OF PURICE SAFETY TRAFFIC CRASH	LOCAL REPORT NUMBER*							
PHOTOS TAKEN OH-2 OH-3	L P 1 9 1 2 1 5 0 0 6 3 4 9							
SECONDARY CRASH OH-1P OTHER	SECONDARY CRASH OH-1P OTHER REPORTING AGENCY NAME*							
COUNTY* LOCALITY* LOCATION: CI	3 1 6	1 - SOLVED L 2 - UNSOLVED	0,2,0,1,9	8 - ANIMAL 9 - UNKNOWN				
8 3 3 2-VILLAGE CLEADOR		CRASH DATE / T	3 54541	ERITY				
3-TOWNSHIP OLEANCI	LOCATION ROAD NAME		DOAD TVDE	1,2,1,5,2,0,1,9	1847 4 2-SERIO	JS INJURY		
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST			ROAD TYPE	LATITUDE DEC	3 MINOR			
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH	CLEARCREEK-FRANKLIN REFERENCE ROAD NAME (ROAD, MILEPO	L HOUSE #1	R D	3,9,5,7,3	SUSPE	CTED		
2 - SOUTH 3 - EAST		131, 11003E #)	ROAD TYPE	LONGITUDE DEC	5 77005	/ POSSIBLE RTY DAMAGE		
REFERENCE POINT DIRECTION	9094 ROUTE TYPE			8 4 2 5 0	b I U ONLY	INT DAMAGE		
1 - INTERSECTION FROM REFERENCE 1 - NORTH IR	- INTERSTATE ROUTE(TP) AL -ALLEY	ROAD TYPE HW-HIGHWAY RD	- ROAD	INTERSECTION RELATED WITHIN INTERSECTION OR ON APPROACH				
3-HUUSE # - 3-EAST	- FEDERAL US ROUTE AV - AVENU		-SQUARE -STREET	_				
DISTANCE DISTANCE CR	- STATE ROUTE CR - CIRCLE - NUMBERED COUNTY ROUTE		TERRACE	WITHIN INTER	- 11 - 540,045 0	APPROACHES		
1 - MILES TR	NUMBERED TOWNSHIP DR - DRIVE		- TRAIL - WAY	1 1 1 1	ROADWAY	T20 0		
2 - FEET 3 - YARDS	ROUTE HE - HEJGHT		- VVAT	ROADWAY DIVI	DED			
LOCATION OF FIRST HARMFUL EVEN		RASH COLLISION/IMPACT	r	DIRECTION OF TRAVEL	MEDIAN TYPE			
1 - ON ROADWAY 9 - CROSSOVEI 0 1 2 - ON SHOULDER 10 - DRIVEWAY	ALLEVACCESS BETWEEN	ON 4-REAR-TO-REAR 5-BACKING		1 - NORTH 1 - DIVIDED FLUSH MEDIAN (<4 FEET)				
3 - IN MEDIAN 11 - RAILWAY (4 - ON ROADSIDE 12 - SHARED U	RADE CROSSING 5 TWO MOTOR VEHICLES IN			3 - EAST 2 - DIVIDED FLUSH MEDIAN				
5 - ON GORE TRAILS	2 - REAR-END	7 - SIDESWIPE, SAME D 8 - SIDESWIPE, OPPOSIT		4 - WEST (≥4 FEET) 3 - DIVIDED, DEPRESSED MEI				
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE 7 - ON RAMP 14 - TOLL BOOT) - TEAU-UN	9 - OTHER / UNKNOWN	'	4 - DIVIDED, RAISED MEDIAN (ANY TYPE)				
8-OFF RAMP 99-OTHER/UI	IKNOWN				9 - OTHER/UNKNOWN			
WORK ZONE RELATED		ATION OF CRASH IN WORK		CONTOUR	CONDITIONS	URFACE		
WORKERS DRESENT	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST WO WARNING SIGN		4 3 2				
LAW ENFORCEMENT PRESENT 3-	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNING 3 - TRANSITION AREA	1	1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRETE				
AGTUE COULON TONE	INTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA			S SNOW BIT	CKTOP, UMINOUS,		
	OTHER	5 - TERMINATION AREA			ASI	HALT CK/BLOCK		
LIGHT CONDITION 1 - DAYLIGHT	WEATHER 1-CLEAR 6-SNO	NA/		9 - OTHER/UNKNOWN 5	5 - SAND, MUD, DIRT, 4 - SLA	G, GRAVEL,		
4 2-DAWN/DUSK 0.6.2-CLOUDY 7-SEVERE CROSSWINDS				6	- WATER (STANDING, 5-DIR	- 1		
3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED	3-FOG, SMOG, SMOKE 8-BLO 4-RAIN 9-FRE	WING SAND, SOIL, DIRT, SI EZING RAIN OR FREEZING	7	MOAINE)	ER/UNKNOWN			
5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL 99 - 0TI	HER/UNKNOWN		1) - OTHER/UNKNOWN			
NARRATIVE			17.7		N .			
TDAFFIC LINUT # 4 \AVA C	DILL ED INTO THE				direc	ate the north tion with I" on the		
TRAFFIC UNIT # 1 WAS	PULLED INTO THE	CLEARC	REEK			ass diagram.		
DRIVEWAY OF 9094		-FRANKL	IN			-		
CLEARCREEK-FRANKL	IN RD. TRAFFIC			9094				
UNIT # 2 WAS TRAVELING NORTH ON								
CLEARCREEK-FRANKL								
UNIT #1 BEGAN BACKIN			112>					
	IG UP AND STRUC	K		12				
TRAFFIC UNIT # 2.						-		
					NOT TO			
CRASH REPORTED DATE / TIME	ISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED DA	SCALE TE/TIME REPORT TA	KEN BY		
1,2,1,5,2,0,1,9, 1,8,4,7, 1,2,1	5,2,0,1,9, ,1,8,4,8, 1,2,1		5.8 1	2, 1, 5, 2, 0, 1, 9,	N	- 1		
TOTAL TIME OTHER TOTAL	TOTAL TIME OTHER TOTAL OFFICER'S NAME* CHECKED BY OFF							
MINUTE MINUTE	CHARLES S. SWEET FRIC					MENT ON OR ADDITION		
0 5 0 0 3 0 0 8	OFFICER'S BADGE NUM	1027	CHECKED BY	OFFICER'S BADGE NU	MBER** TO AL EXISTING	REPORT SENT TO ODPS)		



L,P,1,9,1,2,1,5,0,0,6,3,4,9 UNIT# OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER DAMAGE 0, 1 DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN 1 1 1 1 1 DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE O H PHP1889 $3_1D_17_1M_1A_14_18_1C_19_14_1G_12_10_10_18_15_15_1_12_10_10_14_1$ **DODGE** INSURANCE INSURANCE COMPANY
VERIFIED AUTO ONAMERO INSURANCE POLICY # VEHICLE MODEL COLOR 47-994-889-01 RED **RAM 3500** TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE T6 T6 16 HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK
DEVICE
EQUIPPED MATERIAL RELEASED CLASS # PLACARD ID # 1 - ≤10K LBS HIT/SKIP UNIT 2 - 10,001 - 26K LBS. , 0 , 2 , PLACARD J 3 - >26K L8S 1 + PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLE CART 18-LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 0 4 3 SPORT UTILITY VEHICLE 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 9 - AUTOCYCLE 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 ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / IITV) 1 # of TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS Q - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION AUTONOMOUS 2 - PARTIAL AUTOMATION 1 1-YES 2-NO 9-OTHER/UNKNOWN 5 - FULL AUTOMATION MODE LEVEL 11-FIRE 1 - NONE 6 - BUS - CHARTER/TOUR 16-FARM 21 - MAIL CARRIER 0 1 2 - TAXI 7 - BUS - 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 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 12 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - PO! F 12 - CONCRETE MIXER / NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTOTRANSPORTER CARGO 4 - LOGGING 6:= CARGO VAN/ENCLOSED BOX 10-FLAT BED 14 - GARBAGE/REFUSE BODY * 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99 - OTHER / UNKNOWN I - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER FOULPMENT 10 - DISABLED FROM PRIOR DEFECTIVE DEFECTS 3 - TAIL LAMPS ACCIDENT 6 - TIRE BLOWOUT - 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 J 10 - DRIVEWAY ACCESS ☐-ALL AREAS [15] NON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 8 - SIDEWALK 11 - SHARED USE PATHS OR 99 - OTHER / LINKNOWN CROSSWALK LOCATION 5 - TRAVEL LANE - OTHER LOCATION TRAILS - UNIT NOT AT SCENE L 16 J AT IMPACT 1-NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2-NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANF 14 - ENTERING OR CROSSING 0 2 2 3 - CHANGING LANES 3 0 - NO DAMAGE 14 - UNDERCARRIAGE 1 3-STRIKING SPECIFIED LOCATION 19-STANDING 9 - LEAVING TRAFFIC LANE 1-12 - REFERTO UNIT 15 - VEHICLE NOT AT SCENE 15 - WALKING, RUNNING. ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 20 - OTHER NON-MOTORIST 10-PARKED JOGGING, PLAYING DIAGRAM 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 99 - UNKNOWN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13 - TOP 16 - WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN 12 - DRIVERLESS 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 8 - FOLLOWING TOO CLOSE / ACDA 18 - OPERATING DEFECTIVE 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 1 2 2 - TW0-WAY 2 - SIGNAL 5 - YIFLD SIGN ILLEGALLY 2 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10 - IMPROPER PASSING 3 - FLASHER 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 - IMPROPER TURN # of THROUGH LANES 12 - IMPROPER BACKING RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING _ 2 NON-COLLISION 2 0 1 - OVERTURN/ROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE 16-RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF EQUIPMENT 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 17 - ANIMAL -- FARM TRAVEL 23 - STRUCK BY FALLING, UNIT / NON-MOTORIST DIRECTION 18 - ANIMAL - DEER 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 19 - ANIMAL - OTHER 13 - OTHER NON-COLLISION ANYTHING SET IN MOTION 6 - NORTHWEST 20 - MOTOR VEHICLE IN 2 - SOUTH 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN FROM 3 TO 4 LOSS OR SHIFT TRANSPORT 3 - EAST 7 - SOUTHEAST 24 - OTHER MOVABLE OBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 50 - WORK ZONE MAINTENANCE EQUIPMENT 37 - TRAFFIC SIGN POST 43 - CURB / CRASH CUSHION 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51 - WALL 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED STRUCTURE SUPPORT 34 - MEDIAN GUARDRAIL 46-FENCE 52 - BUILDING 1 2 - CALCULATED / EDR 0,0,5, 27 - BRIDGE PIER OR ABUTMENT 40 - UTILITY POLE BARRIER 53 - TUNNFI 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OBJECT 48 - TREE 3 - UNDETERMINED 29 - BRIDGE RAIL POSTED SPEED RARRIFR OR SUPPORT 99 - OTHER / UNKNOWN 49 - FIRE HYDRANT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 5 0 J FIRST HARMFUL EVENT → MOST HARMFUL EVENT

LOCAL REPORT NUMBER

LOCAL REPORT NUMBER

OF PUBLIC SAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
		21 C. (25.47)	DIA-1	/1010	1419) 			LP	1 9 1 2	1 5 0	0 6 3	4 9	
UNIT #		T, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER					
0 1	4							1,2,1,1,1,1,9,5,2,6,7						
EASE D									l .	T PHONE - INCLUDE AREA				
TNJIIRIES			N, OH,	-1	TAKENT	O MEDICAL FACILITY	· ····································	T CAPETY ENLISHMENT		3 7 6 0				
SADDRESS SAD	TAKEN 5 BY					J: MEDIUME PROJECT	(NAME, CITY)	USED 0 4	DOT-0	COMPLIANT O 1	ON AIR BAG USA	JE EJECITUM	TRAPPED 1	
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	NSE CHA	IRGED	CODE		CRIPTION		CITATION	CITATION NUMBER 017840		
O H	RJ47438	38		4511	.38				R BACK	ING	017840			
OL CLASS	S ENDORSEMENT RESTRICTION SELECT UPTO 3 DRIVE						CONDITION	STATUS TYPE VALUE !		DR STATUS TV	DRUG TEST(S) STATUS TYPE RESULT SELECT UPTO 4			
1						_	RIJUANA	4		4		out- Makean	SELECT OF TO .	
IINIT#	NAME: LAST	T FIRST MIDDLE			OTHER DRUG 1				1 1	PATE OF DIDTU	1	1	Tacupen	
0 2	SS: STREET, CITY, STATE, ZIP ROBINSON VAIL RD, FRANKLIN, OH, 45005 S INJURED TAKEN DISTRACTED BY INJURED TAKEN TO: MEDICAL FACILITY BY E OPERATOR LICENSE NUMBER OFFENSE CHARGED RJ474388 S ENDORSEMENT RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY ALCOHOL MA OTHER DRUG NAME: LAST, FIRST, MIDDLE ELLIOT, JOSHUA, A S: STREET, CITY, STATE, ZIP PRUCEWAY DR, SPRINGBORO, OH, 45066 SINJURED TAKEN BY INJURED TAKEN TO: MEDICAL FACILITY BY ALCOHOL MA SS STREET, CITY, STATE, ZIP PRUCEWAY DR, SPRINGBORO, OH, 45066 S INJURED TAKEN BY OFFENSE CHARGED SSO37423 S ENDORSEMENT RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY ALCOHOL MA ALCOHOL MA 1 OTHER DRUG NAME: LAST, FIRST, MIDDLE S: STREET, CITY, STATE, ZIP STATE TO THE RESTRICTION SELECT UP TO 3 DRIVER ALCOHOL MA 1 OTHER DRUG NAME: LAST, FIRST, MIDDLE S: STREET, CITY, STATE, ZIP STATE TO THE RESTRICTION SELECT UP TO 3 DRIVER ALCOHOL MA 1 OTHER DRUG NAME: LAST, FIRST, MIDDLE								1 0	DATE OF BIRTH / . 0 . 9 . / . 1	986	AGE 3 3	GENDER	
0	UNIT # NAME: LAST, FIRST, MIDDLE 0 2 ELLIOT, JOSHUA, A ADDRESS: STREET, CITY, STATE, ZIP 400 SPRUCEWAY DR, SPRINGBORO, OH, 45066 INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIT USED 0 USTATE OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL CODE									T PHONE - INCLUDE AREA	-		141	
400 SF	PRUCEW/	AY DR, SPRINGBOR	O, OH,	45066					9 3 7 6 9 4 1 8 5 1					
8	INJURED				TAKEN TO	o: MEDICAL FACILITY	(NAME, CITY)				ON AIR BAG USAG			
ON 5							USED			ELMET 0 1	1	1	1	
OL STATE				OFFEN	ISE CHA	RGED		OFFENSE DESC	RIPTION		CITATION NUMBER			
ОН														
E OL CLASS	SELECT UP TO 2	T RESTRICTION SELECT	DIS	STRACTED		_		CONDITION		TYPE VALUE	STATUS TYP	PE RESULT	T SELECT UP TO 4	
4	BY							, 1 ,	1	1	1 1 1			
UNIT#	NAME: LAST	, FIRST, MIDDLE						L		DATE OF BIRTH		AGE	GENDER	
										90 - 90 - 90 <u>- 12 - 1</u> 0	1 1 1	l 1		
ADDRESS	SS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
910 10										1	10 3	1		
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-C	GOMPLIANT	ON AIR BAG USAG	E EJECTION	TRAPPED	
STATE							□ мс н	ELMET						
OL STATE	OPERATUR	LICENSE NUMBER		OFFENSE CHARGED LOCAL CODE		OFFENSE DESC	RIPTION	RIPILON		NUMBER				
OL CLASS	ENDORSEMENT	T RESTRICTION SELECT	TUPTO3 DR	RIVER	ALC	OHOL / DRUG SUSPE	FOTED	CONDITION	AL	COHOL TEST	DR	DRUG TEST(S)		
	SELECT UPTO 2			STRACTED			RIJUANA	00	STATUS			PE RESULT		
					0	THER DRUG		<u> </u>		• t r t J			11	
1-FATAL	JRIES	1-FRONT - LEFT SIDE	1 - NOT DEF	AIR BAG PLOYED		0L CLASS 1-CLASS A		OL RESTRIC 1-ALCOHOLINTER		DRIVER DISTRACTED		TEST STA	TUS	
2-SUSPECTED	SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYED FRONT			2 - CLASS B		2 - CDL INTRASTATI	E ONLY	E ONLY 2 - MANUALLY OPERATING		AN 2-TEST REFUSED		
3-SUSPECTED 4-POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - DEPLOY			ED BOTH FRONT / SIDE 4 - REGULAR CLASS PLICABLE (OHIO = D)			3 - CORRECTIVE LE	DEVICE (TEXTING, TYPI		DING 3-1E	NG, SAMPLE / UNUSABLE 4-TEST GIVEN, RESULTS KNOWN		
5 - NO APPAREN								5 - EXCEPT CLASS	A BUS	DIALING) BUS 3-TALKING ON HANDS-FRE				
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOY	YMENT UNKNO	JMN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS	A	COMMUNICATION DEV	111	EST GIVEN, RES NKNOWN	ULTS	
1 - NOT TRANSPO	ORTED	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	F	JECTION		OL ENDORSEN	MENT	7 - EXCEPT TRACTO		COMMUNICATION DEV	/ICE AL	COHOL TES	ST TYPE	
2 - EMS	JULIIL	(MOTORCYCLE SIDE CAR)	1 - NOT EJE			H - HAZMAT	IE N.	8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE	1 - NO			
3 - POLICE	3-POLICE 8-THIRD-MIDDLE 9-OTHER/UNKNOWN 9-THIRD-RIGHT SI		2 - PARTIALLY EJECTED			M - MOTORCYCLE		9 - LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER 7 - OTHER DISTRACTION		2 - BLOOD 3 - URINE		
	10 - SLEEPER SECTION		3 - TOTALLY EJECTED 4 - NOT APPLICABLE			P - PASSENGER RESTRICTIONS N - TANKER 10 - LIMITED TO DAY		LIGHT ONLY INSIDE THE VEHICLE		4 - BF	4 - BREATH			
1 - NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	Ī	RAPPED		Q - MOTOR SCOOTER		11 - LIMITED TO EMP		B - OTHER DISTRACTION (THE VEHICLE				
2 - SHOULDER BI	P - SHOULDER BELT ONLY USED ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,		R - THREE-WHEEL MOTORCYCLE 1 - NOT TRAPPED S - SCHOOL BUS			TORCYCLE	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND		9 - OTHER / UNKNOWN		DRUG TEST TYPE 1-NONE			
3 - LAP BELT ON 4 - SHOULDER &		PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2+EXTRICATED BY CLOSED MECHANICAL MEANS			T - DOUBLE & TRIPLE TRAILERS		CONTROLS, OR O	THER	CONDITION		2 - BL00D		
5 - CHILD RESTR	RAINT SYSTEM -	CARGO AREA 13-TRAILING UNIT	7 1122001			X - TANKER / HAZMAT	ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN	J- 01	3 - URINE 4 - OTHER			
6 - CHILD RESTR	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR	ING ON VEHICLE EXTERIOR		ALL VANE HIPERING			15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT			SSED,		
REAR FACING 7 - BOOSTER SEA		(NON-TRAILING UNIT) 15 - NON-MOTORIST						16 - OUTSIDE MIRROI	R			1 - AMPHETAMINES		
8 - HELMET USE		99 - OTHER / UNKNOWN						17 - PROSTHETIC AID 18 - OTHER		5- FELL ASLEEP, FAINTED FATIGUED, ETC.	D, 2-8A	2 - BARBITURATES		
9 - PROTECTIVE : (ELBOW, KNEI								18-OIHER		6- UNDER THE INFLUENCE				
10 - REFLECTIVE										OF MEDICATIONS / DRU /ALCOHOL	165	5 - COCAINE		
11 - LIGHTING - P / BICYCLE ON										9- OTHER / UNKNOWN		PIATES / OPIOIDS	S	
99 - OTHER / UNKN	NWO											7 - OTHER 8 - NEGATIVE RESULTS		

	OHIO DI OF PUBI	OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER							
									L P 1 9 1 2 1 5 0 0 6 3 4 9							
	UNIT#	NAME: LA	ST, FIRST, MIDDLE		DATE OF BIRTH AGE GENDER											
	_ 1	BYRD,	JARAK		0 6 / 2 9 / 2 0 0 3 1 6 M											
1	ADDRESS	S: STREET, CITY	, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE											
ı	5435 R	ROBINSC	N VAIL RD, FRA		9 3 7 6 0 4 2 8 8 7											
١	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Fac.	ILITY (NAME, CITY)	SAFETY EQUIPMENT	SEATING POSITION AIR BAG USAGE FLECTION TRAPPE								
1	5	TAKEN BY				•	USED 0 4	MC HELMET	0 3	0 1	1	1				
i	UNIT#	NAME. LA	ST, FIRST, MIDDLE		la							_				
ı	2		. KELLY. M						E OF BIRTH		AGE	GENDER				
Į		1							3 / 1 9		3 1	F_				
ı	4	STREET, CITY		0000000	5000	CONTACT PHONE	- INCLUDE AREA CO	DE								
	400 SPRUCEWAY DR, SPRINGBORO, OH, 4				5066	9 3 7 7 8 9 7 5 9 5										
Ì	INJURIES	JRIES INJURED EMS AGENCY (NAME) TAKEN			INJURED TAKEN TO: Medical Facility (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED				
ı	_ 4	BY 1	CLEARCREEK		0 4			MC HELMET	1							
ı	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER								
ı	2	ELLIOT	, JETT					1 0 / 0 1 / 2 0 1 6 0 3 M								
	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE								
	400 SP	RUCEW	AY DR, SPRINGE	BORO, OH. 4	5066	066										
ě	INJURIES		EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facility (NAME, CITY) SAFETY EQUIPMENT											
ı	. 5	TAKEN BY	LING AGENCY (NAME)		INJURED TAKEN TO: MEDICAL PACE	LITY (NAME, CITY)	USED	DOT-COMPLIANT MC HELMET	SEATING POSITION			TRAPPED				
Ł		J					0 5	MC HELMET	0 6	0 5	1_	1				
ı	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER				
	لـــا															
200	ADDRESS:	DDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
all a																
٥	INJURIES INJURED EMS AGENCY (NAME) TAKEN BY				INJURED TAKEN TO: MEDICAL FACI	LITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED				
ı					USED			MC HELMET								
r		INJU	RIES	SAFET	/ EQUIPMENT USED	4	SEATING POS	ITION		AIR BAG U	SACE					
	1 - FATA	L.		1 - NONE US			T – LEFT SIDE				- NGL					
	2 - SUSPECTED SERIOUS INJURY				OCCUPANT (MOTORCYCLE DRIVI R BELT ONLY USED 2- FRONT - MIDDLE			1 - NOT DEPLOYED ER) 2 - DEPLOYED FRONT								
									3 - DEPLOYED SIDE							
	4 - POSSIBLE INJURY 3 - LAP BELT			ONLY USED	T - RIGHT SIDE		4 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE									
K					R & LAP BELT USED	4 - SECOND – LEFT SIDE (MOTORCYCLE PASSI										
ı				STRAINT SYSTEM -		ND – MIDDLE		5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN								
				FACING	6 - SECO	ND – RIGHT SIC	ÞΕ									
n		RANSPOR			STRAINT SYSTEM -		- LEFT SIDE	CAD								
h	/TREATED AT SCENE REAR FAC 2 - EMS 7 - BOOSTER 3 - POLICE 8 - HELMET 9 - OTHER / UNKNOWN 9 - PROTECTI					ORCYCLE SIDE O – MIDDLE	CAR)	EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED								
į,) – RIGHT SIDE										
b					10 - SLEEI	PER SECTION O	F TRUCK CAB									
М				IVE PADS USED KNEES, ETC.)		ENGER IN OTH										
	10 - REFLECTI				· · · · · · · · · · · · · · · · · · ·	CARGO AREA (NON-TR BUS, PICK-UP WITH CAP 12 - PASSENGER IN UNET CARGO AREA			4 - NOT AP	PLICABLE						
					G – PEDESTRIAN				TRAPPED							
	/ BICYCLE 99 - OTHER / U							1 - NOTTRAPPED 2 - EXTRICATED BY MECHANICAL MEANS								
				INKNOWN		13 - TRAILING UNIT 14 - RIDING ON VEHICLE (NON-TRAILING UNIT)					AL					
						15 - NON-N	MOTORIST		3 - FREED MEANS	BY NON-ME	CHANICA	AL.				
						99 - OTHE	R / UNKNOWN		IVIEANS							
S	NAME: LAST,	AME: LAST, FIRST, MIDDLE						DATE	OF BIRTH		AGE	GENDER				
WITNESS																
H M	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE	- INCLUDE AREA COD	E						
S	NAME: LAST,	: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GENDER								
MITNESS																
	ADDRESS: S	SS: STREET, CITY, STATE, ZIP						CONTACT PHONE	- INCLUDE AREA COD	E						
в																
*								1 1	1 1 1	1 1	1	DATE OF BIRTH AGE GENDER				
3	NAME: LAST,	, FIRST, MIDDLI						DATE	OF BIRTH		AGE	GENDER				
3	NAME: LAST,	, FIRST, MIDDLI								T	AGE	GENDER				
3		, FIRST, MIDDLI							9 9 9 3		AGE	GENDER				
WITNESS W									9 9 9 3		AGE	GENDER				