

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 8 2 2 4 6			
<input type="checkbox"/> SECONDARY CRASH	<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME*		NCIC*		HIT/SKIP	
<input type="checkbox"/> PRIVATE PROPERTY	Fairfield Police Department		0 0 9 0 1		1 - SOLVED		NUMBER OF UNITS	
						2 - UNSOLVED		0 3
						UNIT IN ERROR		0 1
						98 - ANIMAL		
						99 - UNKNOWN		

COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*		CRASH DATE / TIME*	CRASH SEVERITY
0 9	1	City of Fairfield		1 1 1 0 2 0 2 2 0 5 5 6	3
				1 - FATAL	
				2 - SERIOUS INJURY SUSPECTED	
				3 - MINOR INJURY SUSPECTED	
				4 - INJURY POSSIBLE	
				5 - PROPERTY DAMAGE ONLY	

ROUTE TYPE	ROUTE NUMBER	PREFIX	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES
S R	4		Nilles	R D	3 9 . 3 3 9 6 7 0
REFERENCE	ROUTE TYPE	ROUTE NUMBER	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES
					- 8 4 . 5 3 4 3 9 9

REFERENCE POINT	DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE	INTERSECTION RELATED	
1 - INTERSECTION	1 - NORTH	IR - INTERSTATE ROUTE (TP)	AL - ALLEY	<input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH	
2 - MILE POST	2 - SOUTH	US - FEDERAL US ROUTE	AV - AVENUE	<input type="checkbox"/> WITHIN INTERCHANGE AREA	
3 - HOUSE #	3 - EAST	SR - STATE ROUTE	BL - BOULEVARD	NUMBER OF APPROACHES	
	4 - WEST	CR - NUMBERED COUNTY ROUTE	MP - MILEPOST	4	
		TR - NUMBERED TOWNSHIP ROUTE	ST - STREET		
			TE - TERRACE		
			TL - TRAIL		
			WA - WAY		
			HE - HEIGHTS		
			PL - PLACE		
				<input type="checkbox"/> ROADWAY DIVIDED	


LOCATION OF FIRST HARMFUL EVENT	MANNER OF CRASH COLLISION/IMPACT	DIRECTION OF TRAVEL	MEDIAN TYPE
1 - ON ROADWAY	1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT	1 - NORTH	1 - DIVIDED FLUSH MEDIAN (<4 FEET)
2 - ON SHOULDER	2 - REAR-END	2 - SOUTH	2 - DIVIDED FLUSH MEDIAN (>4 FEET)
3 - IN MEDIAN	3 - HEAD-ON	3 - EAST	3 - DIVIDED, DEPRESSED MEDIAN
4 - ON ROADSIDE	4 - REAR-TO-REAR	4 - WEST	4 - DIVIDED, RAISED MEDIAN (ANY TYPE)
5 - ON GORE	5 - BACKING		9 - OTHER/UNKNOWN
6 - OUTSIDE TRAFFIC WAY	6 - ANGLE		
7 - ON RAMP	7 - SIDESWIPE, SAME DIRECTION		
8 - OFF RAMP	8 - SIDESWIPE, OPPOSITE DIRECTION		
9 - CROSSOVER	9 - OTHER / UNKNOWN		
10 - DRIVEWAY/ALLEY ACCESS			
11 - RAILWAY GRADE CROSSING			
12 - SHARED USE PATHS OR TRAILS			
13 - BIKE LANE			
14 - TOLL BOOTH			
99 - 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 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE
<input type="checkbox"/> LAW ENFORCEMENT PRESENT	2 - LANE SHIFT/CROSSOVER	2 - ADVANCE WARNING AREA	2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP, BITUMINOUS, ASPHALT
<input type="checkbox"/> ACTIVE SCHOOL ZONE	3 - WORK ON SHOULDER OR MEDIAN	3 - TRANSITION AREA	3 - CURVE LEVEL	3 - SNOW	3 - BRICK/BLOCK
	4 - INTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA	4 - CURVE GRADE	4 - ICE	4 - SLAG, GRAVEL, STONE
	5 - OTHER	5 - TERMINATION AREA	9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	5 - DIRT
				6 - WATER (STANDING, MOVING)	9 - OTHER/UNKNOWN
				7 - SLUSH	
				9 - OTHER/UNKNOWN	

LIGHT CONDITION	WEATHER
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 11/10/22, at 5:56 a.m., Unit #1 was traveling south on S.R. 4. When at the intersection of Nilles Rd., Unit #1 failed to keep assured distance ahead and collided with Unit #2 and Unit #3, who were stopped at a red light. The operator of Unit #1 was found to be intoxicated and charged with OVI and ACDA.



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

See
OH-2

CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	SCENE CLEARED DATE / TIME	REPORT TAKEN BY
1 1 1 0 2 0 2 2 0 5 5 6	1 1 1 0 2 0 2 2 0 5 5 8	1 1 1 0 2 0 2 2 0 6 0 1	1 1 1 0 2 0 2 2 0 6 5 3	<input checked="" type="checkbox"/> POLICE AGENCY
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	<input type="checkbox"/> MOTORIST
5 2		5 5	K. Allen	<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)
			OFFICER'S BADGE NUMBER*	
			1 6 6	
			CHECKED BY OFFICER'S NAME*	
			Sgt. B. Barnes	
			CHECKED BY OFFICER'S BADGE NUMBER*	
			1 3 9	

OWNER

UNIT # 01 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

VEHICLE

LP STATE OH LICENSE PLATE # JNJ6044 VEHICLE IDENTIFICATION # KNDPMA3A1C1H710611387 VEHICLE YEAR 2017 VEHICLE MAKE Kia
 INSURANCE VERIFIED INSURANCE COMPANY _____ INSURANCE POLICY # _____ COLOR Silver VEHICLE MODEL Sporgage

TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE
 US DOT # _____ TOWED BY: COMPANY NAME Fox Towing
 HAZARDOUS MATERIAL CLASS # _____ PLACARD ID # _____
 INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT #OCCUPANTS 02
 VEHICLE WEIGHT GVWR/GCWR: 1 - ≤10K LBS., 2 - 10,001 - 26K LBS., 3 - >26K LBS.

UNIT TYPE 03
 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER
 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)
 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST
 4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE
 5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV/UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN
 6 - VAN (9-15 SEATS) 17 - MOTORHOME

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

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

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

NON-MOTORIST LOCATION AT IMPACT 1
 1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER CROSSWALK 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE
 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDLANE - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 14 - ENTERING OR CROSSING SPECIFIED LOCATION
 5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS 15 - WALKING, RUNNING, JOGGING, PLAYING 18 - APPROACHING OR LEAVING VEHICLE
 9 - OTHER / UNKNOWN

ACTION 3
 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE
 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING
 3 - STRIKING 01 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST
 4 - STRUCK PRE-CRASH ACTIONS 4 - OVERTAKING/PASSING 10 - PARKED 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE
 5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN
 9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS

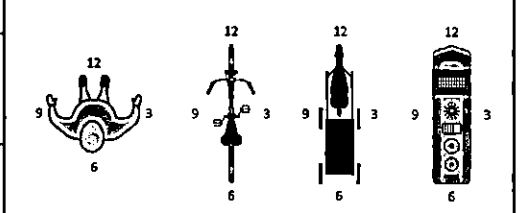
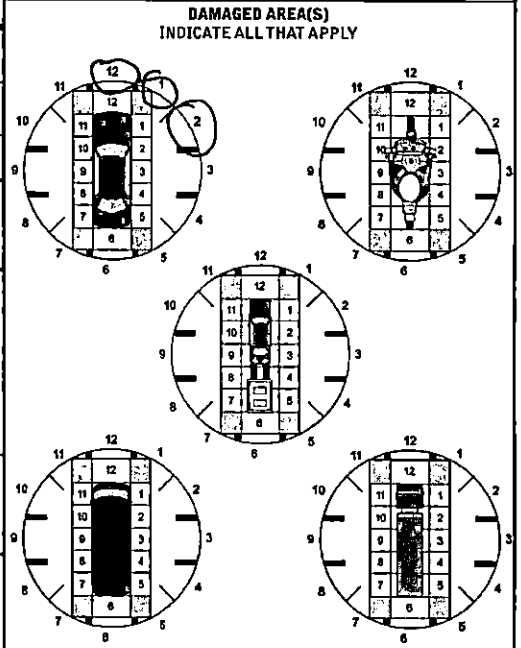
CONTRIBUTING CIRCUMSTANCES 08
 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY
 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE
 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY
 4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION
 5 - UNSAFE SPEED 11 - DROVE OFF ROAD
 6 - IMPROPER TURN 12 - IMPROPER BACKING

SEQUENCE OF EVENTS
 1 20 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT
 2 20 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
 3 1 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT
 4 1 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 25 - WORK ZONE MAINTENANCE EQUIPMENT
 5 1 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE IN TRANSPORT 51 - WALL
 6 1 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT
 26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 52 - BUILDING
 27 - BRIDGE PIER OR ABUTMENT 33 - MEDIUM CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 53 - TUNNEL
 28 - BRIDGE PARAPET 34 - MEDIUM GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 54 - OTHER FIXED OBJECT
 29 - BRIDGE RAIL 35 - MEDIUM CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 99 - OTHER / UNKNOWN
 30 - GUARDRAIL FACE 36 - MEDIUM OTHER BARRIER 42 - CULVERT 48 - TREE
 49 - FIRE HYDRANT

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

LOCAL REPORT NUMBER
2, 2, 0, 8, 2, 2, 4, 6

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



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

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

TRAFFICWAY FLOW
2 1 - ONE-WAY
2 2 - TWO-WAY

TRAFFIC CONTROL
2 1 - ROUNDABOUT 4 - STOP SIGN
2 2 - SIGNAL 5 - YIELD SIGN
 3 - FLASHER 6 - NO CONTROL

OF THROUGH LANES ON ROAD 4
 RAIL GRADE CROSSING 1
 1 - NOT INVOLVED
 2 - INVOLVED-ACTIVE CROSSING
 3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION
 FROM 1 TO 2
 1 - NORTH 5 - NORTHEAST
 2 - SOUTH 6 - NORTHWEST
 3 - EAST 7 - SOUTHEAST
 4 - WEST 8 - SOUTHWEST
 9 - OTHER / UNKNOWN

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

LOCAL REPORT NUMBER
2, 2, 0, 8, 2, 2, 4, 6

OWNER

UNIT # 02 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

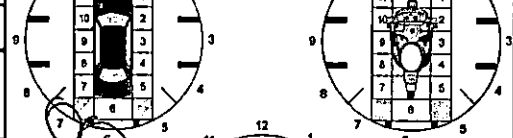
DAMAGE SCALE
1 - NONE 3 - FUNCTIONAL DAMAGE
2 - MINOR DAMAGE 4 - DISABLING DAMAGE
9 - UNKNOWN

VEHICLE

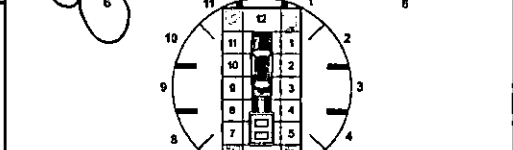
LP STATE OH LICENSE PLATE # AAYSHA VEHICLE IDENTIFICATION # 1G1ZD5S1T2K1F192322 VEHICLE YEAR 2019 VEHICLE MAKE Chevrolet
 INSURANCE VERIFIED INSURANCE COMPANY Progressive INSURANCE POLICY # 960183605 COLOR Silver VEHICLE MODEL Malibu

DAMAGED AREA(S)
INDICATE ALL THAT APPLY

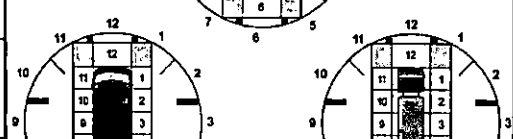
TYPE OF USE
 COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE
 INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # 01 # OCCUPANTS 01
 US DOT # _____ VEHICLE WEIGHT GVWR/GCWR
 1 - <10K LBS.
 2 - 10,001 - 26K LBS.
 3 - >26K LBS.
 TOWED BY: COMPANY NAME Wayne's Towing
 HAZARDOUS MATERIAL
 MATERIAL RELEASED PLACARD CLASS # _____ PLACARD ID # _____



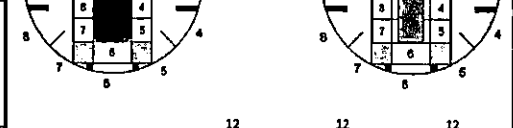
UNIT TYPE 01
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 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)
 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST
 4 -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



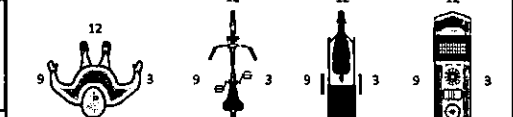
of TRAILING UNITS _____
 WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?
2 1 - YES 2 - NO 9 - OTHER / UNKNOWN AUTONOMOUS MODE LEVEL
 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION
 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION



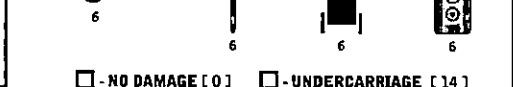
SPECIAL FUNCTION 01
 1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER
 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN
 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL
 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY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



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



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



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

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

INITIAL POINT OF CONTACT
 0 - NO DAMAGE 14 - UNDERCARRIAGE
07 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
 13 - TOP 99 - UNKNOWN

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

TRAFFIC

TRAFFICWAY FLOW 1 - ONE-WAY <u>2</u> 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# of THROUGH LANES ON ROAD <u>4</u>	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING

CONTRIBUTING CIRCUMSTANCES 01
 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY
 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE
 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY
 4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION
 5 - UNSAFE SPEED 11 - DROVE OFF ROAD
 6 - IMPROPER TURN 12 - IMPROPER BACKING

SEQUENCE OF EVENTS
1 20 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT
2 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
3 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT
4 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 25 - WORK ZONE MAINTENANCE EQUIPMENT
5 5 - CARGO/EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDAL CYCLE 20 - MOTOR VEHICLE IN TRANSPORT 50 - WORK ZONE MAINTENANCE EQUIPMENT
6 6 - IMPROPER TURN 11 - DROVE OFF ROAD 16 - WRONG WAY 21 - PARKED MOTOR VEHICLE 51 - WALL
 52 - BUILDING
 53 - TUNNEL
 54 - OTHER FIXED OBJECT
 99 - OTHER / UNKNOWN

~~COLLISION WITH FIXED OBJECT STRUCK~~
 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB
 26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH
 27 - BRIDGE PIER OR ABUTMENT 33 - MEDIUM CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT
 28 - BRIDGE PARAPET 34 - MEDIUM GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE
 29 - BRIDGE RAIL 35 - MEDIUM CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX
 30 - GUARDRAIL FACE 36 - MEDIUM OTHER BARRIER 42 - CULVERT 48 - TREE
 49 - FIRE HYDRANT

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

UNIT / NON-MOTORIST DIRECTION
 FROM 1 TO 2
 1 - NORTH 5 - NORTHEAST
 2 - SOUTH 6 - NORTHWEST
 3 - EAST 7 - SOUTHEAST
 4 - WEST 8 - SOUTHWEST
 9 - OTHER / UNKNOWN

UNIT SPEED 0
 POSTED SPEED 35

DETECTED SPEED
1 1 - STATED / ESTIMATED SPEED
 2 - CALCULATED / EDR
 3 - UNDETERMINED

OWNER	UNIT # <u>03</u>	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> (SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> (SAME AS DRIVER)			
	OWNER ADDRESS: STREET, CITY, STATE, ZIP <input checked="" type="checkbox"/> (SAME AS DRIVER)		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE				
VEHICLE	LP STATE <u>OH</u>	LICENSE PLATE # <u>HOD4730</u>	VEHICLE IDENTIFICATION # <u>1HGCM826X7A01016154</u>	VEHICLE YEAR <u>2007</u>	VEHICLE MAKE <u>Honda</u>	
	<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR <u>Black</u>	VEHICLE MODEL <u>Accord</u>	
	<input type="checkbox"/> COMMERCIAL	TYPE OF USE <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPANY NAME <u>Fox Towing</u>		
	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS <u>01</u>	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD CLASS # PLACARD ID #		
	UNIT TYPE <u>01</u>		VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	18-LIMO (LIVERY VEHICLE) 23-PEDESTRIAN / SKATER 19-BUS (26+ PASSENGERS) 24-WHEELCHAIR (ANY TYPE) 20-OTHER VEHICLE 25-OTHER NON-MOTORIST 21-HEAVY EQUIPMENT 26-BICYCLE 22-ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27-TRAIN 99-UNKNOWN OR HIT/SKIP		
	# OF TRAILING UNITS		1-PASSENGER CAR 7-MOTORCYCLE 2-WHEELED 12-GOLF CART 2-PASSENGER VAN (MINIVAN) 8-MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 3-SPORT UTILITY VEHICLE 9-AUTOCYCLE 14-SINGLE UNIT TRUCK 4-PICK UP 10-MOPED OR MOTORIZED BICYCLE 15-SEMI-TRACTOR 5-CARGO VAN 11-ALL TERRAIN VEHICLE (ATV/UTV) 16-FARM EQUIPMENT 17-MOTORHOME	3-CONDITIONAL AUTOMATION 9-UNKNOWN 4-HIGH AUTOMATION 5-FULL AUTOMATION		
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? <u>2</u>		0-NO AUTOMATION 1-DRIVER ASSISTANCE 2-PARTIAL AUTOMATION	1- NONE 6-BUS-CHARTER/TOUR 11-FIRE 16-FARM 21-MAIL CARRIER 2-TAXI 7-BUS-INTERCITY 12-MILITARY 17-MOWING 99-OTHER/UNKNOWN 3-ELECTRONIC RIDE SHARING 8-BUS-SHUTTLE 13-POLICE 18-SNOW REMOVAL 4-SCHOOL TRANSPORT 9-BUS-OTHER 14-PUBLIC UTILITY 19-TOWING 5-BUS-TRANSIT/COMMUTER 10-AMBULANCE 15-CONSTRUCTION EQUIPMENT 20-SAFETY SERVICE PATROL		
	SPECIAL FUNCTION <u>01</u>		1-NO CARGO BODY TYPE /NOT APPLICABLE 3-VEHICLE TOWING ANOTHER MOTOR VEHICLE 5-INTERMODAL CONTAINER CHASSIS 8-POLE 12-CONCRETE MIXER 2-BUS 4-LOGGING 6-CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	1-TURN SIGNALS 4-BRAKES 7-WORN OR SLICK TIRES 9-MOTOR TROUBLE 99-OTHER/UNKNOWN 2-HEAD LAMPS 5-STEERING 8-TRAILER EQUIPMENT DEFECTIVE 10-DISABLED FROM PRIOR ACCIDENT		
	CARGO BODY TYPE <u>01</u>		1-INTERSECTION - MARKED CROSSWALK 3-INTERSECTION - OTHER CROSSWALK 6-BICYCLE LANE 9-MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER AT INCIDENT SCENE 2-INTERSECTION - UNMARKED CROSSWALK 4-MIDBLOCK - MARKED CROSSWALK 7-SHOULDER/ROADSIDE 10-DRIVEWAY ACCESS 11-SHARED USE PATHS OR TRAILS 99-OTHER/UNKNOWN 5-TRAVEL LANE - OTHER LOCATION	1-NON-CONTACT 1-STRAIGHT AHEAD 7-MAKING U-TURN 13-NEGOTIATING A CURVE 18-APPROACHING OR LEAVING VEHICLE 2-NON-COLLISION 2-BACKING 8-ENTERING TRAFFIC LANE 14-ENTERING OR CROSSING SPECIFIED LOCATION 19-STANDING 3-STRIKING 3-CHANGING LANES 9-LEAVING TRAFFIC LANE 15-WALKING, RUNNING, JOGGING, PLAYING 20-OTHER NON-MOTORIST 4-STRUCK PRE-CRASH ACTIONS 4-OVERTAKING/PASSING 10-PARKED 11-SLOWING OR STOPPED IN TRAFFIC 16-WORKING 21-STANDING OUTSIDE DISABLED VEHICLE 5-BOTH STRIKING & STRUCK 5-MAKING RIGHT TURN 6-MAKING LEFT TURN 12-DRIVERLESS 17-PUSHING VEHICLE 99-OTHER/UNKNOWN 9-OTHER/UNKNOWN		
	VEHICLE DEFECTS		1-INTERSECTION - MARKED CROSSWALK 3-INTERSECTION - OTHER CROSSWALK 6-BICYCLE LANE 9-MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER AT INCIDENT SCENE 2-INTERSECTION - UNMARKED CROSSWALK 4-MIDBLOCK - MARKED CROSSWALK 7-SHOULDER/ROADSIDE 10-DRIVEWAY ACCESS 11-SHARED USE PATHS OR TRAILS 99-OTHER/UNKNOWN 5-TRAVEL LANE - OTHER LOCATION	1-NON-CONTACT 1-STRAIGHT AHEAD 7-MAKING U-TURN 13-NEGOTIATING A CURVE 18-APPROACHING OR LEAVING VEHICLE 2-NON-COLLISION 2-BACKING 8-ENTERING TRAFFIC LANE 14-ENTERING OR CROSSING SPECIFIED LOCATION 19-STANDING 3-STRIKING 3-CHANGING LANES 9-LEAVING TRAFFIC LANE 15-WALKING, RUNNING, JOGGING, PLAYING 20-OTHER NON-MOTORIST 4-STRUCK PRE-CRASH ACTIONS 4-OVERTAKING/PASSING 10-PARKED 11-SLOWING OR STOPPED IN TRAFFIC 16-WORKING 21-STANDING OUTSIDE DISABLED VEHICLE 5-BOTH STRIKING & STRUCK 5-MAKING RIGHT TURN 6-MAKING LEFT TURN 12-DRIVERLESS 17-PUSHING VEHICLE 99-OTHER/UNKNOWN 9-OTHER/UNKNOWN		
NON-MOTORIST LOCATION AT IMPACT		1-INTERSECTION - MARKED CROSSWALK 3-INTERSECTION - OTHER CROSSWALK 6-BICYCLE LANE 9-MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER AT INCIDENT SCENE 2-INTERSECTION - UNMARKED CROSSWALK 4-MIDBLOCK - MARKED CROSSWALK 7-SHOULDER/ROADSIDE 10-DRIVEWAY ACCESS 11-SHARED USE PATHS OR TRAILS 99-OTHER/UNKNOWN 5-TRAVEL LANE - OTHER LOCATION	1-NON-CONTACT 1-STRAIGHT AHEAD 7-MAKING U-TURN 13-NEGOTIATING A CURVE 18-APPROACHING OR LEAVING VEHICLE 2-NON-COLLISION 2-BACKING 8-ENTERING TRAFFIC LANE 14-ENTERING OR CROSSING SPECIFIED LOCATION 19-STANDING 3-STRIKING 3-CHANGING LANES 9-LEAVING TRAFFIC LANE 15-WALKING, RUNNING, JOGGING, PLAYING 20-OTHER NON-MOTORIST 4-STRUCK PRE-CRASH ACTIONS 4-OVERTAKING/PASSING 10-PARKED 11-SLOWING OR STOPPED IN TRAFFIC 16-WORKING 21-STANDING OUTSIDE DISABLED VEHICLE 5-BOTH STRIKING & STRUCK 5-MAKING RIGHT TURN 6-MAKING LEFT TURN 12-DRIVERLESS 17-PUSHING VEHICLE 99-OTHER/UNKNOWN 9-OTHER/UNKNOWN			
ACTION		1-INTERSECTION - MARKED CROSSWALK 3-INTERSECTION - OTHER CROSSWALK 6-BICYCLE LANE 9-MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER AT INCIDENT SCENE 2-INTERSECTION - UNMARKED CROSSWALK 4-MIDBLOCK - MARKED CROSSWALK 7-SHOULDER/ROADSIDE 10-DRIVEWAY ACCESS 11-SHARED USE PATHS OR TRAILS 99-OTHER/UNKNOWN 5-TRAVEL LANE - OTHER LOCATION	1-NON-CONTACT 1-STRAIGHT AHEAD 7-MAKING U-TURN 13-NEGOTIATING A CURVE 18-APPROACHING OR LEAVING VEHICLE 2-NON-COLLISION 2-BACKING 8-ENTERING TRAFFIC LANE 14-ENTERING OR CROSSING SPECIFIED LOCATION 19-STANDING 3-STRIKING 3-CHANGING LANES 9-LEAVING TRAFFIC LANE 15-WALKING, RUNNING, JOGGING, PLAYING 20-OTHER NON-MOTORIST 4-STRUCK PRE-CRASH ACTIONS 4-OVERTAKING/PASSING 10-PARKED 11-SLOWING OR STOPPED IN TRAFFIC 16-WORKING 21-STANDING OUTSIDE DISABLED VEHICLE 5-BOTH STRIKING & STRUCK 5-MAKING RIGHT TURN 6-MAKING LEFT TURN 12-DRIVERLESS 17-PUSHING VEHICLE 99-OTHER/UNKNOWN 9-OTHER/UNKNOWN			
CONTRIBUTING CIRCUMSTANCES		1-NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A PARKED POSITION 17-VISION OBSTRUCTION 21-LYING IN ROADWAY 2-FAILURE TO YIELD 8-FOLLOWING TOO CLOSE /ACDA 14-STOPPED OR PARKED ILLEGALLY 18-OPERATING DEFECTIVE EQUIPMENT 22-NOT DISCERNIBLE 3-RAN RED LIGHT 9-IMPROPER LANE CHANGE 15-SWERVING TO AVOID 19-LOAD SHIFTING/FALLING/SPILLING 23-OPENING DOOR INTO ROADWAY 4-RAN STOP SIGN 10-IMPROPER PASSING 16-WRONG WAY 20-IMPROPER CROSSING 99-OTHER IMPROPER ACTION 5-UNSAFE SPEED 11-DROVE OFF ROAD 17-DRIVERLESS 21-IMPROPER CROSSING 6-IMPROPER TURN 12-IMPROPER BACKING	TRAFFICWAY FLOW 1-ONE-WAY <u>2</u> 2-TWO-WAY			
SEQUENCE OF EVENTS		1-NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A PARKED POSITION 17-VISION OBSTRUCTION 21-LYING IN ROADWAY 2-FAILURE TO YIELD 8-FOLLOWING TOO CLOSE /ACDA 14-STOPPED OR PARKED ILLEGALLY 18-OPERATING DEFECTIVE EQUIPMENT 22-NOT DISCERNIBLE 3-RAN RED LIGHT 9-IMPROPER LANE CHANGE 15-SWERVING TO AVOID 19-LOAD SHIFTING/FALLING/SPILLING 23-OPENING DOOR INTO ROADWAY 4-RAN STOP SIGN 10-IMPROPER PASSING 16-WRONG WAY 20-IMPROPER CROSSING 99-OTHER IMPROPER ACTION 5-UNSAFE SPEED 11-DROVE OFF ROAD 17-DRIVERLESS 21-IMPROPER CROSSING 6-IMPROPER TURN 12-IMPROPER BACKING	TRAFFICWAY FLOW 1-ONE-WAY <u>2</u> 2-TWO-WAY			
EVENTS		1-OVERTURN/ROLLOVER 6-EQUIPMENT FAILURE 11-CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16-RAILWAY VEHICLE 22-WORK ZONE MAINTENANCE EQUIPMENT 2-FIRE/EXPLOSION 7-SEPARATION OF UNITS 12-DOWNHILL RUNAWAY 17-ANIMAL - FARM 18-ANIMAL - DEER 23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 3-IMMERSION 8-RAN OFF ROAD RIGHT 13-OTHER NON-COLLISION 19-ANIMAL - OTHER 20-MOTOR VEHICLE IN TRANSPORT 24-OTHER MOVABLE OBJECT 4-JACKKNIFE 9-RAN OFF ROAD LEFT 14-PEDESTRIAN 21-PARKED MOTOR VEHICLE 5-CARGO/EQUIPMENT LOSS OR SHIFT 10-CROSS MEDIAN 15-PEDALCYCLE 43-CURB 50-WORK ZONE MAINTENANCE EQUIPMENT 25-IMPACT ATTENUATOR /CRASH CUSHION 31-GUARDRAIL END 37-TRAFFIC SIGN POST 44-DITCH 45-EMBANKMENT 51-WALL 26-BRIDGE OVERHEAD STRUCTURE 32-PORTABLE BARRIER 38-OVERHEAD SIGN POST 46-FENCE 47-MAILBOX 52-BUILDING 27-BRIDGE PIER OR ABUTMENT 33-MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES SUPPORT 48-TREE 53-TUNNEL 28-BRIDGE PARAPET 34-MEDIAN GUARDRAIL BARRIER 40-UTILITY POLE 49-FIRE HYDRANT 54-OTHER FIXED OBJECT 29-BRIDGE RAIL 35-MEDIAN CONCRETE BARRIER 41-OTHER POST, POLE OR SUPPORT 30-GUARDRAIL FACE 36-MEDIAN OTHER BARRIER 42-CULVERT	TRAFFICWAY FLOW 1-ONE-WAY <u>2</u> 2-TWO-WAY			
FIRST HARMFUL EVENT		1-OVERTURN/ROLLOVER 6-EQUIPMENT FAILURE 11-CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16-RAILWAY VEHICLE 22-WORK ZONE MAINTENANCE EQUIPMENT 2-FIRE/EXPLOSION 7-SEPARATION OF UNITS 12-DOWNHILL RUNAWAY 17-ANIMAL - FARM 18-ANIMAL - DEER 23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 3-IMMERSION 8-RAN OFF ROAD RIGHT 13-OTHER NON-COLLISION 19-ANIMAL - OTHER 20-MOTOR VEHICLE IN TRANSPORT 24-OTHER MOVABLE OBJECT 4-JACKKNIFE 9-RAN OFF ROAD LEFT 14-PEDESTRIAN 21-PARKED MOTOR VEHICLE 5-CARGO/EQUIPMENT LOSS OR SHIFT 10-CROSS MEDIAN 15-PEDALCYCLE 43-CURB 50-WORK ZONE MAINTENANCE EQUIPMENT 25-IMPACT ATTENUATOR /CRASH CUSHION 31-GUARDRAIL END 37-TRAFFIC SIGN POST 44-DITCH 45-EMBANKMENT 51-WALL 26-BRIDGE OVERHEAD STRUCTURE 32-PORTABLE BARRIER 38-OVERHEAD SIGN POST 46-FENCE 47-MAILBOX 52-BUILDING 27-BRIDGE PIER OR ABUTMENT 33-MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES SUPPORT 48-TREE 53-TUNNEL 28-BRIDGE PARAPET 34-MEDIAN GUARDRAIL BARRIER 40-UTILITY POLE 49-FIRE HYDRANT 54-OTHER FIXED OBJECT 29-BRIDGE RAIL 35-MEDIAN CONCRETE BARRIER 41-OTHER POST, POLE OR SUPPORT 30-GUARDRAIL FACE 36-MEDIAN OTHER BARRIER 42-CULVERT	TRAFFICWAY FLOW 1-ONE-WAY <u>2</u> 2-TWO-WAY			
MOST HARMFUL EVENT		1-OVERTURN/ROLLOVER 6-EQUIPMENT FAILURE 11-CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16-RAILWAY VEHICLE 22-WORK ZONE MAINTENANCE EQUIPMENT 2-FIRE/EXPLOSION 7-SEPARATION OF UNITS 12-DOWNHILL RUNAWAY 17-ANIMAL - FARM 18-ANIMAL - DEER 23-STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 3-IMMERSION 8-RAN OFF ROAD RIGHT 13-OTHER NON-COLLISION 19-ANIMAL - OTHER 20-MOTOR VEHICLE IN TRANSPORT 24-OTHER MOVABLE OBJECT 4-JACKKNIFE 9-RAN OFF ROAD LEFT 14-PEDESTRIAN 21-PARKED MOTOR VEHICLE 5-CARGO/EQUIPMENT LOSS OR SHIFT 10-CROSS MEDIAN 15-PEDALCYCLE 43-CURB 50-WORK ZONE MAINTENANCE EQUIPMENT 25-IMPACT ATTENUATOR /CRASH CUSHION 31-GUARDRAIL END 37-TRAFFIC SIGN POST 44-DITCH 45-EMBANKMENT 51-WALL 26-BRIDGE OVERHEAD STRUCTURE 32-PORTABLE BARRIER 38-OVERHEAD SIGN POST 46-FENCE 47-MAILBOX 52-BUILDING 27-BRIDGE PIER OR ABUTMENT 33-MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES SUPPORT 48-TREE 53-TUNNEL 28-BRIDGE PARAPET 34-MEDIAN GUARDRAIL BARRIER 40-UTILITY POLE 49-FIRE HYDRANT 54-OTHER FIXED OBJECT 29-BRIDGE RAIL 35-MEDIAN CONCRETE BARRIER 41-OTHER POST, POLE OR SUPPORT 30-GUARDRAIL FACE 36-MEDIAN OTHER BARRIER 42-CULVERT	TRAFFICWAY FLOW 1-ONE-WAY <u>2</u> 2-TWO-WAY			

LOCAL REPORT NUMBER <u>2, 2, 0, 8, 2, 2, 4, 6</u>							
DAMAGE							
DAMAGE SCALE							
<table border="0" style="width:100%;"> <tr> <td style="width:50%; text-align: center;">1 - NONE</td> <td style="width:50%; text-align: center;">3 - FUNCTIONAL DAMAGE</td> </tr> <tr> <td style="text-align: center;"><u>4</u> 2 - MINOR DAMAGE</td> <td style="text-align: center;">4 - DISABLING DAMAGE</td> </tr> <tr> <td colspan="2" style="text-align: center;">9 - UNKNOWN</td> </tr> </table>		1 - NONE	3 - FUNCTIONAL DAMAGE	<u>4</u> 2 - MINOR DAMAGE	4 - DISABLING DAMAGE	9 - UNKNOWN	
1 - NONE	3 - FUNCTIONAL DAMAGE						
<u>4</u> 2 - MINOR DAMAGE	4 - DISABLING DAMAGE						
9 - UNKNOWN							
DAMAGED AREA(S) INDICATE ALL THAT APPLY							
<input type="checkbox"/> - NO DAMAGE [0] <input type="checkbox"/> - UNDERCARRIAGE [14] <input type="checkbox"/> - TOP [13] <input type="checkbox"/> - ALL AREAS [15] <input type="checkbox"/> - UNIT NOT AT SCENE [16]							
INITIAL POINT OF CONTACT							
<table border="0" style="width:100%;"> <tr> <td style="width:50%;">0 - NO DAMAGE</td> <td style="width:50%;">14 - UNDERCARRIAGE</td> </tr> <tr> <td><u>05</u> 1-12 - REFER TO UNIT DIAGRAM</td> <td>15 - VEHICLE NOT AT SCENE</td> </tr> <tr> <td>13 - TOP</td> <td>99 - UNKNOWN</td> </tr> </table>		0 - NO DAMAGE	14 - UNDERCARRIAGE	<u>05</u> 1-12 - REFER TO UNIT DIAGRAM	15 - VEHICLE NOT AT SCENE	13 - TOP	99 - UNKNOWN
0 - NO DAMAGE	14 - UNDERCARRIAGE						
<u>05</u> 1-12 - REFER TO UNIT DIAGRAM	15 - VEHICLE NOT AT SCENE						
13 - TOP	99 - UNKNOWN						
TRAFFIC							
TRAFFICWAY FLOW 1-ONE-WAY <u>2</u> 2-TWO-WAY	TRAFFIC CONTROL 1-ROUNDBOUT 4-STOP SIGN 2-SIGNAL 5-YIELD SIGN 3-FLASHER 6-NO CONTROL						
# OF THROUGH LANES ON ROAD <u>4</u>	RAIL GRADE CROSSING 1-NOT INVOLVED 2-INVOLVED-ACTIVE CROSSING 3-INVOLVED-PASSIVE CROSSING						
UNIT / NON-MOTORIST DIRECTION							
<table border="0" style="width:100%;"> <tr> <td style="width:50%;">FROM <u>1</u> TO <u>2</u></td> <td style="width:50%;">1-NORTH 5-NORTHEAST 2-SOUTH 6-NORTHWEST 3-EAST 7-SOUTHEAST 4-WEST 8-SOUTHWEST 9-OTHER/UNKNOWN</td> </tr> </table>		FROM <u>1</u> TO <u>2</u>	1-NORTH 5-NORTHEAST 2-SOUTH 6-NORTHWEST 3-EAST 7-SOUTHEAST 4-WEST 8-SOUTHWEST 9-OTHER/UNKNOWN				
FROM <u>1</u> TO <u>2</u>	1-NORTH 5-NORTHEAST 2-SOUTH 6-NORTHWEST 3-EAST 7-SOUTHEAST 4-WEST 8-SOUTHWEST 9-OTHER/UNKNOWN						
UNIT SPEED <u>0</u>	DETECTED SPEED 1-STATED/ESTIMATED SPEED 2-CALCULATED/EDR 3-UNDETERMINED						
POSTED SPEED <u>35</u>							



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
2 2 0 8 2 2 4 6

UNIT # 0 1	NAME: LAST, FIRST, MIDDLE Mann, Rachael Marie		DATE OF BIRTH 0 1 0 2 1 9 9 3		AGE 2 9	GENDER F				
ADDRESS: STREET, CITY, STATE, ZIP 345 Knollridge Ct. #103, Fairfield, OH 45014					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES 3	INJURED TAKEN BY 1	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 4	EJECTION 1	TRAPPED 1	
DL STATE OH	OPERATOR LICENSE NUMBER		OFFENSE CHARGED ACDA	LOCAL CODE <input checked="" type="checkbox"/>	OFFENSE DESCRIPTION 333.03 (A)		CITATION NUMBER 252856			
DL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input checked="" type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		CONDITION 6	ALCOHOL TEST STATUS: 3 TYPE: 4 VALUE: .		DRUG TEST(S) STATUS: 1 TYPE: 1 RESULT: 1	

UNIT # 0 2	NAME: LAST, FIRST, MIDDLE Adhikari, Megh		DATE OF BIRTH 0 1 2 0 1 9 9 6		AGE 2 6	GENDER M				
ADDRESS: STREET, CITY, STATE, ZIP 30 Merlin Dr. Apt. C, Fairfield, OH 45014					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES 3	INJURED TAKEN BY 2	EMS AGENCY (NAME) Fairfield Fire	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) Mercy Fairfield	SAFETY EQUIPMENT USED 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 4	EJECTION 1	TRAPPED 1	
DL STATE OH	OPERATOR LICENSE NUMBER		OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER			
DL 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: .		DRUG TEST(S) STATUS: 1 TYPE: 1 RESULT: 1	

UNIT # 0 3	NAME: LAST, FIRST, MIDDLE Cooper, Edward Monroe		DATE OF BIRTH 0 9 0 7 1 9 6 7		AGE 5 5	GENDER M				
ADDRESS: STREET, CITY, STATE, ZIP 900 Mill St. Apt. 3, Hamilton, OH 45013					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES 3	INJURED TAKEN BY 2	EMS AGENCY (NAME) Fairfield Fire	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) Mercy Fairfield	SAFETY EQUIPMENT USED 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 4	EJECTION 1	TRAPPED 1	
DL STATE OH	OPERATOR LICENSE NUMBER		OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER			
DL 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: .		DRUG TEST(S) STATUS: 1 TYPE: 1 RESULT: 1	

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



OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER
2 2 0 8 2 2 4 6

OCCUPANT	UNIT # 1	NAME: LAST, FIRST, MIDDLE Morgan, Alexandra M.	DATE OF BIRTH 0 8 1 2 1 9 9 3	AGE 2 9	GENDER F
	ADDRESS: STREET, CITY, STATE, ZIP 5937 Flaig Dr., Fairfield, OH 45014		CONTACT PHONE - INCLUDE AREA CODE		
	INJURIES 3	INJURED TAKEN BY 2	EMS AGENCY (NAME) Fairfield Fire	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) Mercy Fairfield	SAFETY EQUIPMENT USED 0, 4

OCCUPANT	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

OCCUPANT	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

OCCUPANT	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

INJURIES	SAFETY EQUIPMENT USED	SEATING POSITION	AIR BAG USAGE
1 - FATAL	1 - NONE USED - VEHICLE OCCUPANT	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED
2 - SUSPECTED SERIOUS INJURY	2 - SHOULDER BELT ONLY USED	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT
3 - SUSPECTED MINOR INJURY	3 - LAP BELT ONLY USED	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE
4 - POSSIBLE INJURY	4 - SHOULDER & LAP BELT USED	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT/SIDE
5 - NO APPARENT INJURY	5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	5 - SECOND - MIDDLE	5 - NOT APPLICABLE
	6 - CHILD RESTRAINT SYSTEM - REAR FACING	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN
	7 - BOOSTER SEAT	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	
	8 - HELMET USED	8 - THIRD - MIDDLE	
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	9 - THIRD - RIGHT SIDE	
	10 - REFLECTIVE CLOTHING	10 - SLEEPER SECTION OF TRUCK CAB	
	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	
	99 - OTHER / UNKNOWN	12 - PASSENGER IN UNENCLOSED CARGO AREA	
		13 - TRAILING UNIT	
		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	
		15 - NON-MOTORIST	
		99 - OTHER / UNKNOWN	

WITNESS	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

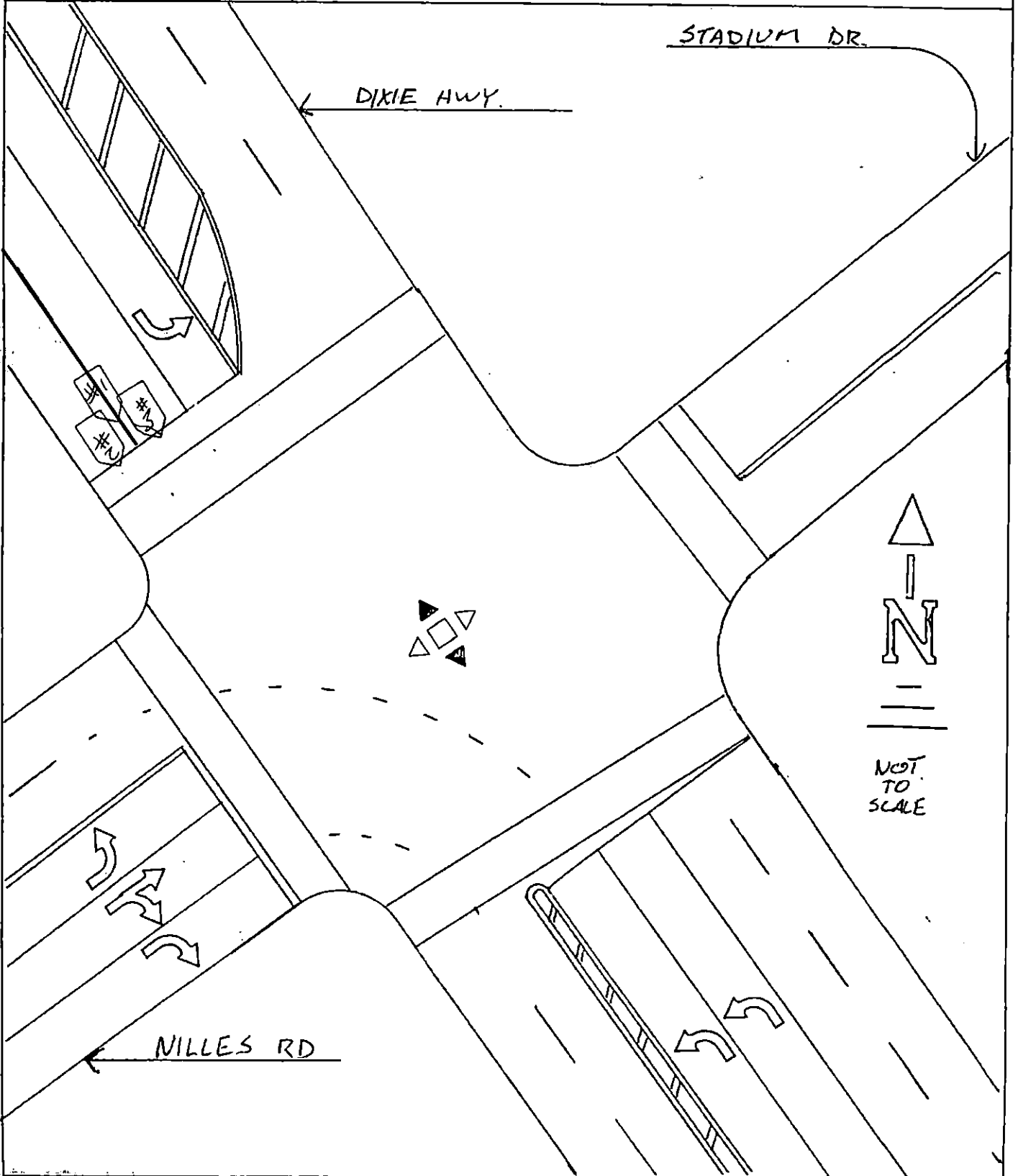
WITNESS	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE 0	GENDER	
	ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED

WITNESS	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

OHIO TRAFFIC ACCIDENT - DIAGRAM / NARRATIVE CONTINUATION

OH-2 (Rev. 1/82)

LOCAL REPORT NUMBER PD-22-082246	REPORTING AGENCY Fairfield Police Department	DATE OF ACCIDENT 11/10/22
COUNTY OF Butler	ACCIDENT LOCATION Dixie Hwy // Nilles Rd. // Stadium Dr.	



OFFICER'S SIGNATURE <i>[Signature]</i>	BADGE NO. 166
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