

LOCAL REPORT NUMBER*

IR25-004501

☐ PHOTOS TAKEN
 ☐ OH-2
 ☐ OH-3

☐ SECONDARY CRASH
 ☒ OH-1P
 ☐ OTHER

☐ PRIVATE PROPERTY

LOCAL INFORMATION

REPORTING AGENCY NAME*

NCIC*

Fairfield Police Department

00901

HIT/SKIP

☐ 1 - SOLVED
☐ 2 - UNSOLVED

NUMBER OF UNITS

3

UNIT IN ERROR

☐ 1 98 - ANIMAL
☐ 99 - UNKNOWN

COUNTY*

09

LOCALITY*

1

1 - CITY
 2 - VILLAGE
 3 - TOWNSHIP

LOCATION: CITY, VILLAGE, TOWNSHIP*

Fairfield

CRASH DATE/TIME*

09/02/2025 15:39

CRASH SEVERITY

☐ 5

1 - FATAL
 2 - SERIOUS INJURY SUSPECTED
 3 - MINOR INJURY SUSPECTED
 4 - INJURY POSSIBLE
 5 - PROPERTY DAMAGE ONLY

ROUTE TYPE

ROUTE NUMBER

PREFIX

☐ 1 - NORTH
☐ 2 - SOUTH
☐ 3 - EAST
☐ 4 - WEST

LOCATION ROAD NAME

Mack

ROAD TYPE

RD

LATITUDE

39.312308

ROUTE TYPE

ROUTE NUMBER

PREFIX

☐ 1 - NORTH
☐ 2 - SOUTH
☐ 3 - EAST
☐ 4 - WEST

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)

Fairview Hill

ROAD TYPE

CT

LONGITUDE

-84.512292

REFERENCE POINT

☐ 1
 1 - INTERSECTION
 2 - MILE POST
 3 - HOUSE #

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
 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

☐ WITHIN INTERSECTION OR ON APPROACH
☐ WITHIN INTERCHANGE AREA

ROADWAY

☐ ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT

☐ 1
 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
 9 - CROSSOVER
 10 - DRIVEWAY/ALLEY ACCESS
 11 - RAILWAY GRADE CROSSING
 12 - SHARED USE PATHS OR TRAILS
 13 - BIKE LANE
 14 - TOLL BOOTH
 99 - OTHER/UNKNOWN

MANNER OF CRASH COLLISION/IMPACT

☐ 2
 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

DIRECTION OF TRAVEL

☐ 1 - NORTH
☐ 2 - SOUTH
☐ 3 - EAST
☐ 4 - WEST

MEDIAN TYPE

☐ 1
 1 - DIVIDED FLUSH MEDIAN (< 4 FEET)
 2 - DIVIDED FLUSH MEDIAN (>= 4 FEET)
 3 - DIVIDED, DEPRESSED MEDIAN
 4 - DIVIDED, RAISE MEDIAN (ANY TYPE)
 9 - OTHER/UNKNOWN

☐ WORK ZONE RELATED
☐ WORKERS PRESENT
☐ LAW ENFORCEMENT PRESENT
☐ ACTIVE SCHOOL ZONE

WORK ZONE TYPE

☐ 1 - LANE CLOSURE
☐ 2 - LANE SHFT/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

2

CONDITIONS

1

SURFACE

2

LIGHT CONDITION

☐ 1
 1 - DAYLIGHT
 2 - DAWN/DUSK
 3 - DARK - LIGHTED ROADWAY
 4 - DARK - ROADWAY NOT LIGHTED
 5 - DARK - UNKNOWN ROADWAY LIGHTING
 9 - OTHER/UNKNOWN

WEATHER

☐ 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

1 - STRAIGHT LEVEL

2 - STRAIGHT GRADE

3 - CURVE LEVEL

4 - CURVE GRADE

9 - OTHER/ UNKNOWN

1 - DRY

2 - WET

3 - SNOW

4 - ICE

5 - SAND, MUD, DIRT, OIL, GRAVEL

6 - WATER (STANDING, MOVING)

7 - SLUSH

9 - OTHER/UNKNOWN

1 - CONCRETE

2 - BLACKTOP, BITUMINOUS, ASPHALT

3 - BRICK/BLOCK

4 - SLAG, GRAVEL, STONE

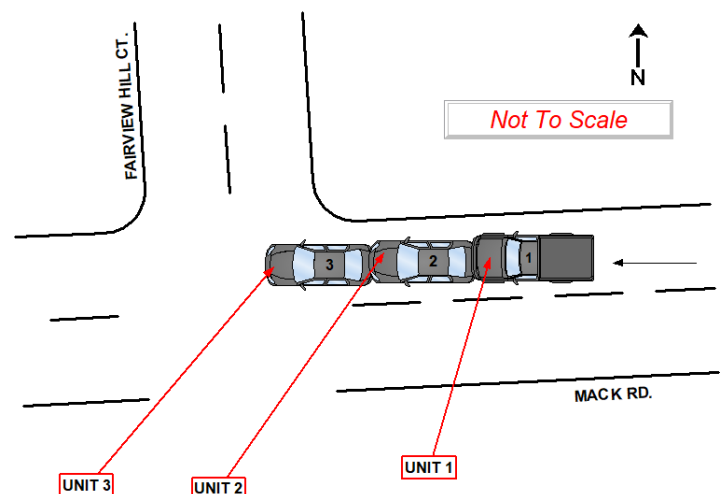
5 - DIRT

9 - OTHER/ UNKNOWN

NARRATIVE

On 9/2/25 at 3:39p.m. Unit 1 was traveling west on Mack Rd. when at Fairview Hill Ct. failed to stop within the assured clear distance ahead and collided with Unit 2 who was stopped in traffic traveling west on Mack Rd. Subsequently, Unit 2 struck Unit 3 who also stopped in traffic traveling west from Unit 1 colliding with Unit 2. Unit 1 was cited for ACDA (FCO 333.03a)

DIAGRAM



CRASH REPORTED DATE/TIME		DISPATCH DATE/TIME		ARRIVAL DATE/TIME		SCENE CLEARED DATE/TIME		REPORT TAKEN BY	
09/02/2025 15:39		09/02/2025 15:44		09/02/2025 15:54		09/02/2025 16:21		☒ POLICE AGENCY ☐ MOTORIST	
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*		CHECKED BY OFFICER'S NAME*		☐ SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)		
0	30	67	Pennekamp, Kaitlyn		Mack, Kevin				
			OFFICER'S BADGE NUMBER*		CHECKED BY OFFICER'S BADGE NUMBER*				
			177		120				

IR25-004501

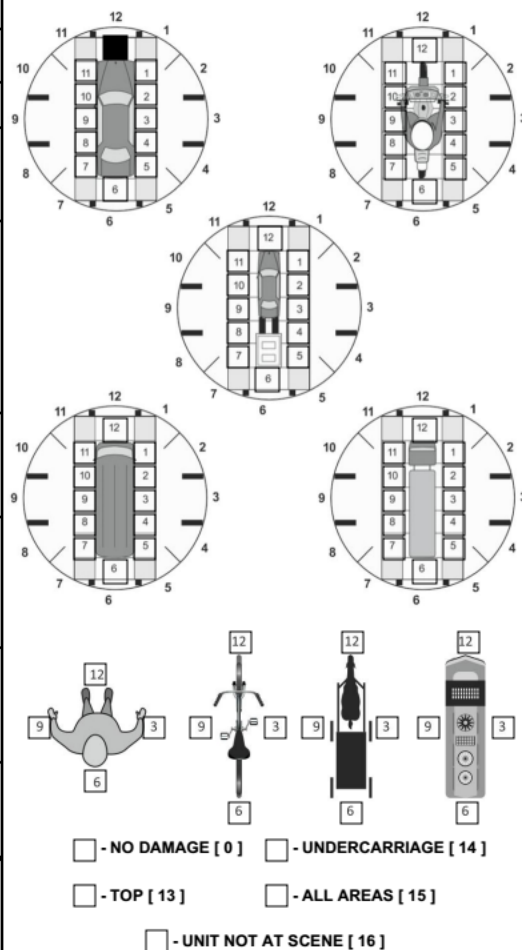
UNIT # 1	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) URIBE, ARTEMIO CARRILLO	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER) 1318 MEREDITH DR, CINCINNATI, OH 45231		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
LP STATE OH	LICENSE PLATE # JFZ2899	VEHICLE IDENTIFICATION # 1GCRKSE70CZ131979
VEHICLE YEAR 2012		VEHICLE MAKE Chevrolet
INSURANCE VERIFIED	INSURANCE COMPANY STATE FARM	INSURANCE POLICY # 1721985-SFP-35
COLOR Red		VEHICLE MODEL Silverado
TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE		
US DOT #		
VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.		
TOWED BY: COMPANY NAME		
HAZARDOUS MATERIAL ☐ MATERIAL CLASS # ☐ PLACARD ID #		
INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT ☐		
# OCCUPANTS 1		
UNIT TYPE 4		
# OF TRAILING UNITS 0		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - YES 2 - NO 9 - OTHER/UNKNOWN		
AUTONOMOUS MODE LEVEL 0		
SPECIAL FUNCTION 1		
CARGO BODY TYPE 1		
VEHICLE DEFECTS 1		
ACTION 3		
CONTRIBUTING CIRCUMSTANCES 8		
SEQUENCE OF EVENTS 1		
EVENTS 1		
COLLISION WITH FIXED OBJECT - STRUCK 1		
FIRST HARMFUL EVENT 1		
MOST HARMFUL EVENT 1		

DAMAGE

DAMAGE SCALE

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

9 - UNKNOWN

DAMAGED AREA(S)
INDICATE ALL THAT APPLY

INITIAL POINT OF CONTACT

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

TRAFFIC

TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 2 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD 2	RAIL GRADE CROSSING 1 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION FROM 3 TO 4 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER/UNKNOWN	
UNIT SPEED 0	DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED
POSTED SPEED 25	

UNIT # 2	OWNER NAME: LAST, FIRST, MIDDLE (■ SAME AS DRIVER) BARRY, YERO MAMRA	OWNER PHONE: INCLUDE AREA CODE ■ SAME AS DRIVER
OWNER ADDRESS: STREET, CITY, STATE, ZIP (■ SAME AS DRIVER) 300 HILLSIDE AVE APT 104, CINCINNATI, OH 45215		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
LP STATE OH	LICENSE PLATE # KMD6980	VEHICLE IDENTIFICATION # 5NPEB4AC2DH738648
VEHICLE YEAR 2013		VEHICLE MAKE Hyundai
INSURANCE VERIFIED	INSURANCE COMPANY PROGRESSIVE INSURANCE	INSURANCE POLICY # 991518638
COLOR Blue		VEHICLE MODEL Sonata
TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE		
US DOT #		
VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.		
TOWED BY: COMPANY NAME		
HAZARDOUS MATERIAL ☐ MATERIAL CLASS # ☐ PLACARD ID #		
UNIT TYPE 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - MOTORCYCLE 7 - 2-WHEELED 8 - 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? 1 - YES 2 - NO 9 - OTHER/UNKNOWN 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 / NOT APPLICABLE 2 - BUS 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 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 - 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		
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		
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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		
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 12 - RAILWAY VEHICLE OPPOSITE DIRECTION OF TRAVEL 13 - DOWNHILL RUNAWAY 14 - OTHER NON-COLLISION 15 - PEDESTRIAN 16 - PEDALCYCLE 17 - RAILWAY VEHICLE 18 - ANIMAL - FARM EQUIPMENT 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT		
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		
FIRST HARMFUL EVENT 1		
MOST HARMFUL EVENT 1		

LOCAL REPORT NUMBER* IR25-004501	
DAMAGE DAMAGE SCALE 3 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
DAMAGED AREA(S) INDICATE ALL THAT APPLY - NO DAMAGE [0] - UNDERCARRIAGE [14] - TOP [13] - ALL AREAS [15] - UNIT NOT AT SCENE [16]	
INITIAL POINT OF CONTACT 6 0 - NO DAMAGE 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 13 - TOP 99 - UNKNOWN	
TRAFFIC TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY TRAFFIC CONTROL 2 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL	
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UNIT SPEED 35 DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED	
POSTED SPEED 25	

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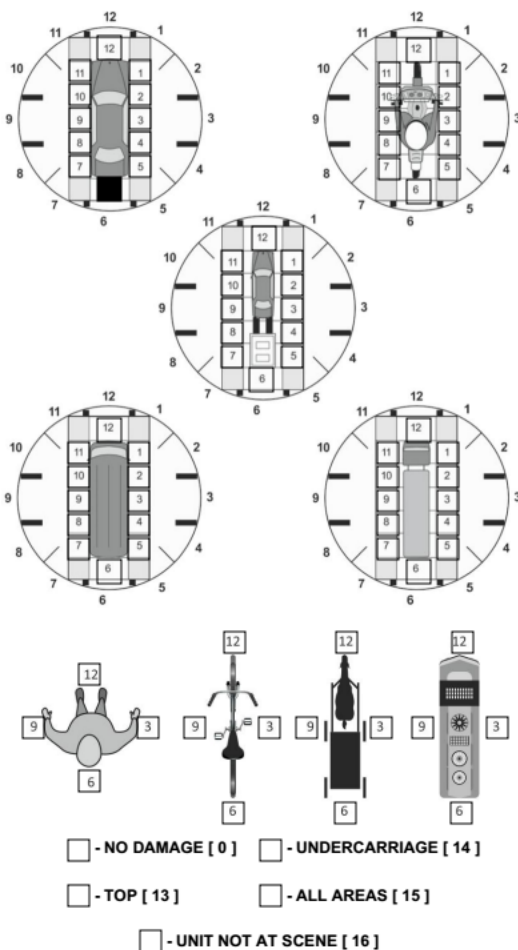
UNIT # 3	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) PARKER, ARLENE	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER) 157 LITTLEBROOK DR, FAIRFIELD, OH 45014		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
LP STATE OH	LICENSE PLATE # JFZ8247	VEHICLE IDENTIFICATION # 3N1CN8DV1LL835215
VEHICLE YEAR 2020		VEHICLE MAKE Nissan
INSURANCE VERIFIED	INSURANCE COMPANY STATE FARM	INSURANCE POLICY # 3828955-SFP-35
COLOR Black		VEHICLE MODEL VERSA
TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE		
US DOT #		
VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.		
TOWED BY: COMPANY NAME		
HAZARDOUS MATERIAL ☐ MATERIAL CLASS # ☐ PLACARD ID #		
INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT ☐		
# OCCUPANTS 2		
UNIT TYPE 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - MOTORCYCLE 7 - 2-WHEELED 8 - 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		
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FIRST HARMFUL EVENT 1		
MOST HARMFUL EVENT 1		

DAMAGE

DAMAGE SCALE

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

9 - UNKNOWN

DAMAGED AREA(S)
INDICATE ALL THAT APPLY

INITIAL POINT OF CONTACT

6 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN

TRAFFIC

TRAFFICWAY FLOW

2 1 - ONE-WAY 2 - TWO-WAY

TRAFFIC CONTROL

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

OF THROUGH LANES ON ROAD

2

RAIL GRADE CROSSING

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

UNIT / NON-MOTORIST DIRECTION

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

UNIT SPEED

0

DETECTED SPEED

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

POSTED SPEED

25

										LOCAL REPORT NUMBER*																																																							
MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH			AGE	GENDER																																																						
	1	URIBE, ARTEMIO CARRILLO					10/18/1968			56	M																																																						
	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE																																																										
	1318 MEREDITH DR, CINCINNATI, OH 45231																																																																
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5						4	☐	1	1	1	1																																																						
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OH				333.03a			ACDA		2500199501																																																								
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)																																																							
4				7	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG		1	STATUS: 1	TYPE: 1	VALUE: .	STATUS: 1	TYPE: 1	RESULT: SELECT UP TO 4																																																				
MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH			AGE	GENDER																																																						
	2	BARRY, YERO MAMRA					12/11/1991			33	M																																																						
	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE																																																										
	300 HILLSIDE AVE APT 104, CINCINNATI, OH 45215																																																																
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	3	MCQUEEN, SHILOH TAMAR					12/26/2000			24	F																																																						
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	5380 CAMELOT DR Unit 8, FAIRFIELD, OH 45014																																																																
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OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER*

IR25-004501

OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER																																																																					
	3	LEGGETT, DONOVAN JAMES				09/16/1999		25	M																																																																					
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812 GORDON SMITH BLVD APT 4, HAMILTON, OH 45013																																																																														
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