHE   27 - BRIDGE PIER OF IG CARGO   28 - BRIDGE PARAPE	LOVER DE SIN	5 - EQUIPMENT FAILUE (NOWN TRE, BRACE A 7 - SEPARATION OF UN 8 - RAN OFF ROAD RIG 9 - RAN OFF ROAD LEF 33 - MEDIAN GUARDR 35 - MEDIAN GUARDR 35 - MEDIAN OTHER E 37 - TRAFFIC SIGN PC 38 - OVERHEAD SIGN 39 - LIGITITUMINARIE 40 - UTILITY POLE	ALUKE_ETG) 11 - CR  ITS OPI  SHT 12 - DO  FT 13 - OTI  ARRIER 41 - C  ARRIER 42 - C  BARRIER 43 - C  BARRIER 43 - C  BARRIER 44 - C  BARRIER 44 - C  BARRIER 45 - C  BARRIER 46 - C  BARRIER 4	OR SUPPORT 41 CULVERT 51 CURB DITCH 5	AVEL.  8 - TREE 9 - FIRE HYDRANY 0 - FIRE HYDRANY 0 - WORK ZONE MAINTENANCE EQUIPMENT 1 - WALL, BUILDING, TUNNEL. 2 - OTHER FIXED OBJECT
UNIT SPEED    3   5   5	TRAFFIC CONTROL  01 - NO CONTROLS  02 - STOP SIGN  03 - YIELD SIGN  04 - TRAFFIC SIGNAL  06 - TRAFFIC FLASHE  08 - SCHOOL ZONE		S 14 - WALK/DO 15 - OTHER RICADE 16 - NOT REP FFICER)	ALK LINES DN'T WALK	NIT DIRECTION FROM 4 TO 2	2 - SOUTH 6 - 3 - EAST 7 -	NORTHEAST 9-UNKNOWN NORTHWEST SOUTHEAST SOUTHWEST  Page 2 of 4

SCHOOL SHOWS A MOTORIST /	Non-Motorist / Occu	JPANT   LOCAL REPORT NUMBER   L.   P.   1.   7.   0.   9.   0.   1.   0.   0.   4.   1.   0.   6.			
UNIT NUMBER NAME: LAST, FIRST, MIDDLE  O 1					
ADDRESS, CITY, STATE, ZIP	hio 45036	CONTACT PHONE-INCLUDE AREA CODE			
S INJURIES INJURED TAKEN BY EMS AGENCY	DOT COMPLIANT SEMINOR SAFETY AND BACKGOOD ESECTION TOPPED				
OLSTATE OPERATOR LICENSE NUMBER OL.CL	ASS NO CONDITION ALCOHOLDRUG SUSPECTED ALC	4 MOTORCYCLE D 1 1 1 1 1 1 OHOL TEST STATUS ALCOHOL TEST YALLE DRUG TEST STATUS ORUG TEST TYPE			
9 O H UN483443 443	NO NO END. 1	1 1 1 1			
<u> </u>	Operation Without Reasonable Control	O16258 HANDS-FREE DEVICE USED DRIVER DISTRACTED BY			
UNIT NUMBER NAME LAST, FIRST, MIDDLE	•	DATE OF BIRTH AGE GENDER F . FEMALE M - MALE			
ADDRESS, CITY, STATE, ZIP		CONTACT PHONE-HIGLUDE AREA CODE			
BINJURIES INJURED TAKEN BY EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO SAFETY	EQUIPMENT USED DOT COMPLIANT SEATING POSITION ARE BAG USAGE EJECTION TRAPPED MOTORCYCLE			
OL STATE OPERATOR LICENSE NUMBER OL CL		HELMET DHOL TEST STATUS ALCOHOL TEST TYPE ALCOHOL TEST VALUE DRUG TEST STATUS DRUG TEST TYPE			
OFFENSE CHARGED ( ☐ LOCAL CODE)	OFFERSE DESCRIPTION CITATIC	DH NUMBER HANDS-FREE DRIVER DISTRACTED BY			
		DEVICE USED			
IMJURIES INJURIED TAKEN BY  1 - NO INJURY / NONE REPORTED / 1 - NOT TRANSPORTED / 1 - POSSIBLE TREATED AT SCENE  3 - NON-INCAPACITATING 2 - EASS		TY EQUIPMENT    NOH-MOTORIST   12 REFLECTIVE CLOTHING   17 - NONE USED   12 - REFLECTIVE CLOTHING   18 - NONE USED   13 - LIGHTING   16 - HELMET USED   13 - LIGHTING   16 - HELMET USED   15 - LIGHTING   17 - NONE USED   16 - HELMET USED   17 - LIGHTING   18 - NONE USED   18 - NONE USED   18 - LIGHTING   18 - NONE USED   18 - NONE US			
4 - INCAPACITATINS 3 - POLICE 5 - FATAL 4 - OTHER 9 - UNKNOWN	03 - LAP BELT ONLY USED 07 - BOOSTER SEAT 04 - SHOULDER AND LAP BELT USED 08 - HELMET USED	11 - PROTECTIVE PADS USED 14 - OTHER (ELBOWS, KHEES, ETC)			
SEATING POSITION  01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 92 - FRONT - MIDDLE	07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 12 - PASSI 09 - THIRD MIDDLE 13 - TRAIL	AIR BAG USAGE ENGER IN UNENCLOSED CARGO AREA 1. NOT DEPLOYED			
03 - FRONT - RIGHT SIDE 04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENSER) 05 - SECOND - MIDDLE		3 ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 3. DEPLOYED SIDE ACTORIST 4-DEPLOYED BOTH FRONTS:IDE			
06 - SECOND - RIGHT SIDE           EJECTION         TRAPPED         6           1 - NOT EJECTED         1 - NOT TRAPPED	(NON-TRAILRIG UNIT SUCH AS A BUS, PICK-UP WITH CAP) 99 - UNIXM  OPERATOR LICENSE CLASS CONDITION  1 - CLASS A 1 - APPARENTLY NORMAL	OWN 9 - DEPLOYMENT UNKNOWN  ALCOHOLDRUG SUSPECTED 1-NOISE 1-NOISE			
2 - TOTALLY EJECTED 2 - EXTRICATED BY 3 - PARTIALLY EJECTED MECHANICAL MEANS 4 - NOT APPLICABLE 3 - EXTRICATED BY NON-MECHANICAL MEANS	2 - GLASS B 2 - PHYSICAL IMPAIRMENT 3 - CLASS G 3 - EMOTIONAL (DEPRESSED, ANGRY, I 4 - REGULAR CLASS (CHO IS 'D') 4 - ILLNESS	6 - UNDER THE INFLUENCE OF 2 - YES - ALCOHOL SUSPECTED  MEDICATIONS, DRUGS, ALCOHOL 3 - YES - HBD NOT IMPAIRED  7 - OTHER 4 - YES - DRUGS SUSPECTED			
		G - YES - ALCOHOL AND DRUGS SUSPECTED  SUGTEST TYPE DRIVER DISTRACTED BY  NOTE 1 - NO DISTRACTION REPORTED 5 - OTHER INSIDE THE VEHICLE			
2 - TEST REFUSED 2 - BLO 3 - TEST GIVEN, CONTAMINATED SAMPLEAUNUSABLE 3 - URIL 4 - TEST GIVEN, RESULTS KNOWN 4 - BRE 5 - TEST GIVEN, RESULTS UNKNOWN 5 - O'TH	OD 2.1EST REFUSED 2 NE 3.TEST GIVEN, CONTAMINATED SAMPLEJUNUSABLE 3 ATH 4.TEST GIVEN, RESULTS KNOWN 4	- BLOOD 2: PHONE 7 - EXTERNAL DISTRACTION - URINE 3 - TEXTINGE-MAILING - OTHER 4 - ELECTRONIC COMMUNICATION DEVICE			
6- TEST GIVEN, RESULTS UNKNOWN 6- OTH UNIT NUMBER NAME: LAST, FIRST, MIDDLE	ER 5- TEST GIVEN, RESULTS UNKNOWN	6 - OTHER ELECTRONIG DEVICE (NAMIGATION GEVICE, RADIO, DVID)  DATE OF BIRTH AGE GENDER F - FEMALE			
ADDRESS, CITY, STATE, ZIP		CONTACT PHONE-INCLUDE AREA CODE			
INJURIES INJURED TAKEN BY EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO SAFETY	EQUIPMENT USED DOT COMPUANT SEATING POSITION AIR DAG USAGE EJECTION TRAPPED			
		MOTORCYCLE HELMET			
UNIT NUMBER NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH AGE GENDER  F - FEMALE  M - MALE			
ADDRESS, GITY, STATE, ZIP		CONTACT PHONE- WICLUDE AREA CODE			
INJURIES INJURED TAKEN BY EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO SAFETY	EQUIPMENT USED DOT COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED MOTORCYCLE HELMET			
		Page 3 of 4			

EDICATION - BEAT	OHIO PIRABILI PRABILI TRAFFIC ACCIDE TO STRUCTURE TRAFFIC ACCIDE TO STRUCTURE TO ST	ENT - DIAGRAM/NARRATI
LOCAL REPOR	T I D47000400/406	REPORTING AGENCY Classocial Two De

OF PUBLIC SAFETY TRAFFIC A	CCIDENT - DIAGRAN	//NARRATIVE CONTINUATION	OH-:	2 (REV. 1/82)
LOCAL REPORT LP17090100 NUMBER		arcreek Twp. Police Department	DATE OF ACC	DENT 01/2017
N COUNTY OF Warren	ACCIDENT LOCATION Hart			
he damaged fence belongs	to Texas Eastern.		<u> </u>	
Noah Minge - Supervisor #513-502-0760				
<i>1</i> 513-502-0760				
		•		
		OFFICERS SIGNATURE	=	BADGE NO.
		OFFICERS SIGNALORE	•	1L52