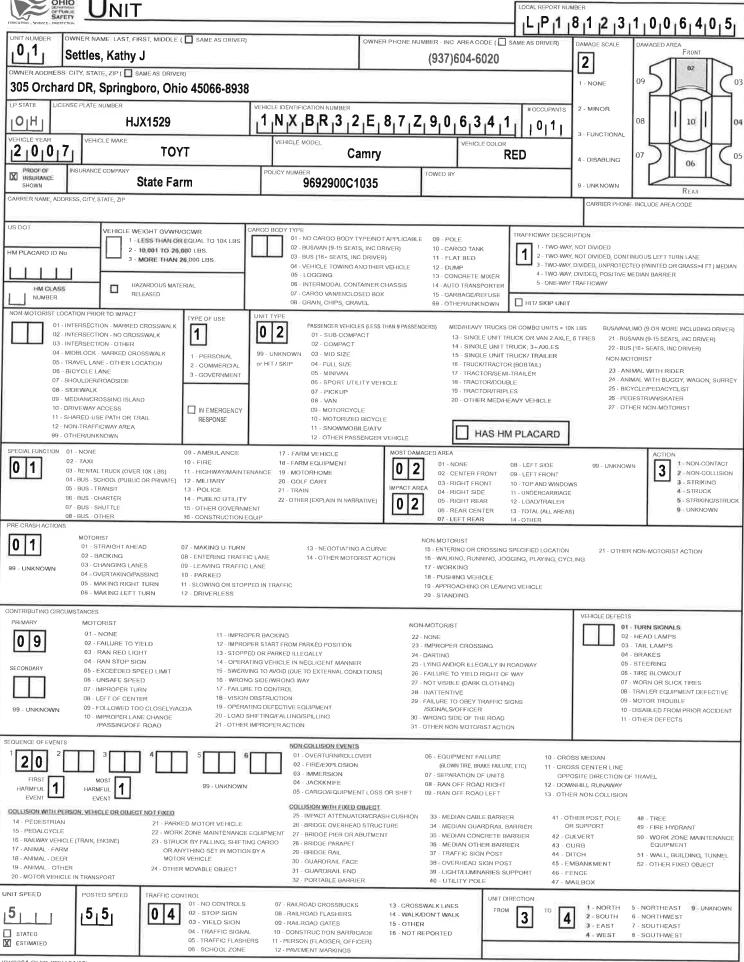
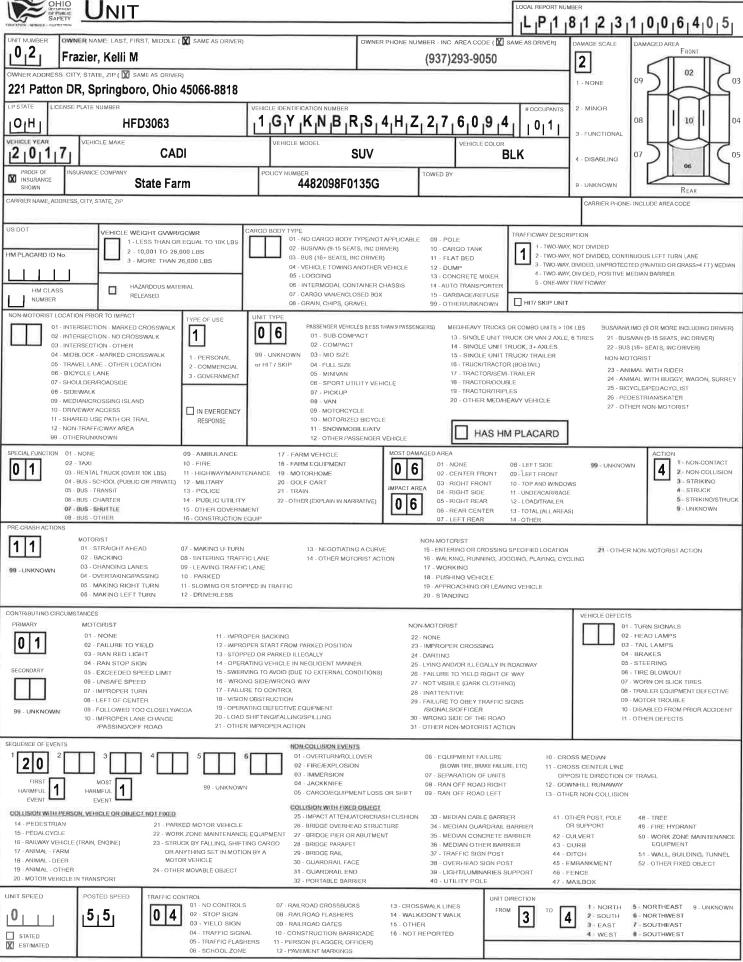
I RAFFIC CRASH REPORT  LOCAL INFORMATION	LP181	12 <sub>1</sub> 3 <sub>1</sub> 1 <sub>1</sub> 0 <sub>1</sub> 0 <sub>1</sub> 6 <sub>1</sub>	4_0_5_ CRASH SEVE	1 - SOLVED 1 - SOLVED 2 - UNSOLVED								
PHOTOS TAKEN DO UNDER STATE PROPERTY PROPERTY PROPERTY DO UNA REPORTING AGENCY NOIC * REPORTING AGENCY NAME * Clearcreek Twp. Po	olice Department		NUMBER OF UNIT IN ERROR 09 99 -									
COUNTY* CITY VILLAGE, TOWNSHIP *    8   3   VILLAGE*   CITY VI		CRASH DATE *  [1,2,3,1,2,0,1]	1 8 1 7 0	7 DAY OF WEEK								
DEGREES / MINUTES / SECONDS  LATITUDE  O / // LONGITUDE O / // O / //	O LATITUDE 3   9   5	7,1,1,9,9,	LONGITUDE - 8   4   2   0	2 <sub>1</sub> 6 <sub>1</sub> 5 <sub>1</sub> 2 <sub>1</sub>								
ROADWAY DIVISION DIVIDED DIVIDED LANE DIRECTION OF TRAVEL NUMBER OF THRU LANES ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEY	CT - COURT	HE - HEIGHTS MP - MILEPOST HW - HIGHWAY PK - PARKWAY LA - LANE PI - PIKE	PL - PLACE ST - STRE RD - ROAD TE - TERRA SQ - SQUARE TL = TRAIL	ACE								
LOCATION ROUTE NUMBER ROUTE TYPE 1 LOCATION ROUTE NUMBER LOC PREFIX LOCATION ROAD NAME  N, S, E, W  W Lytle 5pts	R D  ₽	OCATION ROUTE TYPES <sup>1</sup> IR - INTERSTATE ROUT US - US ROUTE SR - STATE ROUTE		UMBERED COUNTY ROUTE UMBERED TOWNSHIP ROUTE								
DISTANCE FROM REFERENCE    MILES   FEET   YARDS   F   Type												
REFERENCE POINT USED  1 INTERSECTION 2-MILE POST 3-HOUSE NUMBER  0 2 O 2 ON SAMP  10 - NOT AN INTERSECTION 08 - FIVE-POINT, OR MORE  11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAILS 11 - CN ROADWAY 5 - ON GORE 12 - SHARED-USE PATHS OR TRAILS 13 - HOUSE NUMBER  10 - ON ROADWAY 5 - ON GORE 11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAILS 13 - INTERSECTION 08 - FIVE-POINT, OR MORE 14 - ON ROADWAY 5 - ON GORE 15 - TRAFFIC CIRCLE/ROUNDABOUT 10 - DRIVEWAY/ALLEY ACCESS												
ROAD CONTOUR  1 STRAIGHT LEVEL 4 - CURVE GRADE 2 STRAIGHT GRADE 9 - UNKNOWN 3 - CURVE LEVEL  ROAD CONDITIONS PRIMARY SECONDARY 02 - WET 03 - SNOW 04 - ICE	05 - SAND, MUD, DIR 06 - WATER (STANDIN 07 - SLUSH 08 - DEBRIS*		OLES, BUMPS, UNEVEN PAVEME	ENT *  *SECONDARY CONDITION ONLY								
MANNER OF CRASH COLLISION/MPACT  1 - NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING B - SIDESWIPE, OPPOSITE DIRECTION 1 - NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING B - SIDESWIPE, OPPOSITE DIRECTION 1 - NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING B - SIDESWIPE, OPPOSITE DIRECTION 1 - NOT COLLISION BETWEEN 2 - REAR-END 5 - BACKING B - SIDESWIPE, OPPOSITE DIRECTION 9 - UNKNOWN	WEATHER  1 - CLEAR 2 - CLOUDY 3 - FOG SMO	4 · RAIN 5 · SLEET, HAIL G <sub>ii</sub> SMOKE 6 · SNOW	7 - SEVERE CROSSWIND: 8 - BLOWING SAND, SOIL, 9 - OTHER/UNKNOWN									
ROAD SURFACE  1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, 5 - DIRT 6 - OTHER  LIGHT CONDITIONS  PRIMARY SECONDARY 1 - DAYLIGHT 2 - DAWN 3 - DUSK 4 - DARK - LIGHTEC	6 = DARK - UNKI 7 - GLARE*	DWAY NOT LIGHTED 9 - U NOWN ROAD WAY LIGHTING * SECONDARY CONE	JNKNOWN SCHOOL ZONE RELATED	SCHOOL BUS RELATED  YES, SCHOOL BUS DIRECTLY INVOLVED YES, SCHOOL BUS INDIRECTLY INVOLVED								
WORKERS PRESENT  WORK ZONE  RELATED  WORKERS PRESENT  LAW ENFORCEMENT PRESENT (OFFICERVEHICLE)  LAW ENFORCEMENT PRESENT (VEHICLE GIJLY)  LAW ENFORCEMENT PRESENT (VEHICLE GIJLY)  LAW ENFORCEMENT PRESENT (VEHICLE GIJLY)  TYPE OF WORK ZONE  1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 5 - OTHER 3 - WORK ON SHOULDER OR MEDIAN	T OR MOVING WORK	DOATION OF CRASH IN WORK ZONE  1 - BEFORE THE FIRST WOR 2 - ADVANCE WARNING ARE 3 - TRANSITION AREA		4 - ACTIVITY AREA 5 - TERMINATION AREA								
Unit 1 was traveling westbound on W. Lytle 5pts Rd. directly behind unit 2. Unit 2 slowed to a stop at the intersection of W. Lytle 5pts Rd. and Yankee Rd. Unit 1 failed to maintain a safe stopping distance and struck unit 2 in the rear.												
W. Lytle 5pts												
		<i>ŷ</i>	control of the contro	Unit 2- [bes]								
	-	Crossley Rd.	NOT	1 N TO SCALE								
			HER INVESTIGATION TIME	TOTAL MINUTES								
	ER'S BADGE NUMBER CH	ECKED BY	310	0 0 6 5 Page 1 of 4								
Holbrook, Carl - LP	L 5 2   C	COH530										





	E SERVICE	OHIO OF PUBLIC SAFETY	Иот	ORIST	/ N	ON-	<u>Mo</u>	TOF	RIST / (	Occ	UPANT	LOCAL REPO		1 <sub>1</sub> 2 <sub>1</sub> 3	1,0,0	6 4	0   5	
UNIT NUMBER NAME LAST, FIRST, MIDDLE  Settles, Kristen Nicole									0 14 2	9,2	2,0,0,2	16	GENDE	F-FEMALE M-MALE				
RIST	ADDRESS, CITY, STATE, ZIP 305 Orchard DR, Springboro, Ohio 45066											-	CT PHONE- INCLUDI	=1				
INJURIES INJURED TAKEN BY EMS AGENCY						MEDICAL FACILITY INJURED TAKEN TO  SAFETY EQUIPMENT USED  0 4					_ DOI COM	MOTORCYCLE 01						
MOTORIE					OL CLAS	NO MIC TO				ALCOHOL TEST STATU	ALCOHOL TEST	T TYPE	NLCOHOL TEST VAI	LUE DRUGTES	ST STATUS	DRUG TEST TYPE		
- 1	OFFENSE CHARGED ( LOCAL CODE)					OFFENSE DESCRIPTION CITATION NUMBER  Assured Clear Distance  01						1627/			ANDS-FREE DRIVER DISTRACTED BY EVICE 1			
-1	UNIT NUMBER NAME LAST, FIRST, MIDDLE    0   2   Frazier, Kelli M							D					191	1,9,6,3	^GE 55	GENDE	R F-FEMALE M-MALE	
DDRESS, CITY, STATE, ZIP    CONTACT PHONE: INCLUDE AREA CODE   CONTACT PHONE: INCLUDE AREA CODE																		
TON-NON-IST	_ 1	URIES INJURED TAKEN BY EMS AGENCY		OIC22	MEDICAL FACILITY INJURED T			mi Valley				IPLIANT CLE	SEATING POSITIO		SAGE EJE	CTION TRAPPED		
ž	LSTATE O H	RQ358	ENSE NUMBER		OL CLASS	NO VALID OL	□ M/C END	CONDITION	ALCOHOLIDRUG SI	USPECTED	ALCOHOL TEST STATUS	s ALCOHOL TEST	TYPE A	LCOHOL TEST VAL	UE DRUGTES	T STATUS	DRUG TEST TYPE	
C	DFFENSE CH	HARGED (	LOCAL CODE)		OFF	ENSE DESCRIP	TION		11 15: 3:1	СІТ	TATION NUMBER			HAND DEVIC	E I	1	PACTED BY	
	INJURIES I INJURED TAKEN BY SAFETY EQUIPMENT USED 9 - UNKNOWN SAFETY EQUIPMENT  1 - NOI INJURY / NONE REPORTED 1 - NOT TRANSPORTED / TREATED AT SCENE 1 - NON-MOTORIST 2 - EMS 1 - POLICE 3 - POLICE 3 - POLICE 5 - FATAL 4 - OTHER 9 - UNKNOWN  SAFETY EQUIPMENT USED 9 - UNKNOWN SAFETY EQUIPMENT NON-MOTORIST 0 - NON-MOTORIST 0 - NON-MOTORIST 0 - NON-MOTORIST 1 - PORWARD FACING 1 - PORWARD FACING 1 - PROTECTIVE PADS USED 1 - OTHER 1 - OTHER 9 - UNKNOWN  SAFETY EQUIPMENT OF - CHILD RESTRAINT SYSTEM - FORWARD FACING 1 - PORWARD FACING 1 - PROTECTIVE PADS USED 1 - OTHER 9 - UNKNOWN										NG							
02 - FRONT - MIDDLE         08 - THIRD MIDDLE           03 - FRONT - RIGHT SIDE         09 - THIRD - RIGHT           04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)         10 - SLEEPER SECT           05 - SECOND - MIDDLE         11 - PASSENGER IN						LE HT SIDE CTION OF CAI IN OTHER EI						OSED CARGO AREA			NR BAG USAGE  1 - NOT DEPLOYED  2 - DEPLOYED FRONT  3 - OPPLOYED SIDE  4 - DEPLOYED BOTH FRONT/SIDE  5 - NOT APPLICABLE  9 - DEPLOYMENT UNKNOWN			
1 - NOT EJECTED         1 - NOT TRAPPED         1 - CLA           2 - TOTALLY EJECTED         2 - EXTRICATED BY         2 - CLA           3 - PARTHALLY EJECTED         MECHANICAL MEANS         3 - CLA           4 - NOT APPLICABLE         3 - EXTRICATED BY         4 - REGI					RATOR LICE CLASS A CLASS B CLASS C REGULAR CLAS MC/MOPED O	1 - APPARENTLY NORMAL 5 - FELL ASLEEP, F 2 - PHYSICAL IMPAIRMENT 6 - UNDER THE INF 3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED) MEDICATIONS, ASS (OHIO IS 'D') 4 - ILLINESS 7 - OTHER						FAINTED, FATIGUED  1 - NONE  1 - NONE  2 - YES - ALCOHOL SUSPECTED  3 - YES - HDD NOT IMPAIRED  4 - YES - DRUGS SUSPECTED  5 - YES - ALCOHOL AND DRUGS SUSPECTED						
1 - NONE GIVEN         1 - NONE         1           2 - TEST REFUSED         2 - BLOOD         2           3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE         3 - URINE         3           4 - TEST GIVEN, RESULTS KNOWN         4 - BREATH         4							1 - NONE G 2 - TEST RI 3 - TEST G 4 - TEST G	RUG TEST STATUS  1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN				1 - NO DISTR 2 - PHONE 3 - TEXTING 4 - ELECTRO 5 - OTHER EL	DRIVER DISTRACTED BY  1 - NO DISTRACTION REPORTED 6 - OTHER INSIDE THE VEHICLE 2 - PHONE 7 - EXTERNAL DISTRACTION 3 - TEXTING/E-MAILING 4 - ELECTRONIC COMMUNICATION DEVICE 5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD)					
U	NIT NUMBER	NAME LAS	T, FIRST, MIDDI	LE								DATE OF BIRTH	LI		AGE	GENDE	F - FEMALE M - MALE	
Al	DRESS, CIT	Y, STATE, ZIP											CONTAC	T PHONE-INCLUDE	AREA CODE			
IN.	JURIES IN	JURED TAKEN	BY EMS AGE	ENCY			MEDICAL	FACILITY I	NJURED TAKEN TO	SAFE	ETY EQUIPMENT USE	DOT COMI MOTORCYC HELMET		SEATING POSITION	AIR BAG US	AGE EJEC	CTION TRAPPED	
UN	IIT NUMBER	NAME LAS	r, FIRST, MIDDI	LE								DATE OF BIRTH		LLL	AGE	GENDE	R F-FEMALE M-MALE	
AC	DRESS, CITY	Y, STATE, ZIP											CONTAC	T PHONE- INCLUDE	AREA CODE			
IN.	IURIES IN	JUREO TAKEN I	BY EMS AGE	NCY			MEDICAL	FACILITY IN	IJURED TAKEN TO	SAFE	ETY EQUIPMENT USE	DOT COMI MOTORCYC HELMET		SEATING POSITION	AIR BAG US	AGE EJEC	CTION TRAPPED	