

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

<input checked="" type="checkbox"/> PHOTOSTAKEN <input type="checkbox"/> SECONDARY CRASH	<input checked="" type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY	LOCAL INFORMATION REPORTING AGENCY NAME* Fairfield Police Department	NCIC* 0,0,9,0,1	2 3 0 2 0 7 3 3
COUNTY* LOCALITY* 0 9 1		LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield		CRASH DATE / TIME* 03192023 1324

HIT/SKIP 1 - SOLVED 2 - UNSOLVED	NUMBER OF UNITS 0 2	UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN	CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY
--	------------------------	--	--

ROUTE TYPE S R	ROUTE NUMBER 4	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME Schirmer	ROAD TYPE D R	LATITUDE DECIMAL DEGREES 39.353984
-------------------	-------------------	--	--------------------------------	------------------	---------------------------------------

ROUTE TYPE D R	ROUTE NUMBER 4	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Schirmer	ROAD TYPE D R	LONGITUDE DECIMAL DEGREES 84.542433
-------------------	-------------------	--	---	------------------	--

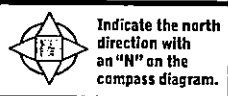
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 1	DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE AL - ALLEY HW - HIGHWAY RD - ROAD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

LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP 0 1	MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN 6	DIRECTION OF TRAVEL 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER/UNKNOWN
--	--	---	--

<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE	WORK ZONE TYPE 1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER	LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	CONTOUR 1	CONDITIONS 1	SURFACE 2
---	--	---	--------------	-----------------	--------------

LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN 1	WEATHER 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN 0 1	CONTOUR 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/UNKNOWN	CONDITIONS 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	SURFACE 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN
---	--	--	---	---

NARRATIVE On 3-19-23 at about 1:24 p.m. Unit 2 was traveling south on Dixie Hwy near Schirmer Dr. when Unit 1 who was turning right onto Dixie Hwy from Schirmer Dr. failed to give right of way to Unit 1 and in so doing collided with Unit 2.	See OH-2
---	----------



CRASH REPORTED DATE / TIME 03192023 1324	DISPATCH DATE / TIME 03192023 1326	ARRIVAL DATE / TIME 03192023 1326	SCENE CLEARED DATE / TIME 03192023 1348	REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OHS)	
TOTAL TIME ROADWAY CLOSED 0	OTHER INVESTIGATION TIME 3 0	TOTAL MINUTES 5 2	OFFICER'S NAME* P.O. Hoelle	OFFICER'S BADGE NUMBER* 1 4 4	CHECKED BY OFFICER'S NAME* [Signature] CHECKED BY OFFICER'S BADGE NUMBER* 85

OWNER

UNIT # 01 OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) Mincy, Christina S OWNER PHONE: INCLUDE AREA CODE (☐ 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 # JZE1026 VEHICLE IDENTIFICATION # 1F1T1F1X11C10D1F1A14718421 VEHICLE YEAR 2013 VEHICLE MAKE Ford

INSURANCE VERIFIED INSURANCE COMPANY Founders INSURANCE POLICY # ITOH294268 COLOR White VEHICLE MODEL F150

COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT #OCCUPANTS 01 VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.

HAZARDOUS MATERIAL CLASS # PLACARD ID #

UNIT TYPE 04

OF TRAILING UNITS 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

SPECIAL FUNCTION 01

CARGO BODY TYPE 01

VEHICLE DEFECTS

NON-MOTORIST LOCATION AT IMPACT

ACTION 3

CONTRIBUTING CIRCUMSTANCES 02

SEQUENCE OF EVENTS

VEHICLE IDENTIFICATION # 1F1T1F1X11C10D1F1A14718421

VEHICLE YEAR 2013 VEHICLE MAKE Ford VEHICLE MODEL F150

VEHICLE WEIGHT GVWR/GCWR 1

HAZARDOUS MATERIAL CLASS # PLACARD ID #

VEHICLE IDENTIFICATION # 1F1T1F1X11C10D1F1A14718421

VEHICLE YEAR 2013 VEHICLE MAKE Ford VEHICLE MODEL F150

VEHICLE WEIGHT GVWR/GCWR 1

HAZARDOUS MATERIAL CLASS # PLACARD ID #

VEHICLE IDENTIFICATION # 1F1T1F1X11C10D1F1A14718421

VEHICLE YEAR 2013 VEHICLE MAKE Ford VEHICLE MODEL F150

VEHICLE WEIGHT GVWR/GCWR 1

HAZARDOUS MATERIAL CLASS # PLACARD ID #

VEHICLE IDENTIFICATION # 1F1T1F1X11C10D1F1A14718421

VEHICLE YEAR 2013 VEHICLE MAKE Ford VEHICLE MODEL F150

VEHICLE WEIGHT GVWR/GCWR 1

HAZARDOUS MATERIAL CLASS # PLACARD ID #

VEHICLE IDENTIFICATION # 1F1T1F1X11C10D1F1A14718421

VEHICLE YEAR 2013 VEHICLE MAKE Ford VEHICLE MODEL F150

VEHICLE WEIGHT GVWR/GCWR 1

HAZARDOUS MATERIAL CLASS # PLACARD ID #

LOCAL REPORT NUMBER 23020733

DAMAGE

DAMAGE SCALE 2

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

DAMAGED AREA(S) INDICATE ALL THAT APPLY

INITIAL POINT OF CONTACT

11

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

TRAFFIC

TRAFFICWAY FLOW 2

TRAFFIC CONTROL 4

OF THROUGH LANES ON ROAD 4

RAIL GRADE CROSSING 1

UNIT / NON-MOTORIST DIRECTION

FROM 4 TO 2

1 - NORTH 5 - NORTHEAST
2 - SOUTH 6 - NORTHWEST
3 - EAST 7 - SOUTHEAST
4 - WEST 8 - SOUTHWEST
9 - OTHER / UNKNOWN

UNIT SPEED 5

POSTED SPEED 3 5

DETECTED SPEED 1

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

LOCAL REPORT NUMBER
 2 3 0 2 0 7 3 3

OWNER

UNIT # 012 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
 OWNER PHONE: (INCLUDE AREA CODE) (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

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

VEHICLE

LP STATE OH LICENSE PLATE # JUV2213 VEHICLE IDENTIFICATION # 3VVLX7B21N1061606 VEHICLE YEAR 2022 VEHICLE MAKE volk

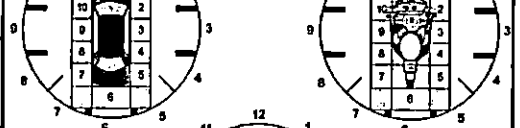
INSURANCE VERIFIED INSURANCE COMPANY Travelers INSURANCE POLICY # 9965967562031 COLOR Blue VEHICLE MODEL Taos

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY

TYPE OF USE
 COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

US DOT # _____

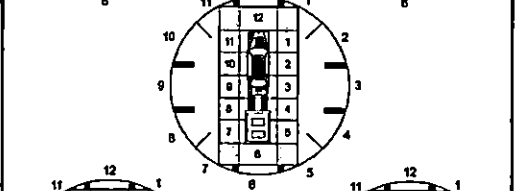
HAZARDOUS MATERIAL
 MATERIAL RELEASED CLASS # _____ PLACARD ID # _____
 PLACARD



UNIT TYPE 03

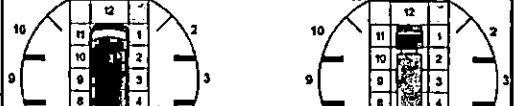
1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER
 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)
 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - 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 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS 0



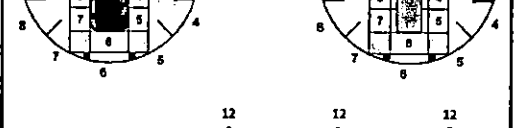
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?
2 1 - YES 2 - NO 9 - OTHER / UNKNOWN AUTONOMOUS MODE LEVEL 0

0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION
 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION



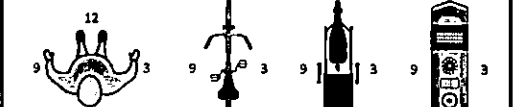
SPECIAL FUNCTION 01

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



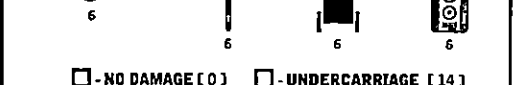
CARGO BODY TYPE 01

1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTORVEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER
 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10 - FLAT BED 13 - AUTOTRANSPORTER
 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 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 - MEDIA/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE
 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 15 - FIRST RESPONDER AT INCIDENT SCENE
 5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS 99 - OTHER / UNKNOWN

INITIAL POINT OF CONTACT

01 0 - NO DAMAGE 14 - UNDERCARRIAGE
 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 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

TRAFFIC

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

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

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 17 - VISION OBSTRUCTION
 6 - IMPROPER TURN 12 - IMPROPER BACKING

OF THROUGH LANES ON ROAD 4

RAIL GRADE CROSSING 1
 1 - NOT INVOLVED
 2 - INVOLVED-ACTIVE CROSSING
 3 - INVOLVED-PASSIVE CROSSING

SEQUENCE OF EVENTS

1 2 0

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 MOTORVEHICLE
 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 19 - ANIMAL - OTHER 20 - MOTORVEHICLE 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 - PEDAL CYCLE

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

COLLISION WITH FIXED OBJECT STRUCK

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 51 - WALL
 27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING
 28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL
 29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT
 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 99 - OTHER / UNKNOWN
 49 - FIRE HYDRANT

UNIT SPEED 35

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

POSTED SPEED 35



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
2 3 0 2 0 7 3 3

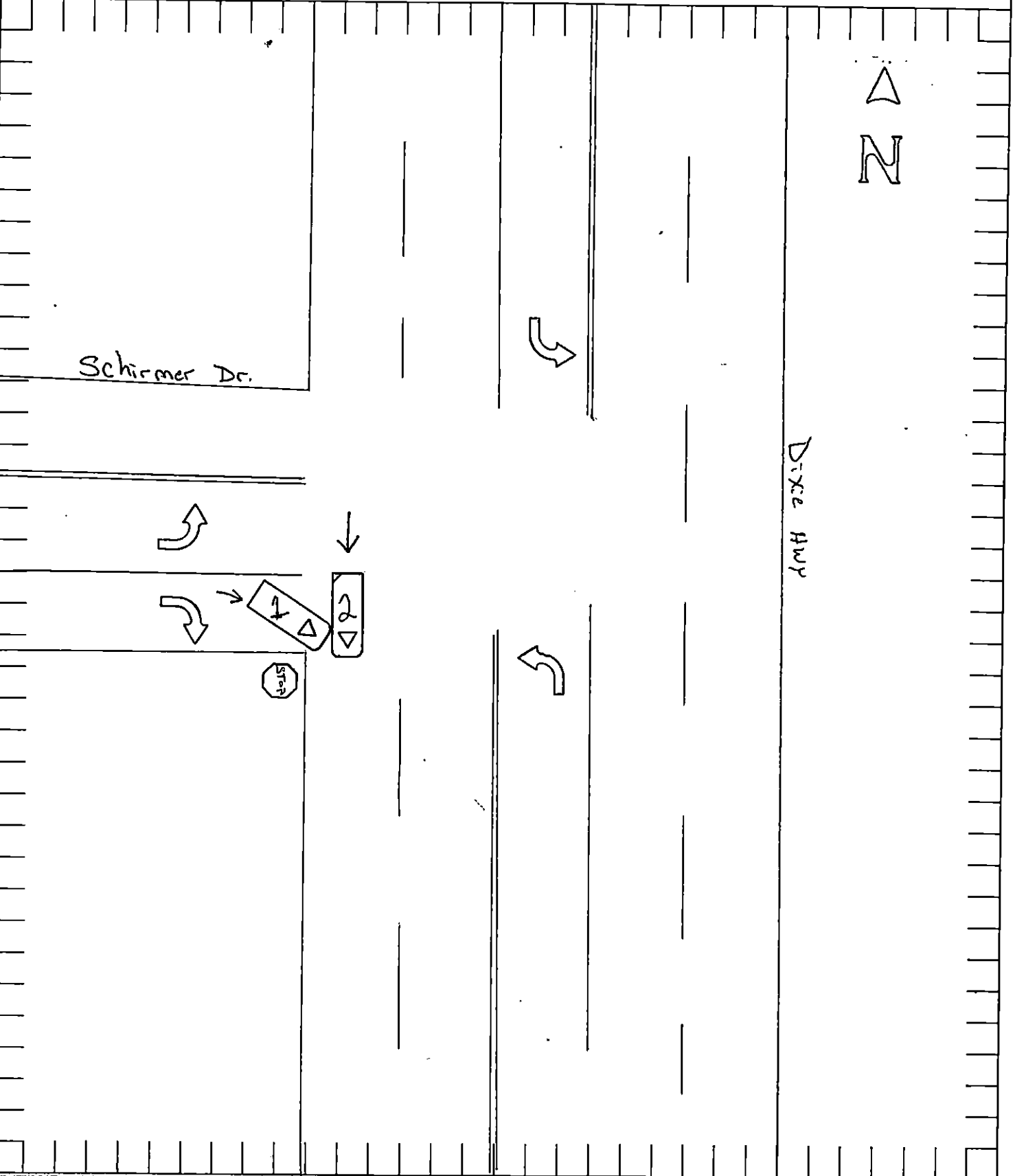
UNIT # 0 1	NAME: LAST, FIRST, MIDDLE Bishop, Cierra M	DATE OF BIRTH 1 0 1 9 1 9 9 3	AGE 2 9	GENDER F
ADDRESS: STREET, CITY, STATE, ZIP 2611 Hilda Ave Hamilton, OH 45015		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4
OL STATE OH	OPERATOR LICENSE NUMBER	OFFENSE CHARGED 331.16a	LOCAL CODE <input checked="" type="checkbox"/>	OFFENSE DESCRIPTION Right of way-Right Turn
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
ALCOHOL TEST		DRUG TEST(S)		
STATUS	TYPE	VALUE	STATUS	TYPE
1	1		1	1

UNIT # 0 2	NAME: LAST, FIRST, MIDDLE Clements, Alta J	DATE OF BIRTH 0 2 0 4 1 9 4 1	AGE 8 2	GENDER F
ADDRESS: STREET, CITY, STATE, ZIP 855 Stahlheber Rd Unit 863 Hamilton, OH 45013		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	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
ALCOHOL TEST		DRUG TEST(S)		
STATUS	TYPE	VALUE	STATUS	TYPE
1	1		1	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
ALCOHOL TEST		DRUG TEST(S)		
STATUS	TYPE	VALUE	STATUS	TYPE

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-M/C MOPED ONLY	5-EXCEPT CLASS A 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	6-EXCEPT CLASS A & CLASS B BUS	7-OTHER DISTRACTION INSIDE THE VEHICLE	ALCOHOL TEST TYPE
1-NOT TRANSPORTED / TREATED AT SCENE	7-THIRD-LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION		7-EXCEPT TRACTOR-TRAILER	8-OTHER DISTRACTION OUTSIDE THE VEHICLE	1-NONE
2-EMS	8-THIRD-MIDDLE	1-NOT EJECTED	H-HAZMAT	8-INTERMEDIATE LICENSE RESTRICTIONS	9-OTHER / UNKNOWN	2-BLOOD
3-POLICE	9-THIRD-RIGHT SIDE	2-PARTIALLY EJECTED	M-MOTORCYCLE	9-LEARNER'S PERMIT RESTRICTIONS	DRUG TEST TYPE	
9-OTHER / UNKNOWN	10-SLEEPER SECTION OF TRUCK CAB	3-TOTALLY EJECTED	P-PASSENGER	10-LIMITED TO DAYLIGHT ONLY	1-NONE	
SAFETY EQUIPMENT		4-NOT APPLICABLE	N-TANKER	11-LIMITED TO EMPLOYMENT	2-BLOOD	
1-NONE USED	11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	TRAPPED		12-LIMITED-OTHER	3-URINE	
2-SHOULDER BELT ONLY USED	12-PASSENGER IN UNENCLOSED CARGO AREA	1-NOT TRAPPED	Q-MOTOR SCOOTER	13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	4-BREATH	
3-LAP BELT ONLY USED	13-TRAILING UNIT	2-EXTRICATED BY MECHANICAL MEANS	R-THREE-WHEEL MOTORCYCLE	14-MILITARY VEHICLES ONLY	5-OTHER	
4-SHOULDER & LAP BELT USED	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	3-FREED BY NON-MECHANICAL MEANS	S-SCHOOL BUS	15-MOTOR VEHICLES WITHOUT AIR BRAKES	DRUG TEST RESULT(S)	
5-CHILD RESTRAINT SYSTEM-FORWARD FACING	15-NON-MOTORIST	GENDER		16-OUTSIDE MIRROR	1-NONE	
6-CHILD RESTRAINT SYSTEM-REAR FACING	99-OTHER / UNKNOWN	F-FEMALE	T-DOUBLE & TRIPLE TRAILERS	17-PROSTHETIC AID	2-BLOOD	
7-BOOSTER SEAT		M-MALE	X-TANKER / HAZMAT	18-OTHER	3-URINE	
8-HELMET USED		U-OTHER / UNKNOWN			4-OTHER	
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)					5-OTHER	
10-REFLECTIVE CLOTHING					1-AMPHETAMINES	
11-LIGHTING-PEDESTRIAN / BICYCLE ONLY					2-BARBITURATES	
99-OTHER / UNKNOWN					3-BENZODIAZEPINES	
					4-CANNABINOIDS	
					5-COCAINE	
					6-OPIATES / OPIOIDS	
					7-OTHER	
					8-NEGATIVE RESULTS	

LOCAL REPORT NUMBER 23-020733	REPORTING AGENCY Fairfield Police Department	DATE OF ACCIDENT 3/19/23
IN COUNTY OF Butler	ACCIDENT LOCATION Dixie Hwy @ Schirmer Dr	



OFFICER'S SIGNATURE

P.O. Hoelle

BADGE NO.

144