

# TRAFFIC CRASH REPORT

\* DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER\*

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH		<input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		<b>LOCAL INFORMATION</b> REPORTING AGENCY NAME* <b>Fairfield Police Department</b>		NCIC* <b>00901</b>		IR23-002808		HIT/SKIP <input type="checkbox"/> 1 - SOLVED <input type="checkbox"/> 2 - UNSOLVED		NUMBER OF UNITS <b>2</b>		UNIT IN ERROR <input type="checkbox"/> 98 - ANIMAL <input checked="" type="checkbox"/> 99 - UNKNOWN	
COUNTY* <b>09</b>		LOCALITY* <input checked="" type="checkbox"/> 1 - CITY <input type="checkbox"/> 2 - VILLAGE <input type="checkbox"/> 3 - TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP* <b>Fairfield</b>		CRASH DATE/TIME* <b>09/29/2023 20:14</b>		CRASH SEVERITY <input checked="" type="checkbox"/> 1 - FATAL <input type="checkbox"/> 2 - SERIOUS INJURY SUSPECTED <input type="checkbox"/> 3 - MINOR INJURY SUSPECTED <input type="checkbox"/> 4 - INJURY POSSIBLE <input type="checkbox"/> 5 - PROPERTY DAMAGE ONLY							
ROUTE TYPE <b>SR</b>		ROUTE NUMBER <b>4</b>		PREFIX <input type="checkbox"/> 1 - NORTH <input type="checkbox"/> 2 - SOUTH <input type="checkbox"/> 3 - EAST <input type="checkbox"/> 4 - WEST		LOCATION ROAD NAME		ROAD TYPE		LATITUDE <b>39.306583</b>		REFERENCE			
ROUTE TYPE		ROUTE NUMBER		PREFIX <input type="checkbox"/> 1 - NORTH <input type="checkbox"/> 2 - SOUTH <input type="checkbox"/> 3 - EAST <input type="checkbox"/> 4 - WEST		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) <b>7300</b>		ROAD TYPE		LONGITUDE <b>-84.486672</b>					
REFERENCE POINT <input checked="" type="checkbox"/> 1 - INTERSECTION <input type="checkbox"/> 2 - MILE POST <input type="checkbox"/> 3 - HOUSE #		DIRECTION FROM REFERENCE <input type="checkbox"/> 1 - NORTH <input type="checkbox"/> 2 - SOUTH <input type="checkbox"/> 3 - EAST <input type="checkbox"/> 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 AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY		INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES <b>4</b>							
DISTANCE FROM REFERENCE <input checked="" type="checkbox"/> 3		DISTANCE UNIT OF MEASURE <input type="checkbox"/> 1 - MILES <input type="checkbox"/> 2 - FEET <input type="checkbox"/> 3 - YARDS		ROUTE TYPE		ROAD TYPE		ROADWAY <input type="checkbox"/> ROADWAY DIVIDED							
LOCATION OF FIRST HARMFUL EVENT <input checked="" type="checkbox"/> 1 - ON ROADWAY <input type="checkbox"/> 2 - ON SHOULDER <input type="checkbox"/> 3 - IN MEDIAN <input type="checkbox"/> 4 - ON ROADSIDE <input type="checkbox"/> 5 - ON GORE <input type="checkbox"/> 6 - OUTSIDE TRAFFIC WAY <input type="checkbox"/> 7 - ON RAMP <input type="checkbox"/> 8 - OFF RAMP <input type="checkbox"/> 9 - CROSSOVER <input type="checkbox"/> 10 - DRIVEWAY/ALLEY ACCESS <input type="checkbox"/> 11 - RAILWAY GRADE CROSSING <input type="checkbox"/> 12 - SHARED USE PATHS OR TRAILS <input type="checkbox"/> 13 - BIKE LANE <input type="checkbox"/> 14 - TOLL BOOTH <input type="checkbox"/> 99 - OTHER/UNKNOWN				MANNER OF CRASH COLLISION/IMPACT <input checked="" type="checkbox"/> 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT <input type="checkbox"/> 2 - REAR-END <input type="checkbox"/> 3 - HEAD-ON <input type="checkbox"/> 4 - REAR-TO-REAR <input type="checkbox"/> 5 - BACKING <input type="checkbox"/> 6 - ANGLE <input type="checkbox"/> 7 - SIDESWIPE, SAME DIRECTION <input type="checkbox"/> 8 - SIDESWIPE, OPPOSITE DIRECTION <input type="checkbox"/> 9 - OTHER/UNKNOWN				DIRECTION OF TRAVEL <input type="checkbox"/> 1 - NORTH <input type="checkbox"/> 2 - SOUTH <input type="checkbox"/> 3 - EAST <input type="checkbox"/> 4 - WEST		MEDIAN TYPE <input type="checkbox"/> 1 - DIVIDED FLUSH MEDIAN (< 4 FEET) <input type="checkbox"/> 2 - DIVIDED FLUSH MEDIAN (>= 4 FEET) <input type="checkbox"/> 3 - DIVIDED, DEPRESSED MEDIAN (ANY TYPE) <input type="checkbox"/> 4 - DIVIDED, RAISE MEDIAN (ANY TYPE) <input type="checkbox"/> 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 <input type="checkbox"/> 1 - LANE CLOSURE <input type="checkbox"/> 2 - LANE SHFT/CROSSOVER OR MEDIAN <input type="checkbox"/> 3 - WORK ON SHOULDER <input type="checkbox"/> 4 - INTERMITTENT OR MOVING WORK <input type="checkbox"/> 5 - OTHER		LOCATION OF CRASH IN WORK ZONE <input type="checkbox"/> 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN <input type="checkbox"/> 2 - ADVANCE WARNING AREA <input type="checkbox"/> 3 - TRANSITION AREA <input type="checkbox"/> 4 - ACTIVITY AREA <input type="checkbox"/> 5 - TERMINATION AREA		CONTOUR <input checked="" type="checkbox"/> 1 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/ UNKNOWN		CONDITIONS <input checked="" type="checkbox"/> 1 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN		SURFACE <input checked="" type="checkbox"/> 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/ UNKNOWN					
LIGHT CONDITION <input checked="" type="checkbox"/> 3 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER/UNKNOWN				WEATHER <input checked="" type="checkbox"/> 1 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											
NARRATIVE On September 29, 2023 at about 8:14 P.M. Unit 1 was traveling northbound on S.R.4(Dixie Hwy.) at approximately 35 M.P.H. and when at 7300 Dixie Highway failed to stop within the assured clear distance ahead and collided with Unit 2 which was also northbound and slowing down in traffic.					DIAGRAM 										
CRASH REPORTED DATE/TIME <b>09/29/2023 20:14</b>		DISPATCH DATE/TIME <b>09/29/2023 20:16</b>		ARRIVAL DATE/TIME <b>09/29/2023 20:18</b>		SCENE CLEARED DATE/TIME <b>09/29/2023 21:18</b>		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 ODPS)							
TOTAL TIME ROADWAY CLOSED <b>0</b>		OTHER INVESTIGATION TIME <b>0</b>		TOTAL MINUTES <b>62</b>		OFFICER'S NAME* <b>Frazier, Connor</b>		CHECKED BY OFFICER'S NAME* <b>Miller, Matthew</b>		<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)					
						OFFICER'S BADGE NUMBER* <b>158</b>		CHECKED BY OFFICER'S BADGE NUMBER* <b>141</b>							



IR23-002808

<b>UNIT #</b> 2	<b>OWNER NAME:</b> LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER ) NEELY, SAMMANTHA		<b>OWNER PHONE:</b> INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER	
<b>OWNER ADDRESS:</b> STREET, CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER ) 770 HILL AVE, HAMILTON, OH 45015				
<b>COMMERCIAL CARRIER:</b> NAME, ADDRESS, CITY, STATE, ZIP			<b>COMMERCIAL CARRIER PHONE:</b> INCLUDE AREA CODE	
<b>LP STATE</b> OH	<b>LICENSE PLATE #</b> JMW9039	<b>VEHICLE IDENTIFICATION #</b> 3KPF24AD3ME354010	<b>VEHICLE YEAR</b> 2021	<b>VEHICLE MAKE</b> Kia
<input type="checkbox"/> <b>INSURANCE VERIFIED</b>	<b>INSURANCE COMPANY</b> ALLSTATE INSURANCE	<b>INSURANCE POLICY #</b> 826687296	<b>COLOR</b> Black	<b>VEHICLE MODEL</b> Forte
<input type="checkbox"/> <b>COMMERCIAL</b> <input type="checkbox"/> <b>GOVERNMENT</b> <input type="checkbox"/> <b>IN EMERGENCY RESPONSE</b>		<b>US DOT #</b>	<b>TOWED BY:</b> COMPANY NAME WAYNES TOWING	
<input type="checkbox"/> <b>INTERLOCK DEVICE EQUIPPED</b>	<input type="checkbox"/> <b>HIT/SKIP UNIT</b>	<b># OCCUPANTS</b> 3	<b>HAZARDOUS MATERIAL</b> <input type="checkbox"/> <b>MATERIAL RELEASED</b> <input type="checkbox"/> <b>PLACARD</b>	
<b>TYPE OF USE</b>		<b>VEHICLE WEIGHT GVWR/GCWR</b>	<b>CLASS #</b> <b>PLACARD ID #</b>	
<input type="checkbox"/> PASSENGER CAR <input type="checkbox"/> PASSENGER VAN (MINIVAN) <input type="checkbox"/> SPORT UTILITY VEHICLE <input type="checkbox"/> PICK UP <input type="checkbox"/> CARGO VAN <input type="checkbox"/> MOTORCYCLE <input type="checkbox"/> WHEELED <input type="checkbox"/> MOTORCYCLE <input type="checkbox"/> WHEELED <input type="checkbox"/> AUTOCYCLE <input type="checkbox"/> MOPED OR MOTORIZED BICYCLE <input type="checkbox"/> ALL TERRAIN VEHICLE (ATV/UTV)		<input type="checkbox"/> 1 - <= 10K LBS. <input type="checkbox"/> 2 - 10,001 - 26K LBS. <input type="checkbox"/> 3 - >= 26K LBS.	<input type="checkbox"/> 1 - LIMO (LIVERY VEHICLE) <input type="checkbox"/> BUS (16+ PASSENGERS) <input type="checkbox"/> OTHER VEHICLE <input type="checkbox"/> HEAVY EQUIPMENT <input type="checkbox"/> ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE <input type="checkbox"/> PEDESTRIAN/ SKATER <input type="checkbox"/> WHEELCHAIR (ANY TYPE) <input type="checkbox"/> OTHER NON-MOTORIST <input type="checkbox"/> BICYCLE <input type="checkbox"/> TRAIN <input type="checkbox"/> UNKNOWN OR HIT/SKIP	
<b>UNIT TYPE</b> 1	<b># OF TRAILING UNITS</b> 0			
<b>WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?</b> 2	<b>AUTONOMOUS MODE LEVEL</b> 0			
<b>SPECIAL FUNCTION</b> 1	<input type="checkbox"/> NONE <input type="checkbox"/> TAXI <input type="checkbox"/> ELECTRONIC RIDE SHARING <input type="checkbox"/> SCHOOL TRANSPORT <input type="checkbox"/> BUS - TRANSIT /COMMUTER <input type="checkbox"/> BUS - CHARTER/TOUR <input type="checkbox"/> BUS - INTERCITY <input type="checkbox"/> BUS - SHUTTLE <input type="checkbox"/> BUS - OTHER <input type="checkbox"/> AMBULANCE <input type="checkbox"/> FIRE <input type="checkbox"/> MILITARY <input type="checkbox"/> POLICE <input type="checkbox"/> PUBLIC UTILITY <input type="checkbox"/> CONSTRUCTION EQUIPMENT <input type="checkbox"/> FARM <input type="checkbox"/> MOWING <input type="checkbox"/> SNOW REMOVAL <input type="checkbox"/> TOWING <input type="checkbox"/> SAFETY SERVICE PATROL <input type="checkbox"/> MAIL CARRIER <input type="checkbox"/> OTHER/UNKNOWN			
<b>CARGO BODY TYPE</b> 1	<input type="checkbox"/> NO CARGO BODY TYPE / NOT APPLICABLE <input type="checkbox"/> BUS <input type="checkbox"/> VEHICLE TOWING ANOTHER MOTOR VEHICLE <input type="checkbox"/> LOGGING <input type="checkbox"/> INTERMODAL CONTAINER CHASSIS <input type="checkbox"/> CARGO VAN/ ENCLOSED BOX <input type="checkbox"/> GRAIN/CHIPS/GRAVEL <input type="checkbox"/> POLE <input type="checkbox"/> CARGO TANK <input type="checkbox"/> FLAT BED <input type="checkbox"/> DUMP <input type="checkbox"/> CONCRETE MIXER <input type="checkbox"/> AUTO TRANSPORTER <input type="checkbox"/> GARBAGE/REFUSE <input type="checkbox"/> OTHER/UNKNOWN			
<b>VEHICLE DEFECTS</b> 1	<input type="checkbox"/> TURN SIGNALS <input type="checkbox"/> HEAD LAMPS <input type="checkbox"/> TAIL LAMPS <input type="checkbox"/> BRAKES <input type="checkbox"/> STEERING <input type="checkbox"/> TIRE BLOWOUT <input type="checkbox"/> WORN OR SLICK TIRES <input type="checkbox"/> TRAILER EQUIPMENT DEFECTIVE <input type="checkbox"/> MOTOR TROUBLE <input type="checkbox"/> DISABLED FROM PRIOR ACCIDENT <input type="checkbox"/> OTHER/UNKNOWN			
<b>NON-MOTORIST LOCATION AT IMPACT</b> 1	<input type="checkbox"/> INTERSECTION - MARKED CROSSWALK <input type="checkbox"/> INTERSECTION - UNMARKED CROSSWALK <input type="checkbox"/> INTERSECTION - OTHER <input type="checkbox"/> MIDBLOCK - MARKED CROSSWALK <input type="checkbox"/> TRAVEL LANE - OTHER LOCATION <input type="checkbox"/> BICYCLE LANE <input type="checkbox"/> SHOULDER/ROADSIDE <input type="checkbox"/> SIDEWALK <input type="checkbox"/> MEDIAN/CROSSING ISLAND <input type="checkbox"/> DRIVEWAY ACCESS OR TRAILS <input type="checkbox"/> FIRST RESPONDER AT INCIDENT SCENE <input type="checkbox"/> OTHER/UNKNOWN			
<b>ACTION</b> 4	<input type="checkbox"/> NON-CONTACT <input type="checkbox"/> NON-COLLISION <input type="checkbox"/> STRIKING <input type="checkbox"/> STRUCK <input type="checkbox"/> BOTH STRIKING & STRUCK <input type="checkbox"/> OTHER/UNKNOWN <input type="checkbox"/> STRAIGHT AHEAD <input type="checkbox"/> BACKING <input type="checkbox"/> CHANGING LANES <input type="checkbox"/> OVER-TAKING/ PASSING <input type="checkbox"/> MAKING RIGHT TURN <input type="checkbox"/> MAKING LEFT TURN <input type="checkbox"/> MAKING U-TURN <input type="checkbox"/> ENTERING TRAFFIC FROM A PARKED POSITION <input type="checkbox"/> LEAVING TRAFFIC LANE <input type="checkbox"/> ENTERING OR CROSSING SPECIFIED LOCATION <input type="checkbox"/> WALKING, RUNNING, JOGGING, PLAYING <input type="checkbox"/> WORKING <input type="checkbox"/> PUSHING VEHICLE <input type="checkbox"/> APPROACHING OR LEAVING VEHICLE <input type="checkbox"/> STANDING <input type="checkbox"/> OTHER NON-MOTORIST <input type="checkbox"/> STANDING OUTSIDE DISABLED VEHICLE <input type="checkbox"/> OTHER/UNKNOWN			
<b>CONTRIBUTING CIRCUMSTANCES</b> 1	<input type="checkbox"/> NONE <input type="checkbox"/> FAILURE TO YIELD <input type="checkbox"/> RAN RED LIGHT <input type="checkbox"/> RAN STOP SIGN <input type="checkbox"/> UNSAFE SPEED <input type="checkbox"/> IMPROPER TURN <input type="checkbox"/> LEFT OF CENTER <input type="checkbox"/> FOLLOWING TOO CLOSE/ACDA <input type="checkbox"/> IMPROPER LANE CHANGE <input type="checkbox"/> IMPROPER PASSING <input type="checkbox"/> DROVE OFF ROAD <input type="checkbox"/> IMPROPER BACKING <input type="checkbox"/> IMPROPER START FROM A PARKED POSITION <input type="checkbox"/> STOPPED OR PARKED ILLEGALLY <input type="checkbox"/> SWERVING TO AVOID <input type="checkbox"/> WRONG WAY <input type="checkbox"/> VISION OBSTRUCTION <input type="checkbox"/> OPERATING DEFECTIVE EQUIPMENT <input type="checkbox"/> LOAD SHIFTING/ FALLING/SPILLING <input type="checkbox"/> IMPROPER CROSSING <input type="checkbox"/> LYING IN ROADWAY <input type="checkbox"/> NOT DISCERNIBLE <input type="checkbox"/> OPENING DOOR INTO ROADWAY <input type="checkbox"/> OTHER IMPROPER ACTION			
<b>SEQUENCE OF EVENTS</b>				
<b>EVENTS</b>				
1	20	1	20	1
2		2		2
3		3		3
4		4		4
5		5		5
6		6		6
1		1		1
<b>FIRST HARMFUL EVENT</b>				
<b>MOST HARMFUL EVENT</b>				

<b>DAMAGE</b>	
<b>DAMAGE SCALE</b>	
4	1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN
<b>DAMAGED AREA(S)</b> 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 ]	
<b>INITIAL POINT OF CONTACT</b>	
12	0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
<b>TRAFFIC</b>	
<b>TRAFFICWAY FLOW</b>	<b>TRAFFIC CONTROL</b>
2	6
1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL
<b># OF THROUGH LANES ON ROAD</b>	<b>RAIL GRADE CROSSING</b>
5	1
<b>UNIT / NON-MOTORIST DIRECTION</b>	
FROM 2 TO 1	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER/UNKNOWN
<b>UNIT SPEED</b>	<b>DETECTED SPEED</b>
15	1
<b>POSTED SPEED</b>	1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED
40	



