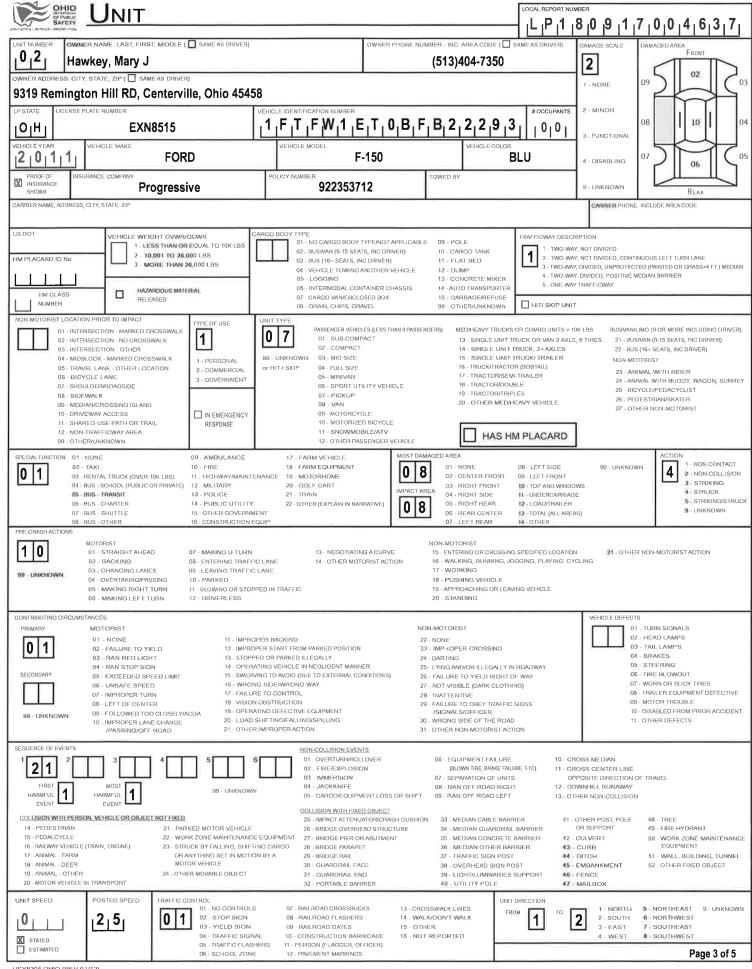
TRAFFIC CRASH REPORT	LOCAL REPORT NUMB		1 - SOLVED			
LOCAL INFORMATION DOCUMENT COMMANDED COMMAND REPORTING AGENCY NOIC * REPORTING AGENCY NAMED COMMAND C		3 1 - FATAL 2 - INJURY 3 - PDO	2 - UNSOLVED			
OH-2 OH-1P STATE REPORTABLE DOLLAR AMOUNT PROPERTY DOLLAR AMOUNT DOLLAR	rp. Police Departme	ent <u>[0 2]</u> [0 1] **	- ANIMAL - UNKNOWN			
COUNTY* CITY, VILLAGE, TOWNSHIP* CITY, VILLAGE, TOWNSHIP* Clearcreek Clearcreek		CRASH DATE * LO 1 5 2 0 1 1 8 LO 1 3 0 0 LO 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	S _I A _I T _I			
DEGREES / MINUTES / SECONDS LATITUDE O / // LONGITUDE O /	DECIMAL DEGREES LATITUDE	LONGITUDE	e.			
	AD TYPES OR MILEPOST 2	5 ₁ 7 ₁ 1 ₁ 5 ₁ 5 ₁ 0 ₁ -[8 ₁ 4 ₁ ,1 ₁ 8 ₁ 6 ₁ 2 ₁ 4 ₁ 0	<u>)</u>			
□ DIVIDED	- ALLEY CR - CIRCLE - AVENUE CT - COURT - BOULEVARD DR - DRIVE	HE - HEIGHTS MP - MILEPOST PL - PLACE ST - STREET WA - WAY HW - HIGHWAY PK - PARKWAY RD - ROAD TE - TERRACE LA - LANE PI - PIKE SQ - SQUARE TL - TRAIL	'			
LOCATION ROUTE NUMBER LOC PREFIX LOCATION ROAD NAME ROUTE TYPE T Remington Hill	R D	ROAD TYPE 2 ROAD TYPE 2 ROAD TYPE 2 ROAD TYPE 2 ROAD TYPE 3 ROAD TYPE 3 ROAD TYPE 5 ROAD TYPE 5 ROAD TYPE 5 ROAD TYPE 7 TYPE 7				
DISTANCE FROM REFERENCE DISTANCE FROM REFERENCE DISTANCE FROM REF NILES FEET VARDS DISTANCE FROM REFERENCE REFERENCE REFERENCE ROUTE NUMBER REFP ROUTE INNEL INNEL REFP ROUTE RO	REFIX REFERENCE NAME (ROAL N, S, E, W 9319	D_MILEPOST, HOUSE II)	REFERENCE ROAD TYPE 2			
REFERENCE POINT USED	11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAIL 99 - UNKNOWN	I INTERSECTION I A	·way			
1 - STRAIGHT LEVEL 4 - CURVE GRADE PRIMARY SECONDARY 02 2 - STRAIGHT GRADE 9 - UNKNOWN 03	- DRY	99 - UNKNOWN	CONDITION ONLY			
MANNER OF CRASH COLUSION/MPACT 1 *NOT COLLISION BETWEEN 2 *REAR-END 5 - BACKING 8 - SIDESWIPE, OPPOSI TWO MOTOR VEHICLES 3 - HEAD-ON 6 - ANGLE DIRECTION IN TRAISPORT 4 - REAR-TO-REAR 7 - SIDESWIPE, SAME DIRECTION 9 - UNKNOWN	1 2 - CLOUE					
ROAD SURFACE 1 - CONCRETE 4 - SLAG, GRAVEL, 2 - BLACKTOP, BITUMINOUS, STONE ASPHALT 5 - DIRT 3 - BRICK/BLOCK 6 - OTHER 1 - BRICK/BLOCK 6 - OTHER 2 - DARK - LIGHTED ROADWAY 8 - OTHER 3 - BRICK/BLOCK 6 - OTHER 3 - BRICK/BLOCK 6 - OTHER 5 - DARK - LINKNOWN ROADWAY LIGHTED 9 - UNKNOWN SCHOOL BUS DIRECTLY INVOLVED NOINEECTLY INV						
WORKERS PRESENT WORK ZONE CONE C	RMITTENT OR MOVING WORK ER	LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE FIRST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 5 - TERMINATIO 3 - TRANSITION AREA				
Traffic Unit # 1 was backing out of the driveway of 9320 Remington Hill. Traffic Unit # 2 was parked on the West side of the roadway in front of 9319 Remington Hill. Traffic Unit # 1 struck Traffic Unit # 2. Remington Hill Remington Hil						
DATE CRASH REPORTED TIME CRASH REPORTED DISPATCH TIME	ARRIVAL TIME	TIME CLEARED OTHER INVESTIGATION TIME TOTAL MINUTES	<u> </u>			
0 9 1 7 2 0 1 8 1 2 4 4 1 1 2 4 4 Sweet, Charles - LP	officers BADGE HUMBER 1 L 3 0	1 3 4 6 3 0 0 0 9	1 of 5			



MOTORIST /	Non-Motorist / O	CCUPANT	LOCAL REPORT NUMBER	1,7,0,0,4,6,3,7,		
UNIT NUMBER NAME LAST, FIRST, MIDDLE Lambert, Melissa Jean			DATE OF BIRTH	AGE GENDER		
ADDRESS, CITY, STATE, ZIP CONTACT PHONE- INCLUDE AREA CODE 5625 Coach DR, Kettering, Ohio 45440 (937)520-5624						
INJURIES INJURED TAKEN BY EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT SEATING PO MOTORCYCLE HELMET	SITION AIR BAG USAGE EJECTION TRAPPED		
O_H UG446733	ALCOHOLDRUG SUSPE	1	ALCOHOL TEST TYPE ALCOHOL TES			
OFFENSE CHARGED (LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER		IANDS-FREE DRIVER DISTRACTED BY EVICE SSED		
			4 64 M F-FEMALE M-MALE			
9319 Remington Hill RD, Centerville,	Ohio 45458		CONTACT PROME- INC	(513)404-7350		
INJURIES INJURED TAKEN BY EMS AGENCY	MEDIGAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USEC	MOTORCYCLE HELMET			
O_H RN668715	L CLASS NO DVALID OL END CONDITION ALCOHOLDRUG SUSPE		ALCOHOL TEST TYPE ALCOHOL TES			
OFFENSE CHARGED (LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER		HANDS-FREE DRIVER DISTRACTED BY DEVICE USED		
INJURED TAKEN BY 1 - NO INJURY / NONE REPORTED 2 - POSSIBLE 3 - NON-INCAPACITATING 4 - INCAPACITATING 5 - FATAL INJURED TAKEN BY 1 - NOT TRANSPORTED TREATED AT SCENE 2 - EMS 3 - POLICE 4 - OTHER 9 - UNKNOWN	01 MOTORIST 01 - NONE USED - VEHICLE OCCUPANT 05 - CH 02 - SHOULDER BELT ONLY USED 06 - CH 03 - LAP BELT ONLY USED 07 - BO	KNOWN SAFETY EQUIPMENT LD RESTRAINT SYSTEM - FORM LD RESTRAINT SYSTEM - REAR DSTER SEAT .MET USED		SED 13 - LIGHTING /E PADS USED 14 - OTHER		
SEATING POSITION 01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 02 - FRONT - MIDDLE 03 - FRONT - RIGHT SIDE 04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 05 - SECOND - MIDDLE 06 - SECOND - RIGHT SIDE	07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 08 - THIRD MIDDLE 09 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF CAB (TRUCK) 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP)	12 - PASSENGER IN UNENCL 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXT 15 - NON-MOTORIST 16 - OTHER 99 - UNKNOWN		AIR BAG USAGE 1- NOT DEPLOYED 2- DEPLOYED FRONT 3- DEPLOYED SIDE 4- DEPLOYED BOTH FRONT/SIDE 5- NOT APPLICABLE 9- DEPLOYMENT UNKNOWN		
EJECTION TRAPPED 1 - NOT EJECTED 1 - NOT TRAPPED 2 - TOTALLY EJECTED 2 - EXTRICATED BY 3 - PARTIALLY EJECTED MECHANICAL MEANS 4 - NOT APPLICABLE 3 - EXTRICATED BY NON-MECHANICAL MEANS	OPERATOR LICENSE CLASS 1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO IS 'D') 5 - MOMOPED QNILY CONDITION 1 - APPARENTLY NORM 2 - PHYSICAL IMPAIRME 3 - EMOTIONAL (DEPRES 4 - ILLNESS	NT 6 SED, ANGRY, DISTURBED)	- FELL ASLEEP, FAINTED, FATIGUED - UNDER THE INFLUENCE OF MEDICATIONS, DRUGS, ALCOHOL - OTHER	ALCOHOL/DRUG SUSPECTED 1. NONE 2. YES - ALCOHOL SUSPECTED 3. YES - HBD NOT IMPAIRED 4. YES - DRUGS SUSPECTED 5. YES - ALCOHOL AND DRUGS SUSPECTED		
1 - NONE GIVEN	COHOL TEST TYPE DRUG TEST STATUS 1 - NONE	DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	DRIVER DISTRACTED BY 1 - NO DISTRACTION REPORTED 2 - PHONE 3 - TEXTINOZE-MAILING 4 - ELECTRONIC COMMUNICATION 5 - OTHER ELECTRONIC DEVICE (MANGATION DEVICE, RADIO, DVD)			
UNIT NUMBER NAME LAST, FIRST, MIDDLE Busi, Daniel A			1101213111917	AGE 39 GENDER F - FEMALE M - MALE		
ADDRESS, CITY, STATE, ZIP 9361 Remington Hill RD, Centerville, Ohio 45458 (937)846-5179						
INJURIES INJURED TAKEN BY EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USES	DOT COMPLIANT SEATING PC MOTORCYCLE HELMET	SITION AIR BAG USAGE EJECTION TRAPPED		
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	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET	SITION AIR BAG USAGE EJECTION TRAPPED Page 4 of 5		

OF PUBLIC SAFETY	TRAFFIC ACCIDENT	- DIAGRAM/NARRATIVE CONTINUATION	OH-2 (REV. 1/82)			
LOCAL REPORT NUMBER	LP180917004637	AGENCY Clearcreek Twp. Police Department	DATE OF ACCIDENT 09/15/2018			
IN COUNTY OF	Warren	ACCIDENT LOCATION Remington Hill				
Unit # 1 was delivering groceries to the 9320 Remington Hill address for Shipt Shopper 205-5002-2500. Unit # 1 advised that Shipt Shopper would be covering the damage to Unit # 2. Unit # 1 did not provide any insurance information for Shipt Shopper.						

OFFICERS SIGNATURE

BADGE NO.

1L30