



TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER *	CRASH SEVERITY	HIT/SKIP
LP181129005912	3 1-FATAL 2-INJURY 3-PDO	1-SOLVED 2-UNSOLVED

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER	<input type="checkbox"/> PDO UNDER STATE REPORTABLE DOLLAR AMOUNT	<input type="checkbox"/> PRIVATE PROPERTY	REPORTING AGENCY NCIC * 08316	REPORTING AGENCY NAME * Clearcreek Twp. Police Department	NUMBER OF UNITS 01	UNIT IN ERROR 01 98-ANIMAL 99-UNKNOWN
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COUNTY * 83	<input type="checkbox"/> CITY * <input type="checkbox"/> VILLAGE * <input checked="" type="checkbox"/> TOWNSHIP * Clearcreek	CITY, VILLAGE, TOWNSHIP *	CRASH DATE * 11292018	TIME OF CRASH 2258	DAY OF WEEK THU
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DEGREES / MINUTES / SECONDS LATITUDE 0 / / LONGITUDE 0 / /	OR	DECIMAL DEGREES LATITUDE 39.580132 LONGITUDE -84.190704
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ROADWAY DIVISION <input type="checkbox"/> DIVIDED <input checked="" type="checkbox"/> UNDIVIDED	DIVIDED LANE DIRECTION OF TRAVEL <input type="checkbox"/> N-NORTHBOUND <input type="checkbox"/> S-SOUTHBOUND <input type="checkbox"/> E-EASTBOUND <input type="checkbox"/> W-WESTBOUND	NUMBER OF THRU LANES 02	ROAD TYPES OR MILEPOST 2 AL-ALLEY CR-CIRCLE HE-HEIGHTS MP-MILEPOST PL-PLACE ST-STREET WA-WAY AV-AVENUE CT-COURT HW-HIGHWAY PK-PARKWAY RD-ROAD TE-TERRACE BL-BOULEVARD DR-DRIVE LA-LANE PI-PIKE SQ-SQUARE TL-TRAIL
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LOCATION ROUTE TYPE 1	LOCATION ROUTE NUMBER	LOC PREFIX N, S, E, W	LOCATION ROAD NAME Bunnell Hill	LOCATION ROAD TYPE 2 RD	ROUTE TYPES 1 IR-INTERSTATE ROUTE (INC. TURNPIKE) US-US ROUTE SR-STATE ROUTE	CR-NUMBERED COUNTY ROUTE TR-NUMBERED TOWNSHIP ROUTE
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DISTANCE FROM REFERENCE <input type="checkbox"/> MILES <input type="checkbox"/> FEET <input type="checkbox"/> YARDS	DIR FROM REF <input type="checkbox"/> N, S, E, W	REFERENCE ROUTE TYPE 1	REFERENCE ROUTE NUMBER	REF PREFIX N, S, E, W	REFERENCE NAME (ROAD, MILEPOST, HOUSE #) 9789	REFERENCE ROAD TYPE 2
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REFERENCE POINT USED 3 1-INTERSECTION 2-MILE POST 3-HOUSE NUMBER	CRASH LOCATION 01 NOT AN INTERSECTION 02 FOUR-WAY INTERSECTION 03 T-INTERSECTION 04 Y-INTERSECTION 05 TRAFFIC CIRCLE/ROUNDABOUT	06 FIVE-POINT OR MORE 07 ON RAMP 08 OFF RAMP 09 CROSSOVER 10 DRIVEWAY/ALLEY ACCESS	11 RAILWAY GRADE CROSSING 12 SHARED-USE PATHS OR TRAILS 99 UNKNOWN	<input type="checkbox"/> INTERSECTION RELATED	LOCATION OF FIRST HARMFUL EVENT 6 1-ON ROADWAY 5-ON GORE 2-ON SHOULDER 6-OUTSIDE TRAFFICWAY 3-IN MEDIAN 9-UNKNOWN 4-ON ROADSIDE
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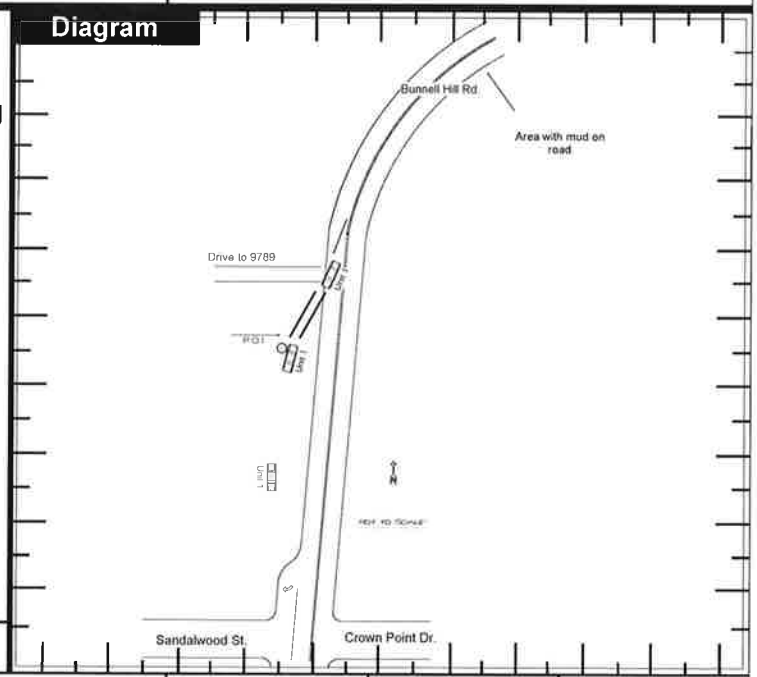
ROAD CONTOUR 3 1-STRAIGHT LEVEL 4-CURVE GRADE 2-STRAIGHT GRADE 9-UNKNOWN 3-CURVE LEVEL	ROAD CONDITIONS PRIMARY 02 SECONDARY 05 01 DRY 05 SAND, MUD, DIRT, OIL, GRAVEL 09 RUT, HOLES, BUMPS, UNEVEN PAVEMENT * 02 WET 06 WATER (STANDING, MOVING) 10 OTHER 03 SNOW 07 SLUSH 99 UNKNOWN 04 ICE 08 DEBRIS* * SECONDARY CONDITION ONLY
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MANNER OF CRASH COLLISION/IMPACT 1 1-NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2-REAR-END 3-HEAD-ON 4-REAR-TO-REAR 5-BACKING 6-ANGLE DIRECTION 7-SIDESWIPE, SAME DIRECTION 8-SIDESWIPE, OPPOSITE DIRECTION 9-UNKNOWN	WEATHER 2 1-CLEAR 4-RAIN 7-SEVERE CROSSWINDS 2-CLOUDY 5-SLEET, HAIL 8-BLOWING SAND, SOIL, DIRT, SNOW 3-FOG, SMOG, SMOKE 6-SNOW 9-OTHER/UNKNOWN
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ROAD SURFACE 2 1-CONCRETE 4-SLAG, GRAVEL, STONE 2-BLACKTOP, BITUMINOUS, ASPHALT 5-DIRT 3-BRICK/BLOCK 6-OTHER	LIGHT CONDITIONS 5 PRIMARY SECONDARY 1-DAYLIGHT 2-DAWN 3-DUSK 4-DARK - LIGHTED ROADWAY 5-DARK - ROADWAY NOT LIGHTED 9-UNKNOWN 6-DARK - UNKNOWN ROADWAY LIGHTING 7-GLARE* 8-OTHER * SECONDARY CONDITION ONLY	SCHOOL BUS RELATED <input type="checkbox"/> SCHOOL ZONE RELATED <input type="checkbox"/> YES, SCHOOL BUS DIRECTLY INVOLVED <input type="checkbox"/> YES, SCHOOL BUS INDIRECTLY INVOLVED
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<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE) <input type="checkbox"/> LAW ENFORCEMENT PRESENT (VEHICLE ONLY)	TYPE OF WORK ZONE <input type="checkbox"/> 1-LANE CLOSURE 4-INTERMITTENT OR MOVING WORK <input type="checkbox"/> 2-LANE SHIFT/CROSSOVER 5-OTHER <input type="checkbox"/> 3-WORK ON SHOULDER OR MEDIAN	LOCATION OF CRASH IN WORK ZONE <input type="checkbox"/> 1-BEFORE THE FIRST WORK ZONE WARNING SIGN 4-ACTIVITY AREA <input type="checkbox"/> 2-ADVANCE WARNING AREA 5-TERMINATION AREA <input type="checkbox"/> 3-TRANSITION AREA
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NARRATIVE
Unit 1 was traveling south on Bunnell Hill Rd. Unit 1 failed to negotiate a turn in the roadway and went off the right side of the roadway near house number 9789. Unit 1 struck a utility pole causing damage to the pole. Unit 1 then continued traveling south in the grass along the ditch.



REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)	DATE CRASH REPORTED 11292018	TIME CRASH REPORTED 2258	DISPATCH TIME 2258	ARRIVAL TIME 2303	TIME CLEARED 0123	OTHER INVESTIGATION TIME 30	TOTAL MINUTES 0170
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OFFICER'S NAME * McWhorter, Brian - LP	OFFICER'S BADGE NUMBER 1 L 3 2	CHECKED BY COH530	Page 1 of 4
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UNIT

LOCAL REPORT NUMBER

LP181129005912

UNIT NUMBER 01	OWNER NAME: LAST, FIRST, MIDDLE (<input checked="" type="checkbox"/> SAME AS DRIVER) John, Sanjay M	OWNER PHONE NUMBER - INC AREA CODE (<input checked="" type="checkbox"/> SAME AS DRIVER) (513)703-6926	DAMAGE SCALE 4	DAMAGED AREA FRONT REAR
OWNER ADDRESS: CITY, STATE, ZIP (<input checked="" type="checkbox"/> SAME AS DRIVER) 9035 Highland CIR, Springboro, Ohio 45066-8459				
LP STATE OH	LICENSE PLATE NUMBER FNH8473	VEHICLE IDENTIFICATION NUMBER JTNBE46K383146277	# OCCUPANTS 011	
VEHICLE YEAR 2008	VEHICLE MAKE TOYT	VEHICLE MODEL Camry	VEHICLE COLOR TAN	
<input checked="" type="checkbox"/> PROOF OF INSURANCE SHOWN	INSURANCE COMPANY Geico	POLICY NUMBER 4482-58-23-37	TOWED BY Sandys	

CARRIER NAME, ADDRESS, CITY, STATE, ZIP	CARRIER PHONE: INCLUDE AREA CODE
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US DOT	VEHICLE WEIGHT GVWR/GCWR 1 - LESS THAN OR EQUAL TO 10K LBS 2 - 10,001 TO 26,000 LBS 3 - MORE THAN 26,000 LBS	CARGO BODY TYPE 01 - NO CARGO BODY TYPE/NOT APPLICABLE 02 - BUS/VAN (9-15 SEATS, INC DRIVER) 03 - BUS (16+ SEATS, INC DRIVER) 04 - VEHICLE TOWING ANOTHER VEHICLE 05 - LOGGING 06 - INTERMODAL CONTAINER CHASSIS 07 - CARGO VAN/ENCLOSED BOX 08 - GRAIN, CHIPS, GRAVEL	09 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIXER 14 - AUTO TRANSPORTER 15 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN	TRAFFICWAY DESCRIPTION 1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS-4 FT) MEDIAN 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY
HM PLACARD ID No	<input type="checkbox"/> HAZARDOUS MATERIAL RELEASED	<input type="checkbox"/> HIT/SKIP UNIT		

NON-MOTORIST LOCATION PRIOR TO IMPACT 	TYPE OF USE 1 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	UNIT TYPE 03 PASSENGER VEHICLES (LESS THAN 9 PASSENGERS) 01 - SUB-COMPACT 02 - COMPACT 03 - MID SIZE 04 - FULL SIZE 05 - MINIVAN 06 - SPORT UTILITY VEHICLE 07 - PICKUP 08 - VAN 09 - MOTORCYCLE 10 - MOTORIZED BICYCLE 11 - SNOWMOBILE/ATV 12 - OTHER PASSENGER VEHICLE	MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS 13 - SINGLE UNIT TRUCK OR VAN 2 AXLE, 6 TIRES 14 - SINGLE UNIT TRUCK, 3+ AXLES 15 - SINGLE UNIT TRUCK/ TRAILER 16 - TRUCK/TRACTOR (BOBTAIL) 17 - TRACTOR/SEMI-TRAILER 18 - TRACTOR/DOUBLE 19 - TRACTOR/TRIPLES 20 - OTHER MED/HEAVY VEHICLE	BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER) 21 - BUS/VAN (9-15 SEATS, INC DRIVER) 22 - BUS (16+ SEATS, INC DRIVER) NON-MOTORIST 23 - ANIMAL WITH RIDER 24 - ANIMAL WITH BUGGY, WAGON, SURREY 25 - BICYCLE/PEDACYCLIST 26 - PEDESTRIAN/SKATER 27 - OTHER NON-MOTORIST
<input type="checkbox"/> HAS HM PLACARD				

SPECIAL FUNCTION 01 - NONE 02 - TAXI 03 - RENTAL TRUCK (OVER 10K LBS) 04 - BUS - SCHOOL (PUBLIC OR PRIVATE) 05 - BUS - TRANSIT 06 - BUS - CHARTER 07 - BUS - SHUTTLE 08 - BUS - OTHER	09 - AMBULANCE 10 - FIRE 11 - HIGHWAY/MAINTENANCE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - OTHER GOVERNMENT 16 - CONSTRUCTION EQUIP	17 - FARM VEHICLE 18 - FARM EQUIPMENT 19 - MOTORHOME 20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NARRATIVE)	MOST DAMAGED AREA 04 IMPACT AREA 04	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 WINDOWS 11 - UNDERCARRIAGE 12 - LOAD/TRAILER 13 - TOTAL (ALL AREAS) 14 - OTHER	99 - UNKNOWN	ACTION 3 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN
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PRE-CRASH ACTIONS 13 99 - UNKNOWN	MOTORIST 01 - STRAIGHT AHEAD 02 - BACKING 03 - CHANGING LANES 04 - OVERTAKING/PASSING 05 - MAKING RIGHT TURN 06 - MAKING LEFT TURN	07 - MAKING U-TURN 08 - ENTERING TRAFFIC LANE 09 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - OTHER MOTORIST ACTION	NON-MOTORIST 15 - ENTERING OR CROSSING SPECIFIED LOCATION 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING 17 - WORKING 18 - PUSHING VEHICLE 19 - APPROACHING OR LEAVING VEHICLE 20 - STANDING	21 - OTHER NON-MOTORIST ACTION
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CONTRIBUTING CIRCUMSTANCES PRIMARY 17 SECONDARY 99 - UNKNOWN	MOTORIST 01 - NONE 02 - FAILURE TO YIELD 03 - RAN RED LIGHT 04 - RAN STOP SIGN 05 - EXCEEDED SPEED LIMIT 06 - UNSAFE SPEED 07 - IMPROPER TURN 08 - LEFT OF CENTER 09 - FOLLOWED TOO CLOSELY/ACDA 10 - IMPROPER LANE CHANGE /PASSING/OFF ROAD	11 - IMPROPER BACKING 12 - IMPROPER START FROM PARKED POSITION 13 - STOPPED OR PARKED ILLEGALLY 14 - OPERATING VEHICLE IN NEGLIGENT MANNER 15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS) 16 - WRONG SIDE/WRONG WAY 17 - FAILURE TO CONTROL 18 - VISION OBSTRUCTION 19 - OPERATING DEFECTIVE EQUIPMENT 20 - LOAD SHIFTING/FALLING/SPILLING 21 - OTHER IMPROPER ACTION	NON-MOTORIST 22 - NONE 23 - IMPROPER CROSSING 24 - DARTING 25 - LYING AND/OR ILLEGALLY IN ROADWAY 26 - FAILURE TO YIELD RIGHT OF WAY 27 - NOT VISIBLE (DARK CLOTHING) 28 - INATTENTIVE 29 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER 30 - WRONG SIDE OF THE ROAD 31 - OTHER NON-MOTORIST ACTION	VEHICLE DEFECTS 01 - TURN SIGNALS 02 - HEAD LAMPS 03 - TAIL LAMPS 04 - BRAKES 05 - STEERING 06 - TIRE BLOWOUT 07 - WORN OR SLICK TIRES 08 - TRAILER EQUIPMENT DEFECTIVE 09 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 11 - OTHER DEFECTS
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SEQUENCE OF EVENTS 1 08 2 40 3 44 4 5 6 99 - UNKNOWN FIRST HARMFUL EVENT 2 MOST HARMFUL EVENT 2	NON-COLLISION EVENTS 01 - OVERTURN/ROLLOVER 02 - FIRE/EXPLOSION 03 - IMMERSION 04 - JACKKNIFE 05 - CARGO/EQUIPMENT LOSS OR SHIFT 06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC) 07 - SEPARATION OF UNITS 08 - RAN OFF ROAD RIGHT 09 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE (TRAIN, ENGINE) 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT 25 - IMPACT ATTENUATOR/CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL, BUILDING, TUNNEL 52 - OTHER FIXED OBJECT
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UNIT SPEED 45 <input type="checkbox"/> STATED <input checked="" type="checkbox"/> ESTIMATED	POSTED SPEED 45	TRAFFIC CONTROL 12 01 - NO CONTROLS 02 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGNAL 05 - TRAFFIC FLASHERS 06 - SCHOOL ZONE 07 - RAILROAD CROSSBUCKS 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BARRICADE 11 - PERSON (FLAGGER, OFFICER) 12 - PAVEMENT MARKINGS 13 - CROSSWALK LINES 14 - WALK/DON'T WALK 15 - OTHER 16 - NOT REPORTED	UNIT DIRECTION FROM 1 TO 2 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN
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MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER
L P 1 8 1 1 2 9 0 0 5 9 1 2

UNIT NUMBER 01	NAME LAST, FIRST, MIDDLE John, Sanjay M	DATE OF BIRTH 03071982	AGE 36	GENDER M F - FEMALE M - MALE
ADDRESS, CITY, STATE, ZIP 9035 Highland CIR, Springboro, Ohio 45066-8459			CONTACT PHONE - INCLUDE AREA CODE (513)703-6926	

MOTORIST/NON-MOTORIST 1	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION 01	AIR BAG USAGE 3	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER SP202400	OL CLASS 4	NO VALID OL <input type="checkbox"/>	M/C END <input type="checkbox"/>	CONDITION 6	ALCOHOL/DRUG SUSPECTED 2	ALCOHOL TEST STATUS 5	ALCOHOL TEST TYPE 3	ALCOHOL TEST VALUE 5	DRUG TEST STATUS 3	DRUG TEST TYPE
OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE) 4511.202	OFFENSE DESCRIPTION Operation Without Reasonable Control			CITATION NUMBER 017214		HANDS-FREE DEVICE USED <input type="checkbox"/>	DRIVER DISTRACTED BY 1				

UNIT NUMBER	NAME LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER F - FEMALE M - MALE
ADDRESS, CITY, STATE, ZIP			CONTACT PHONE - INCLUDE AREA CODE	

MOTORIST/NON-MOTORIST	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	NO VALID OL	M/C END	CONDITION	ALCOHOL/DRUG SUSPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST STATUS	DRUG TEST TYPE
OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)	OFFENSE DESCRIPTION			CITATION NUMBER		HANDS-FREE DEVICE USED	DRIVER DISTRACTED BY				

INJURIES 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	SAFETY EQUIPMENT USED MOTORIST 01 - NONE USED - VEHICLE OCCUPANT 02 - SHOULDER BELT ONLY USED 03 - LAP BELT ONLY USED 04 - SHOULDER AND LAP BELT USED	99 - UNKNOWN SAFETY EQUIPMENT 05 - CHILD RESTRAINT SYSTEM - FORWARD FACING 06 - CHILD RESTRAINT SYSTEM - REAR FACING 07 - BOOSTER SEAT 08 - HELMET USED	NON-MOTORIST 09 - NONE USED 10 - HELMET USED 11 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)	12 - REFLECTIVE CLOTHING 13 - LIGHTING 14 - OTHER
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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 UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 16 - OTHER 99 - UNKNOWN	AIR BAG USAGE 1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONTSIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN
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EJECTION 1 - NOT EJECTED 2 - TOTALLY EJECTED 3 - PARTIALLY EJECTED 4 - NOT APPLICABLE	TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 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 - MCMOPED ONLY	CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS	5 - FELL ASLEEP, FAINTED, FATIGUED 6 - UNDER THE INFLUENCE OF MEDICATIONS, DRUGS, ALCOHOL 7 - 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
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ALCOHOL TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	ALCOHOL TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	DRUG TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	DRIVER DISTRACTED BY 1 - NO DISTRACTION REPORTED 2 - PHONE 3 - TEXTING/E-MAILING 4 - ELECTRONIC COMMUNICATION DEVICE 5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD)	6 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION
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UNIT NUMBER	NAME LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER F - FEMALE M - MALE
ADDRESS, CITY, STATE, ZIP			CONTACT PHONE - INCLUDE AREA CODE	

MOTORIST/NON-MOTORIST	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	NO VALID OL	M/C END	CONDITION	ALCOHOL/DRUG SUSPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST STATUS	DRUG TEST TYPE
OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)	OFFENSE DESCRIPTION			CITATION NUMBER		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 - INCLUDE AREA CODE	

MOTORIST/NON-MOTORIST	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (REV. 1/82)

LOCAL REPORT NUMBER LP181129005912	REPORTING AGENCY Clearcreek Twp. Police Department	DATE OF ACCIDENT 11/29/2018
IN COUNTY OF Warren	ACCIDENT LOCATION Bunnell Hill	

There was mud on the roadway prior to entering the curve in the area of 9898 Bunnell Hill Rd. due to crop being harvested recently.

OFFICERS SIGNATURE	BADGE NO. 1L32
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