



# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER\*

<input checked="" type="checkbox"/> PHOTOS TAKEN	<input checked="" type="checkbox"/> OH-2	<input type="checkbox"/> OH-3	LOCAL INFORMATION	2 2 0 3 1 0 3 5
<input type="checkbox"/> SECONDARY CRASH	<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME*	HIT/SKIP
<input type="checkbox"/> PRIVATE PROPERTY			Fairfield Police Department	1 - SOLVED
			NCIC*	2 - UNSOLVED
			0 0 9 0 1	NUMBER OF UNITS
				0 2
				UNIT IN ERROR
				0 1 98 - ANIMAL
				0 1 99 - UNKNOWN

COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*	CRASH DATE / TIME*	CRASH SEVERITY
0 9	1	City of Fairfield	05022022 1311	3

ROUTE TYPE	ROUTE NUMBER	PREFIX	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES
			Mack	R D	39.311537
REFERENCE	ROUTE TYPE	ROUTE NUMBER	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES
			3871		-84.493156

REFERENCE POINT	DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE	INTERSECTION RELATED
3	1 - NORTH	IR - INTERSTATE ROUTE(TP)	AL - ALLEY	<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH
	2 - SOUTH	US - FEDERAL US ROUTE	AV - AVENUE	<input type="checkbox"/> WITHIN INTERCHANGE AREA
	3 - EAST	SR - STATE ROUTE	BL - BOULEVARD	NUMBER OF APPROACHES
	4 - WEST	CR - NUMBERED COUNTY ROUTE	CR - CIRCLE	
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	TR - NUMBERED TOWNSHIP ROUTE	CT - COURT	
	1 - MILES		DR - DRIVE	
	2 - FEET		HE - HEIGHTS	
	3 - YARDS		PL - PLACE	<input type="checkbox"/> ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT	MANNER OF CRASH COLLISION/IMPACT	DIRECTION OF TRAVEL	MEDIAN TYPE
0 1	3	1 - NORTH	1 - DIVIDED FLUSH MEDIAN (<4 FEET)
		2 - SOUTH	2 - DIVIDED FLUSH MEDIAN (>4 FEET)
		3 - EAST	3 - DIVIDED, DEPRESSED MEDIAN
		4 - WEST	4 - DIVIDED, RAISED MEDIAN (ANY TYPE)
			9 - OTHER/UNKNOWN

<input type="checkbox"/> WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE
<input type="checkbox"/> WORKERS PRESENT	1 - LANE CLOSURE	1 - BEFORE THE 1ST WORK ZONE WARNING SIGN	1	1 - DRY	1 - CONCRETE
<input type="checkbox"/> LAW ENFORCEMENT PRESENT	2 - LANE SHIFT/CROSSOVER	2 - ADVANCE WARNING AREA		2 - WET	2 - BLACKTOP, BITUMINOUS, ASPHALT
<input type="checkbox"/> ACTIVE SCHOOL ZONE	3 - WORK ON SHOULDER OR MEDIAN	3 - TRANSITION AREA		3 - SNOW	3 - BRICK/BLOCK
	4 - INTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA		4 - ICE	4 - SLAG, GRAVEL, STONE
	5 - OTHER	5 - TERMINATION AREA		5 - SAND, MUD, DIRT, OIL, GRAVEL	5 - DIRT
				6 - WATER (STANDING, MOVING)	9 - OTHER/UNKNOWN
				7 - SLUSH	
				9 - OTHER/UNKNOWN	

LIGHT CONDITION	WEATHER
1	0 1
1 - DAYLIGHT	1 - CLEAR
2 - DAWN/DUSK	2 - CLOUDY
3 - DARK - LIGHTED ROADWAY	3 - FOG, SMOG, SMOKE
4 - DARK - ROADWAY NOT LIGHTED	4 - RAIN
5 - DARK - UNKNOWN ROADWAY LIGHTING	5 - SLEET, HAIL
9 - OTHER / UNKNOWN	6 - SNOW
	7 - SEVERE CROSSWINDS
	8 - BLOWING SAND, SOIL, DIRT, SNOW
	9 - FREEZING RAIN OR FREEZING DRIZZLE
	99 - OTHER / UNKNOWN

NARRATIVE

On 05-02-22, at 1:11 p.m. Unit 1 was traveling east on Mack Rd when the driver began to turn left and failed to yield to Unit 2, which was traveling west on Mack Rd. The driver of Unit 1 was also charged with Driving Under Suspension.

SEE OH-2

Indicate the north direction with an "N" on the compass diagram.

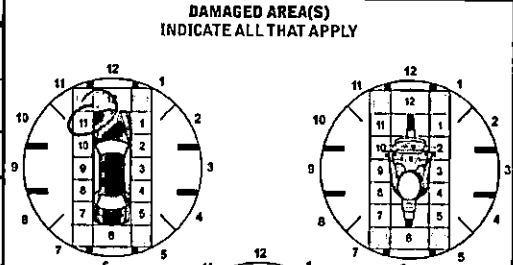
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	SCENE CLEARED DATE / TIME	REPORT TAKEN BY
05022022 1311	05022022 1314	05022022 1317	05022022 1405	<input checked="" type="checkbox"/> POLICE AGENCY
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	<input type="checkbox"/> MOTORIST
4 8		4 8	D. Setterstrom	<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OAS)
			OFFICER'S BADGE NUMBER*	
			1 2 1	
			CHECKED BY OFFICER'S NAME*	
			Sgt. J. Spiga	
			CHECKED BY OFFICER'S BADGE NUMBER*	
			8 4	

LOCAL REPORT NUMBER  
 2, 2, 0, 3, 1, 0, 3, 5

**OWNER**  
 UNIT # 01  
 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)  
 Freeman, Leif  
 OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)  
 3930 Mack Rd #128 Fairfield, OH 45014  
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  
 COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**DAMAGE**  
 DAMAGE SCALE  
 1 - NONE  
 2 - MINOR DAMAGE  
 3 - FUNCTIONAL DAMAGE  
 4 - DISABLING DAMAGE  
 9 - UNKNOWN  
 4

**VEHICLE**  
 LP STATE OH  
 LICENSE PLATE # HOC4313  
 VEHICLE IDENTIFICATION # G1LZH57B68F176413  
 VEHICLE YEAR 2008  
 VEHICLE MAKE Chevrolet  
 INSURANCE VERIFIED  
 INSURANCE COMPANY  
 INSURANCE POLICY #  
 COLOR Gold  
 VEHICLE MODEL Malibu



TYPE OF USE  
 COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE  
 US DOT #  
 TOWED BY: COMPANY NAME  
 Marcell  
 HAZARDOUS MATERIAL  
 MATERIAL RELEASED  CLASS #  PLACARD ID #

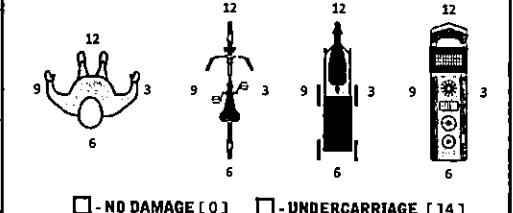
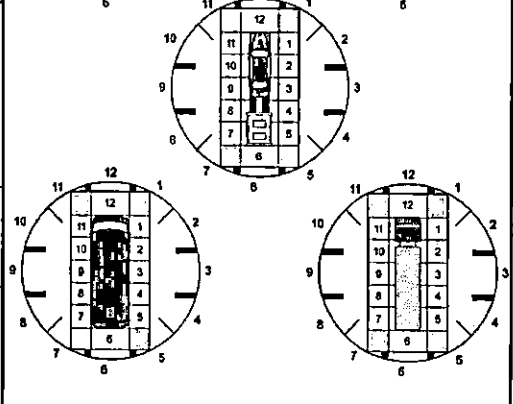
UNIT TYPE  
 01  
 1 - PASSENGER CAR  
 2 - PASSENGER VAN (MINIVAN)  
 3 - SPORT UTILITY VEHICLE  
 4 - PICK UP  
 5 - CARGO VAN  
 6 - VAN (9-15 SEATS)  
 7 - MOTORCYCLE 2-WHEELED  
 8 - MOTORCYCLE 3-WHEELED  
 9 - AUTOCYCLE  
 10 - MOPED OR MOTORIZED BICYCLE  
 11 - ALL TERRAIN VEHICLE (ATV/UTV)  
 12 - GOLF CART  
 13 - SNOWMOBILE  
 14 - SINGLE UNIT TRUCK  
 15 - SEMI-TRACTOR  
 16 - FARM EQUIPMENT  
 17 - MOTORHOME  
 18 - LIMO (LIVERY VEHICLE)  
 19 - BUS (16+ PASSENGERS)  
 20 - OTHER VEHICLE  
 21 - HEAVY EQUIPMENT  
 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE  
 23 - PEDESTRIAN / SKATER  
 24 - WHEELCHAIR (ANY TYPE)  
 25 - OTHER NON-MOTORIST  
 26 - BICYCLE  
 27 - TRAIN  
 99 - UNKNOWN OR HIT/SKIP  
 # OF TRAILING UNITS 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?  
 2  
 1 - YES 2 - NO 9 - OTHER / UNKNOWN  
 AUTONOMOUS MODE LEVEL  
 0  
 0 - NO AUTOMATION  
 1 - DRIVER ASSISTANCE  
 2 - PARTIAL AUTOMATION  
 3 - CONDITIONAL AUTOMATION  
 4 - HIGH AUTOMATION  
 5 - FULL AUTOMATION  
 9 - UNKNOWN

SPECIAL FUNCTION  
 01  
 1 - NONE  
 2 - TAXI  
 3 - ELECTRONIC RIDE SHARING  
 4 - SCHOOL TRANSPORT  
 5 - BUS - TRANSIT/COMMUTER  
 6 - BUS - CHARTER/TOUR  
 7 - BUS - INTERCITY  
 8 - BUS - SHUTTLE  
 9 - BUS - OTHER  
 10 - AMBULANCE  
 11 - FIRE  
 12 - MILITARY  
 13 - POLICE  
 14 - PUBLIC UTILITY  
 15 - CONSTRUCTION EQUIPMENT  
 16 - FARM  
 17 - MOWING  
 18 - SNOW REMOVAL  
 19 - TOWING  
 20 - SAFETY SERVICE PATROL  
 21 - MAIL CARRIER  
 99 - OTHER / UNKNOWN

CARGO BODY TYPE  
 01  
 1 - NO CARGO BODY TYPE / NOT APPLICABLE  
 2 - BUS  
 3 - VEHICLE TOWING ANOTHER MOTORVEHICLE  
 4 - LOGGING  
 5 - INTERMODAL CONTAINER CHASSIS  
 6 - CARGO VAN/ENCLOSED BOX  
 7 - GRAIN/CHIPS/GRAVEL  
 8 - POLE  
 9 - CARGO TANK  
 10 - FLAT BED  
 11 - DUMP  
 12 - CONCRETE MIXER  
 13 - AUTOTRANSPORTER  
 14 - GARBAGE/REFUSE  
 99 - OTHER / UNKNOWN

VEHICLE DEFECTS  
 1 - TURN SIGNALS  
 2 - HEAD LAMPS  
 3 - TAIL LAMPS  
 4 - BRAKES  
 5 - STEERING  
 6 - TIRE BLOWOUT  
 7 - WORN OR SLICK TIRES  
 8 - TRAILER EQUIPMENT DEFECTIVE  
 9 - MOTOR TROUBLE  
 10 - DISABLED FROM PRIOR ACCIDENT  
 99 - OTHER / UNKNOWN



- NO DAMAGE [0]  - UNDERCARRIAGE [14]  
 - TOP [13]  - ALL AREAS [15]  
 - UNIT NOT AT SCENE [16]

NON-MOTORIST LOCATION AT IMPACT  
 1 - INTERSECTION - MARKED CROSSWALK  
 2 - INTERSECTION - UNMARKED CROSSWALK  
 3 - INTERSECTION - OTHER  
 4 - MIDBLOCK - MARKED CROSSWALK  
 5 - TRAVEL LANE - OTHER LOCATION  
 6 - BICYCLE LANE  
 7 - SHOULDER / ROADSIDE  
 8 - SIDEWALK  
 9 - MEDIAN/CROSSING ISLAND  
 10 - DRIVEWAY ACCESS  
 11 - SHARED USE PATHS OR TRAILS  
 12 - FIRST RESPONDER AT INCIDENT SCENE  
 99 - OTHER / UNKNOWN

ACTION  
 3  
 1 - NON-CONTACT  
 2 - NON-COLLISION  
 3 - STRIKING  
 4 - STRUCK  
 5 - BOTH STRIKING & STRUCK  
 9 - OTHER / UNKNOWN  
 1 - STRAIGHT AHEAD  
 2 - BACKING  
 3 - CHANGING LANES  
 4 - OVERTAKING/PASSING  
 5 - MAKING RIGHT TURN  
 6 - MAKING LEFT TURN  
 7 - MAKING U-TURN  
 8 - ENTERING TRAFFIC LANE  
 9 - LEAVING TRAFFIC LANE  
 10 - PARKED  
 11 - SLOWING OR STOPPED IN TRAFFIC  
 12 - DRIVERLESS  
 13 - NEGOTIATING A CURVE  
 14 - ENTERING OR CROSSING SPECIFIED LOCATION  
 15 - WALKING, RUNNING, JOGGING, PLAYING  
 16 - WORKING  
 17 - PUSHING VEHICLE  
 18 - APPROACHING OR LEAVING VEHICLE  
 19 - STANDING  
 20 - OTHER NON-MOTORIST  
 21 - STANDING OUTSIDE DISABLED VEHICLE  
 99 - OTHER / UNKNOWN

INITIAL POINT OF CONTACT  
 0 - NO DAMAGE  
 1-12 - REFER TO UNIT DIAGRAM  
 13 - TOP  
 14 - UNDERCARRIAGE  
 15 - VEHICLE NOT AT SCENE  
 99 - UNKNOWN  
 1, 2

CONTRIBUTING CIRCUMSTANCES  
 06  
 1 - NONE  
 2 - FAILURE TO YIELD  
 3 - RAN RED LIGHT  
 4 - RAN STOP SIGN  
 5 - UNSAFE SPEED  
 6 - IMPROPER TURN  
 7 - LEFT OF CENTER  
 8 - FOLLOWING TOO CLOSE / ACCA  
 9 - IMPROPER LANE CHANGE  
 10 - IMPROPER PASSING  
 11 - DROVE OFF ROAD  
 12 - IMPROPER BACKING  
 13 - IMPROPER START FROM A PARKED POSITION  
 14 - STOPPED OR PARKED ILLEGALLY  
 15 - SWERVING TO AVOID  
 16 - WRONG WAY  
 17 - VISION OBSTRUCTION  
 18 - OPERATING DEFECTIVE EQUIPMENT  
 19 - LOAD SHIFTING/FALLING/SPILLING  
 20 - IMPROPER CROSSING  
 21 - LYING IN ROADWAY  
 22 - NOT DISCERNIBLE  
 23 - OPENING DOOR INTO ROADWAY  
 99 - OTHER IMPROPER ACTION

TRAFFIC  
 TRAFFICWAY FLOW  
 1 - ONE-WAY  
 2 - TWO-WAY  
 TRAFFIC CONTROL  
 1 - ROUNDABOUT  
 2 - SIGNAL  
 3 - FLASHER  
 4 - STOP SIGN  
 5 - YIELD SIGN  
 6 - NO CONTROL  
 1, 6

SEQUENCE OF EVENTS  
 1, 2, 0  
 1 - OVERTURN/ROLLOVER  
 2 - FIRE/EXPLOSION  
 3 - IMMERSION  
 4 - JACKKNIFE  
 5 - CARGO / EQUIPMENT LOSS OR SHIFT  
 6 - EQUIPMENT FAILURE  
 7 - SEPARATION OF UNITS  
 8 - RAN OFF ROAD RIGHT  
 9 - RAN OFF ROAD LEFT  
 10 - CROSS MEDIAN  
 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL  
 12 - DOWNHILL RUNAWAY  
 13 - OTHER NON-COLLISION  
 14 - PEDESTRIAN  
 15 - PEDALCYCLE  
 16 - RAILWAY VEHICLE  
 17 - ANIMAL - FARM  
 18 - ANIMAL - DEER  
 19 - ANIMAL - OTHER  
 20 - MOTOR VEHICLE IN TRANSPORT  
 21 - PARKED MOTORVEHICLE  
 22 - WORK ZONE MAINTENANCE EQUIPMENT  
 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTORVEHICLE  
 24 - OTHER MOVABLE OBJECT

# OF THROUGH LANES ON ROAD  
 2  
 RAIL GRADE CROSSING  
 1 - NOT INVOLVED  
 2 - INVOLVED-ACTIVE CROSSING  
 3 - INVOLVED-PASSIVE CROSSING  
 UNIT / NON-MOTORIST DIRECTION  
 FROM 4 TO 3  
 1 - NORTH  
 2 - SOUTH  
 3 - EAST  
 4 - WEST  
 5 - NORTHEAST  
 6 - NORTHWEST  
 7 - SOUTHEAST  
 8 - SOUTHWEST  
 9 - OTHER / UNKNOWN

COLLISION WITH FIXED OBJECT, STRUCK  
 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  
 52 - BUILDING  
 53 - TUNNEL  
 54 - OTHER FIXED OBJECT  
 99 - OTHER / UNKNOWN

UNIT SPEED  
 3, 5  
 POSTED SPEED  
 2, 5  
 DETECTED SPEED  
 1 - STATED / ESTIMATED SPEED  
 2 - CALCULATED / EDR  
 3 - UNDETERMINED  
 1

LOCAL REPORT NUMBER  
2, 2, 0, 3, 1, 0, 3, 5

**OWNER**

UNIT # 0, 2  
OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)  
OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)  
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP  
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**DAMAGE**

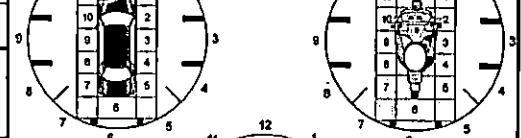
DAMAGE SCALE  
1 - NONE  
2 - MINOR DAMAGE  
3 - FUNCTIONAL DAMAGE  
4 - DISABLING DAMAGE  
9 - UNKNOWN

**VEHICLE**

LP STATE OH LICENSE PLATE # DYT3339  
VEHICLE IDENTIFICATION # 1N4BL21E178N423216  
VEHICLE YEAR 2008 VEHICLE MAKE Nissan  
INSURANCE VERIFIED Progressive INSURANCE POLICY # 923451941  
COLOR Silver VEHICLE MODEL Altima

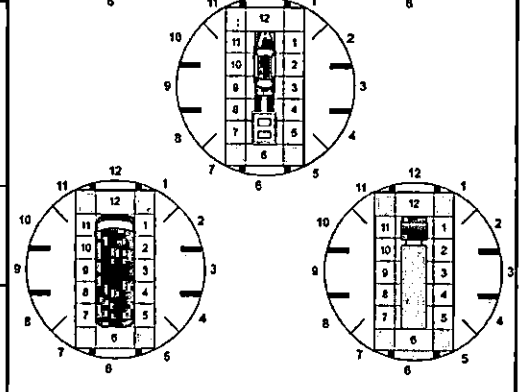
**DAMAGED AREA(S)**  
INDICATE ALL THAT APPLY

TYPE OF USE: COMMERCIAL, GOVERNMENT, IN EMERGENCY RESPONSE  
US DOT #  
HAZARDOUS MATERIAL: MATERIAL RELEASED, PLACARD



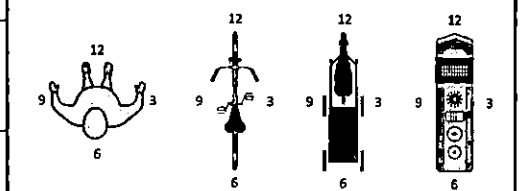
UNIT TYPE: 1-PASSENGER CAR, 2-PASSENGER VAN, 3-SPORT UTILITY VEHICLE, 4-PICKUP, 5-CARGOVAN, 6-VAN, 7-MOTORCYCLE 2-WHEELED, 8-MOTORCYCLE 3-WHEELED, 9-AUTOCYCLE, 10-MOPEL OR MOTORIZED BICYCLE, 11-ALL TERRAIN VEHICLE, 12-GOLF CART, 13-SNOWMOBILE, 14-SINGLE UNIT TRUCK, 15-SEMI-TRACTOR, 16-FARM EQUIPMENT, 17-MOTORHOME, 18-LIMO, 19-BUS, 20-OTHER VEHICLE, 21-HEAVY EQUIPMENT, 22-ANIMAL WITH RIDER, 23-PEDESTRIAN/SKATER, 24-WHEELCHAIR, 25-OTHER NON-MOTORIST, 26-BICYCLE, 27-TRAIN, 99-UNKNOWN

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1-YES 2-NO 9-OTHER/UNKNOWN  
AUTONOMOUS MODE LEVEL: 0-NO AUTOMATION, 1-DRIVER ASSISTANCE, 2-PARTIAL AUTOMATION, 3-CONDITIONAL AUTOMATION, 4-HIGH AUTOMATION, 5-FULL AUTOMATION, 9-UNKNOWN



SPECIAL FUNCTION: 1-NONE, 2-TAXI, 3-ELECTRONIC RIDE SHARING, 4-SCHOOL TRANSPORT, 5-BUS-TRANSIT/COMMUTER, 6-BUS-CHARTER/TOUR, 7-BUS-INTERCITY, 8-BUS-SHUTTLE, 9-BUS-OTHER, 10-AMBULANCE, 11-FIRE, 12-MILITARY, 13-POLICE, 14-PUBLIC UTILITY, 15-CONSTRUCTION EQUIPMENT, 16-FARM, 17-MOWING, 18-SNOW REMOVAL, 19-TOWING, 20-SAFETY SERVICE PATROL, 21-MAIL CARRIER, 99-OTHER/UNKNOWN

CARGO BODY TYPE: 1-NO CARGO BODY TYPE, 2-BUS, 3-VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4-LOGGING, 5-INTERMODAL CONTAINER CHASSIS, 6-CARGOVAN/ENCLOSED BOX, 7-GRAIN/CHIPS/GRAVEL, 8-POLE, 9-CARGO TANK, 10-FLAT BED, 11-DUMP, 12-CONCRETE MIXER, 13-AUTO TRANSPORTER, 14-GARBAGE/REFUSE, 99-OTHER/UNKNOWN



VEHICLE DEFECTS: 1-TURN SIGNALS, 2-HEAD LAMPS, 3-TAIL LAMPS, 4-BRAKES, 5-STEERING, 6-TIRE BLOWOUT, 7-WORN OR SLICK TIRES, 8-TRAILER EQUIPMENT DEFECTIVE, 9-MOTOR TROUBLE, 10-DISABLED FROM PRIOR ACCIDENT, 99-OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 0-NONE, 1-12-REFER TO UNIT DIAGRAM, 13-TOP, 14-UNDERCARRIAGE, 15-VEHICLE NOT AT SCENE, 99-UNKNOWN

NON-MOTORIST LOCATION AT IMPACT: 1-INTERSECTION-MARKED CROSSWALK, 2-INTERSECTION-UNMARKED CROSSWALK, 3-INTERSECTION-OTHER, 4-MIDBLOCK-MARKED CROSSWALK, 5-TRAVEL LANE-OTHER LOCATION, 6-BICYCLE LANE, 7-SHOULDER/ROADSIDE, 8-SIDEWALK, 9-MEDIAN/CROSSING ISLAND, 10-DRIVEWAY ACCESS, 11-SHARED USE PATHS OR TRAILS, 12-FIRST RESPONDER AT INCIDENT SCENE, 99-OTHER/UNKNOWN

ACTION: 1-NON-CONTACT, 2-NON-COLLISION, 3-STRIKING, 4-STUCK, 5-BOTH STRIKING & STRUCK, 9-OTHER/UNKNOWN, 1-STRAIGHT AHEAD, 2-BACKING, 3-CHANGING LANES, 4-OVERTAKING/PASSING, 5-MAKING RIGHT TURN, 6-MAKING LEFT TURN, 7-MAKING U-TURN, 8-ENTERING TRAFFIC LANE, 9-LEAVING TRAFFIC LANE, 10-PARKED, 11-SLOWING OR STOPPED IN TRAFFIC, 12-DRIVERLESS, 13-NEGOTIATING A CURVE, 14-ENTERING OR CROSSING SPECIFIED LOCATION, 15-WALKING, RUNNING, JOGGING, PLAYING, 16-WORKING, 17-PUSHING VEHICLE, 18-APPROACHING OR LEAVING VEHICLE, 19-STANDING, 20-OTHER NON-MOTORIST, 21-STANDING OUTSIDE DISABLED VEHICLE, 99-OTHER/UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 1-NONE, 2-FAILURE TO YIELD, 3-RAN RED LIGHT, 4-RAN STOP SIGN, 5-UNSAFE SPEED, 6-IMPROPER TURN, 7-LEFT OF CENTER, 8-FOLLOWING TOO CLOSE/ACDA, 9-IMPROPER LANE CHANGE, 10-IMPROPER PASSING, 11-DROVE OFF ROAD, 12-IMPROPER BACKING, 13-IMPROPER START FROM A PARKED POSITION, 14-STOPPED OR PARKED ILLEGALLY, 15-SWERVING TO AVOID, 16-WRONG WAY, 17-VISION OBSTRUCTION, 18-OPERATING DEFECTIVE EQUIPMENT, 19-LOAD SHIFTING/FALLING/SPILLING, 20-IMPROPER CROSSING, 21-LYING IN ROADWAY, 22-NOT DISCERNIBLE, 23-OPENING DOOR INTO ROADWAY, 99-OTHER IMPROPER ACTION

TRAFFICWAY FLOW: 1-ONE-WAY, 2-TWO-WAY  
TRAFFIC CONTROL: 1-ROUNDOABOUT, 2-SIGNAL, 3-FLASHER, 4-STOP SIGN, 5-YIELD SIGN, 6-NO CONTROL

SEQUENCE OF EVENTS: 1-OVERTURN/ROLLOVER, 2-FIRE/EXPLOSION, 3-IMMERSION, 4-JACKKNIFE, 5-CARGO/EQUIPMENT LOSS OR SHIFT, 6-EQUIPMENT FAILURE, 7-SEPARATION OF UNITS, 8-RAN OFF ROAD RIGHT, 9-RAN OFF ROAD LEFT, 10-CROSS MEDIAN, 11-CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL, 12-DOWNHILL RUNAWAY, 13-OTHER NON-COLLISION, 14-PEDESTRIAN, 15-PEDALCYCLE, 16-RAILWAY VEHICLE, 17-ANIMAL - FARM, 18-ANIMAL - DEER, 19-ANIMAL - OTHER, 20-MOTOR VEHICLE IN TRANSPORT, 21-PARKED MOTOR VEHICLE, 22-WORK ZONE MAINTENANCE EQUIPMENT, 23-STUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE, 24-OTHER MOVABLE OBJECT

# OF THROUGH LANES ON ROAD: 2  
RAIL GRADE CROSSING: 1-NOT INVOLVED, 2-INVOLVED-ACTIVE CROSSING, 3-INVOLVED-PASSIVE CROSSING

COLLISION WITH FIXED 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, 52-BUILDING, 53-TUNNEL, 54-OTHER FIXED OBJECT, 99-OTHER/UNKNOWN

UNIT / NON-MOTORIST DIRECTION: FROM 3 TO 4  
DETECTED SPEED: 1-STATED / ESTIMATED SPEED, 2-CALCULATED / EDR, 3-UNDETERMINED

FIRST HARMFUL EVENT: 1  
MOST HARMFUL EVENT: 1

UNIT SPEED: 35  
POSTED SPEED: 25



# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER

2 2 0 3 1 0 3 5

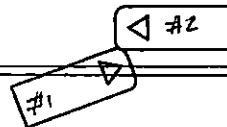
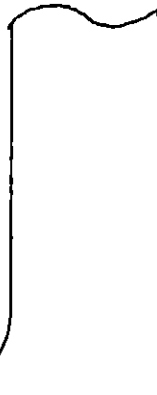
UNIT # 0 1	NAME: LAST, FIRST, MIDDLE Duncan, Lisa M.	DATE OF BIRTH 1 1 2 5 1 9 6 9	AGE 5 2	GENDER F
ADDRESS: STREET, CITY, STATE, ZIP 3930 Mack Rd #128 Fairfield, OH 45014		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES 3	INJURED TAKEN BY 2	EMS AGENCY (NAME) Fairfield EMS	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) U.C. West Chester	SAFETY EQUIPMENT USED 0 1
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED 331.17a	LOCAL CODE <input checked="" type="checkbox"/>	OFFENSE DESCRIPTION Fail to Yield Turning
OL CLASS 6	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
CONDITION 1		ALCOHOL TEST STATUS: 1 TYPE: 1 VALUE: 1		DRUG TEST(S) STATUS: 1 TYPE: 1 RESULT: 1
UNIT # 0 2	NAME: LAST, FIRST, MIDDLE Cole, Steven E.	DATE OF BIRTH 0 2 1 5 1 9 6 4	AGE 5 8	GENDER M
ADDRESS: STREET, CITY, STATE, ZIP 1 Ibex Dr Fairfield, OH 45014		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES 3	INJURED TAKEN BY 2	EMS AGENCY (NAME) Fairfield EMS	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) Mercy Fairfield	SAFETY EQUIPMENT USED 0 4
OL STATE OH	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION
OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
CONDITION 1		ALCOHOL TEST STATUS: 1 TYPE: 1 VALUE: 1		DRUG TEST(S) STATUS: 1 TYPE: 1 RESULT: 1
UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE 0	GENDER
ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
CONDITION		ALCOHOL TEST		DRUG TEST(S)

INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1-FATAL	1-FRONT-LEFT SIDE (MOTORCYCLE DRIVER)	1-NOT DEPLOYED	1-CLASS A	1-ALCOHOL INTERLOCK DEVICE	1-NOT DISTRACTED	1-NONE GIVEN
2-SUSPECTED SERIOUS INJURY	2-FRONT-MIDDLE	2-DEPLOYED FRONT	2-CLASS B	2-CDL INTRASTATE ONLY	2-MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2-TEST REFUSED
3-SUSPECTED MINOR INJURY	3-FRONT-RIGHT SIDE	3-DEPLOYED SIDE	3-CLASS C	3-CORRECTIVE LENSES	3-TALKING ON HANDS-FREE COMMUNICATION DEVICE	3-TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE
4-POSSIBLE INJURY	4-SECOND-LEFT SIDE (MOTORCYCLE PASSENGER)	4-DEPLOYED BOTH FRONT / SIDE	4-REGULAR CLASS (OHIO = D)	4-FARM WAIVER	4-TALKING ON HAND-HELD COMMUNICATION DEVICE	4-TEST GIVEN, RESULTS KNOWN
5-NO APPARENT INJURY	5-SECOND-MIDDLE	5-NOT APPLICABLE	5-MC MOPED ONLY	5-EXCEPT CLASS A BUS & CLASS B BUS	5-OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5-TEST GIVEN, RESULTS UNKNOWN
INJURED TAKEN BY	6-SECOND-RIGHT SIDE	9-DEPLOYMENT UNKNOWN	6-NO VALID OL	7-EXCEPT TRACTOR-TRAILER	6-PASSENGER	ALCOHOL TEST TYPE
1-NOT TRANSPORTED / TREATED AT SCENE	7-THIRD-LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION	H-HAZMAT	8-INTERMEDIATE LICENSE, RESTRICTIONS	7-OTHER DISTRACTION INSIDE THE VEHICLE	1-NONE
2-EMS	8-THIRD-MIDDLE	1-NOT EJECTED	M-MOTORCYCLE	9-LEARNER'S PERMIT RESTRICTIONS	8-OTHER DISTRACTION OUTSIDE THE VEHICLE	2-BLOOD
3-POLICE	9-THIRD-RIGHT SIDE	2-PARTIALLY EJECTED	P-PASSENGER	10-LIMITED TO DAYLIGHT ONLY	9-OTHER / UNKNOWN	3-URINE
9-OTHER / UNKNOWN	10-SLEEPER SECTION OF TRUCK CAB	3-TOTALLY EJECTED	N-TANKER	11-LIMITED TO EMPLOYMENT	CONDITION	4-BREATH
SAFETY EQUIPMENT	11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4-NOT APPLICABLE	Q-MOTOR SCOOTER	12-LIMITED-OTHER	1-APPARENTLY NORMAL	5-OTHER
1-NONE USED	12-PASSENGER IN UNENCLOSED CARGO AREA	TRAPPED	R-THREE-WHEEL MOTORCYCLE	13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	2-PHYSICAL IMPAIRMENT	DRUG TEST TYPE
2-SHOULDER BELT ONLY USED	13-TRAILING UNIT	1-NOT TRAPPED	S-SCHOOL BUS	14-MILITARY VEHICLES ONLY	3-EMOTIONAL (E.G., DEPRESSED, ANGRY / DISTURBED)	1-NONE
3-LAP BELT ONLY USED	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2-EXTRICATED BY MECHANICAL MEANS	T-DOUBLE & TRIPLE TRAILERS	15-MOTOR VEHICLES WITHOUT AIR BRAKES	4-ILLNESS	2-BLOOD
4-SHOULDER & LAP BELT USED	99-OTHER / UNKNOWN	3-FREED BY NON-MECHANICAL MEANS	X-TANKER / HAZMAT	16-OUTSIDE MIRROR	5-FELL ASLEEP, FAINTED, FATIGUED, ETC.	3-URINE
5-CHILD RESTRAINT SYSTEM - FORWARD FACING			GENDER	17-PROSTHETIC AID	6-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	4-BREATH
6-CHILD RESTRAINT SYSTEM - REAR FACING			F-FEMALE	18-OTHER	9-OTHER / UNKNOWN	5-OTHER
7-BOOSTER SEAT			M-MALE			DRUG TEST RESULT(S)
8-HELMET USED			U-OTHER / UNKNOWN			1-AMPHETAMINES
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						2-BARBITURATES
10-REFLECTIVE CLOTHING						3-BENZODIAZEPINES
11-LIGHTING - PEDESTRIAN / BICYCLE ONLY						4-CANNABINOIDS
99-OTHER / UNKNOWN						5-COCAINE
						6-OPiates / OPIOIDS
						7-OTHER
						8-NEGATIVE RESULTS

LOCAL REPORT NUMBER 22-031035	REPORTING AGENCY Fairfield Police Department	DATE OF ACCIDENT 05-02-22
IN COUNTY OF Butler	ACCIDENT LOCATION Mack Rd/3871	



3871



Mack Rd

OFFICER'S SIGNATURE D. Setterstrom	BADGE NO. 121
---------------------------------------	------------------