



TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER

LOCAL INFORMATION				REPORTING AGENCY NAME*			NCIC*	CRASH DATE/TIME*			CRASH SEVERITY								
<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3		<input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER		Fairfield Police Department			00901	<input type="checkbox"/> HIT/SKIP 1 - SOLVED 2 - UNSOLVED		NUMBER OF UNITS	1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY								
09	1	1 - CITY 2 - VILLAGE 3 - TOWNSHIP		Fairfield						3									
REFERENCE LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX	LOCATION ROAD NAME			ROAD TYPE	LATITUDE		3									
	SR	4		Muhlhauser			RD	39.316483											
REFERENCE	ROUTE TYPE	ROUTE NUMBER	PREFIX	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)			ROAD TYPE	LONGITUDE											
								-84.478696											
REFERENCE POINT		DIRECTION FROM REFERENCE		ROUTE TYPE				ROAD TYPE		INTERSECTION RELATED									
<input type="checkbox"/> 1 - INTERSECTION <input type="checkbox"/> 2 - MILE POST <input type="checkbox"/> 3 - HOUSE #		<input type="checkbox"/> 1 - NORTH <input type="checkbox"/> 2 - SOUTH <input type="checkbox"/> 3 - EAST <input type="checkbox"/> 4 - WEST		IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE				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		<input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA							
DISTANCE FROM REFERENCE		DISTANCE UNIT OF MEASURE								4 NUMBER OF APPROACHES									
		<input type="checkbox"/> 1 - MILES <input type="checkbox"/> 2 - FEET <input type="checkbox"/> 3 - YARDS								ROADWAY									
LOCATION OF FIRST HARMFUL EVENT				MANNER OF CRASH COLLISION/IMPACT				DIRECTION OF TRAVEL		MEDIAN TYPE									
<input 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				<input type="checkbox"/> 6		1 - NOT COLLISION 2 - BETWEEN 3 - TWO MOTOR VEHICLES IN TRANSPORT 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - HEAD-ON 9 - OTHER/UNKNOWN			<input type="checkbox"/> 1 - NORTH <input type="checkbox"/> 2 - SOUTH <input type="checkbox"/> 3 - EAST <input type="checkbox"/> 4 - WEST		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				
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE				1 - LANE CLOSURE 2 - LANE SHFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER				<input type="checkbox"/> 1		1 - BEFORE THE 1ST WORK ZONE 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA				3 CONTOUR		1 CONDITIONS		2 SURFACE	
<input type="checkbox"/> LIGHT CONDITION <input type="checkbox"/> 1 - DAYLIGHT <input type="checkbox"/> 2 - DAWN/DUSK <input type="checkbox"/> 3 - DARK - LIGHTED ROADWAY <input type="checkbox"/> 4 - DARK - ROADWAY NOT LIGHTED <input type="checkbox"/> 5 - DARK - UNKNOWN ROADWAY LIGHTING <input type="checkbox"/> 9 - OTHER/UNKNOWN				1 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL				WEATHER		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 <p>On 4/7/24 at 4:03 P.M. Unit 1 was traveling on northbound Dixie Highway at Muhlhauser Road. Unit 2 was traveling westbound on Muhlhauser Road at Dixie Highway. Unit 3 was stopped at a red light on southbound Dixie Highway at Mack Road. Unit 1 ran a red light and struck Unit 2 in the left rear corner. Unit 1 then went into the southbound lanes of Dixie Highway and struck Unit 3 in the left rear corner before coming to a stop.</p> <p>Unit 3 was additionally cited with Driving with Temporary Permit without a Licensed Driver over 21 years of age (F.C.O. 335.03a2b) - MM.</p>												DIAGRAM 							
CRASH REPORTED DATE/TIME			DISPATCH DATE/TIME			ARRIVAL DATE/TIME			SCENE CLEARED DATE/TIME			REPORT TAKEN BY							
04/07/2024 16:03			04/07/2024 16:04			04/07/2024 16:08			04/07/2024 16:51			<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST							
TOTAL TIME ROADWAY CLOSED		OTHER INVESTIGATION TIME		TOTAL MINUTES		OFFICER'S NAME*			CHECKED BY OFFICER'S NAME*										
43		20		67		Davis, Robert			Sons, Jacob										
						OFFICER'S BADGE NUMBER*			CHECKED BY OFFICER'S BADGE NUMBER*										
						169			150										
												<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPs)							

IR24-001884

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (<input checked="" type="checkbox"/> SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER
1	KHADKA, NEELAM	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
3181 JAMES PL, FAIRFIELD TWP, OH 45011

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	JZE1641	3KPF34AD5ME356998	2021	Kia

<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
	ALLSTATE INSURANCE	826712533	Orange	Forte

TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME FOX TOWING	
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	VEHICLE WEIGHT GVWR/GCWR	
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	# OCCUPANTS 2	1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD

1 UNIT TYPE	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN	7 - MOTORCYCLE 8 - MOTORCYCLE 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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0 # OF TRAILING UNITS

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

1 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	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
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1 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
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1 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
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1 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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3 ACTION	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING PRE-CRASHES & STRUCK ACTIONS	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/ PASSED 5 - BOTH STRIKING PRE-CRASHES & STRUCK ACTIONS	8 - ENTERING TRAFFIC 9 - LEAVING TRAFFIC 10 - PARKED 11 - SLOWING OR STOPPED IN 12 - DRIVERLESS	13 - NEGOTIATING A LANE 14 - ENTERING OR CROSSING 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON- SPECIFIED LOCATION 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - OTHER/UNKNOWN
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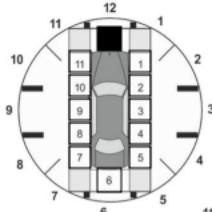
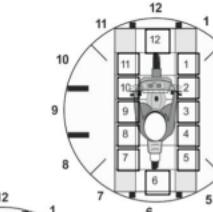
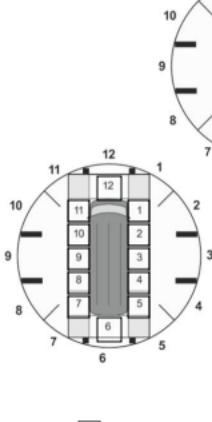
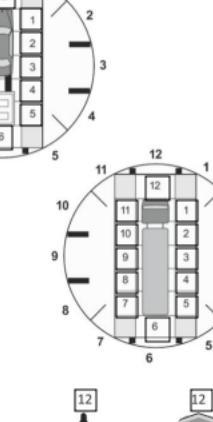
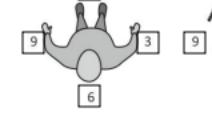
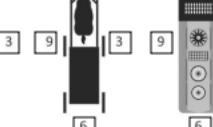
3 CONTRIBUTING CIRCUMSTANCES	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	7 - LEFT OF CENTER 8 - FOLLOWING TOO 9 - IMPROPER LANE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	13 - IMPROPER START CLOSE/ACDA POSITION CHANGE 14 - 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
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SEQUENCE OF EVENTS

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

4	25 - IMPACT ATTENUATOR/ CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN 39 - LIGHT/LUMINARIES 40 - SUPPORT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT
5	26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	41 - OTHER POST, POLE OR SUPPORT	49 - FIRE HYDRANT	99 - OTHER/UNKNOWN
6	28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	42 - CULVERT		

1 FIRST HARMFUL EVENT **1** MOST HARMFUL EVENT

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

UNIT # OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
 2 TOYOTA LEASE TRUST OWNER PHONE: INCLUDE AREA CODE SAME AS DRIVER

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
 3200 WEST RAY RD, CHANDLER, AZ 85226

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE
 OH KGU7796 4T1G11AK6RU231519 2024 Toyota

INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MODEL
 VERIFIED PROGRESSIVE INSURANCE 943948393 Silver Camry

TYPE OF USE US DOT # TOWED BY: COMPANY NAME
 COMMERCIAL GOVERNMENT IN EMERGENCY WAYNES TOWING
 RESPONSE

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

HAZARDOUS MATERIAL
 MATERIAL CLASS # PLACARD ID #
 RELEASED PLACARD

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

UNIT TYPE # OF TRAILING UNITS

1 WAS VEHICLE OPERATING IN 0 NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
 AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 4 - HIGH AUTOMATION
 2 - NO AUTOMATION 5 - FULL 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 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL
 SHARING 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING
 4 - SCHOOL TRANSPORT 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL

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

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

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

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

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

SEQUENCE OF EVENTS EVENTS

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

COLLISION WITH FIXED OBJECT - STRUCK

4 25 - IMPACT 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE
 ATTENUATOR/ 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN 44 - DITCH MAINTENANCE
 CRASH CUSHION 33 - MEDIAN CABLE POST 45 - EMBANKMENT EQUIPMENT
 5 26 - BRIDGE OVERHEAD BARRIER 39 - LIGHT/LUMINARIES 46 - FENCE 51 - WALL
 STRUCTURE 34 - MEDIAN GUARDRAIL SUPPORT 47 - MAILBOX 52 - BUILDING
 27 - BRIDGE PIER OR 35 - MEDIAN CONCRETE 48 - TREE 53 - TUNNEL
 ABUTMENT 36 - MEDIAN OTHER 49 - OTHER POST, POLE 54 - OTHER FIXED
 28 - BRIDGE PARAPET BARRIER OR SUPPORT OBJECT
 29 - BRIDGE RAIL 42 - CULVERT 99 - OTHER/UNKNOWN
 30 - GUARDRAIL FACE BARRIER

1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER*

IR24-001884

DAMAGE

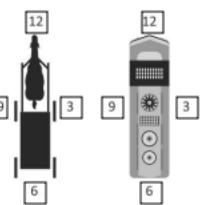
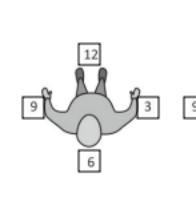
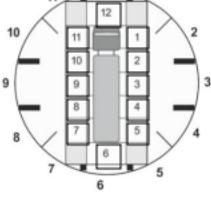
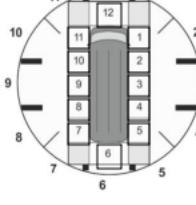
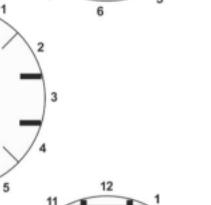
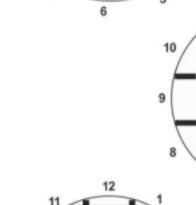
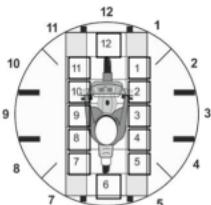
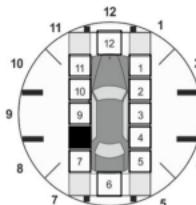
DAMAGE SCALE

4

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

8

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

TRAFFIC

TRAFFICWAY FLOW

2

TRAFFIC CONTROL

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

OF THROUGH LANES ON ROAD

4

RAIL GRADE CROSSING

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

UNIT / NON-MOTORIST DIRECTION

5

FROM 5 TO 8

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

UNIT SPEED

35

DETECTED SPEED

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

POSTED SPEED

35

IR24-001884

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (<input checked="" type="checkbox"/> SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER
3	HERRERA, BAYARDO PEREZ	
OWNER ADDRESS: STREET, CITY, STATE, ZIP (<input checked="" type="checkbox"/> SAME AS DRIVER)		
3727 KIRKUP AVE APT C, CINCINNATI, OH 45213		

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
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LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE
OH	JJA6030	4T1BF1FK8GU595703		2016	Toyota
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #		COLOR	VEHICLE MODEL
				Black	Camry
TYPE OF USE			US DOT #	TOWED BY: COMPANY NAME	
<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE				WAYNES TOWING	
INTERLOCK DEVICE EQUIPPED			# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR	HAZARDOUS MATERIAL
			2	1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.	<input type="checkbox"/> MATERIAL <input type="checkbox"/> RELEASED <input type="checkbox"/> PLACARD

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

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

1 <input type="checkbox"/> 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	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
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1 <input type="checkbox"/> 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
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1 <input type="checkbox"/> 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
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1 <input type="checkbox"/> 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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4 <input type="checkbox"/> ACTION	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING PRE-CRASHES & STRUCK ACTIONS	11 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 9 - OTHER/UNKNOWN	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/ PASSING 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 14 - ENTERING OR CROSSING 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING	13 - NEGOTIATING A CURVE 14 - ENTERING OR SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON- SPECIFIED LOCATION 21 - STANDING OUTSIDE 22 - OTHER UNKNOWN 23 - APPROACHING OR LEAVING VEHICLE 24 - OTHER UNKNOWN
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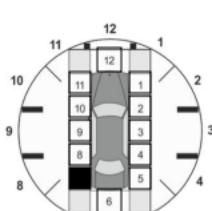
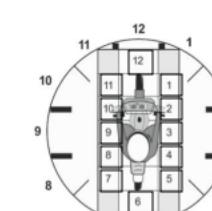
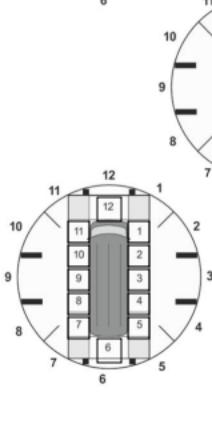
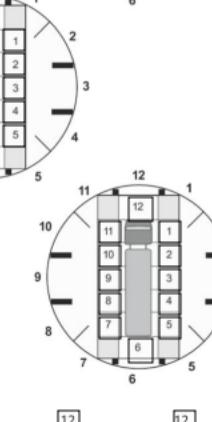
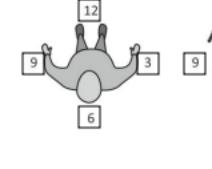
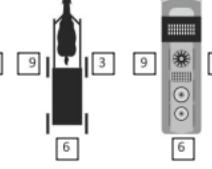
1 <input type="checkbox"/> CONTRIBUTING CIRCUMSTANCES	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	13 - IMPROPER 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 ACTION	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION
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SEQUENCE OF EVENTS

1 <input type="checkbox"/> 20	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 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL 12 - DOWNSHILL RUNAWAY 13 - OTHER NON- COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE 21 - PARKED MOTOR VEHICLE 24 - OTHER MOBILE OBJECT	22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 25 - WORK ZONE MAINTENANCE EQUIPMENT
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4 <input type="checkbox"/>	25 - IMPACT ATTENUATOR/ CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN 39 - LIGHT/LUMINARIES 40 - SUPPORT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - CULVERT	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN
5 <input type="checkbox"/>	26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	41 - OTHER POST, POLE 42 - SUPPORT 43 - CULVERT		

1 <input type="checkbox"/> FIRST HARMFUL EVENT	1 <input type="checkbox"/> MOST HARMFUL EVENT
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DAMAGE	
DAMAGE SCALE	
4 <input type="checkbox"/> 1 - NONE 2 - MINOR DAMAGE 9 - UNKNOWN	3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE
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	
7 <input type="checkbox"/> 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP	14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
TRAFFIC	
TRAFFICWAY FLOW	TRAFFIC CONTROL
2 <input type="checkbox"/> 1 - ONE-WAY 2 - TWO-WAY	2 <input type="checkbox"/> 1 - ROUNDABOUT 2 - STOP SIGN 3 - SIGNAL 4 - YIELD SIGN 5 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
6 <input type="checkbox"/> 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING	
UNIT / NON-MOTORIST DIRECTION	
FROM 6 <input type="checkbox"/> 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	TO 7 <input type="checkbox"/> 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER/UNKNOWN
UNIT SPEED	
0 <input type="checkbox"/> 1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED	1 <input type="checkbox"/> 50
DETECTED SPEED	



MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*

IR24-001884

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH				AGE	GENDER		
	1	KHADKA, NEELAM							01/01/1994				30	F		
ADDRESS: STREET, CITY, STATE, ZIP													CONTACT PHONE - INCLUDE AREA CODE			
3181 JAMES PL, FAIRFIELD TWP, OH 45011																
INJURIES 3	INJURED TAKEN BY 2	EMS AGENCY(NAME) CITY OF FAIRFIELD FIRE			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) MERCY FAIRFIELD HOSPITAL, FAIRFIELD			SAFETY EQUIPMENT USED 4	DOT-COMPLIANT MC HELMET		SEATING POSITION 1	AIR BAG USAGE 4	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER			OFFENSE CHARGED 313.01a			LOCAL CODE ■	OFFENSE DESCRIPTION Obedience to Traffic Control Devic			CITATION NUMBER 2400059402					
OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG			CONDITION 1	ALCOHOL TEST STATUS 1 TYPE 1 VALUE .	DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4					
UNIT # 2	NAME: LAST, FIRST, MIDDLE DURANTE, AMY LYNN							DATE OF BIRTH 01/26/1975				AGE 49	GENDER F			
ADDRESS: STREET, CITY, STATE, ZIP 9439 CANAL WAY, WEST CHESTER TWP, OH 45069													CONTACT PHONE - INCLUDE AREA CODE			
INJURIES 3	INJURED TAKEN BY 2	EMS AGENCY(NAME) CITY OF FAIRFIELD FIRE			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) MERCY FAIRFIELD HOSPITAL, FAIRFIELD			SAFETY EQUIPMENT USED 4	DOT-COMPLIANT MC HELMET		SEATING POSITION 1	AIR BAG USAGE 3	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER			OFFENSE CHARGED			LOCAL CODE ■	OFFENSE DESCRIPTION			CITATION NUMBER					
OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG			CONDITION 1	ALCOHOL TEST STATUS 1 TYPE 1 VALUE .	DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4					
UNIT # 3	NAME: LAST, FIRST, MIDDLE HERRERA, BAYARDO PEREZ							DATE OF BIRTH 10/11/1997				AGE 26	GENDER M			
ADDRESS: STREET, CITY, STATE, ZIP 3727 KIRKUP AVE APT C, CINCINNATI, OH 45213													CONTACT PHONE - INCLUDE AREA CODE			
INJURIES 5	INJURED TAKEN BY ■	EMS AGENCY(NAME)			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED 4	DOT-COMPLIANT MC HELMET		SEATING POSITION 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER			OFFENSE CHARGED			LOCAL CODE ■	OFFENSE DESCRIPTION			CITATION NUMBER					
OL CLASS 6	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG			CONDITION 1	ALCOHOL TEST STATUS 1 TYPE 1 VALUE .	DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4					
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 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		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 - M/C MOPED ONLY 6 - NO VALID OL		1 - ALCOHOL INTERLOCK DEVICE 2 - CDL 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		1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN		EJECTION		OL ENDORSEMENT		TRAPPED		GENDER		ALCOHOL TEST TYPE				
SAFETY EQUIPMENT		12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN		1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE		H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - 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		F - FEMALE M - MALE U - OTHER / UNKNOWN		1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER				
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										CONDITION		DRUG TEST TYPE				
										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 / 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*

IR24-001884

OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER																																																																
	1	CHHETRY, BHATTARAI PUSHPA D				03/01/1965		59	F																																																																
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP 3181 JAMES PL, FAIRFIELD TWP, OH 45011					CONTACT PHONE - INCLUDE AREA CODE																																																																			
	INJURIES 5	INJURED TAKEN BY []	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 3	AIR BAG USAGE 4	EJECTION 1	TRAPPED 1																																																															
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER																																																																
	3	HERRERA RUGAMA, ELVIN MANUEL				09/04/1993		30	M																																																																
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP 3727 KIRKUP AVE APT C, CINCINNATI, OH 45213					CONTACT PHONE - INCLUDE AREA CODE																																																																			
	INJURIES 5	INJURED TAKEN BY []	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 3	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1																																																															
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER																																																																
	ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE																																																																			
OCCUPANT	INJURIES []	INJURED TAKEN BY []	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED []	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION []	AIR BAG USAGE []	EJECTION []	TRAPPED []																																																															
	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER																																																																
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	INJURIES []	INJURED TAKEN BY []	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED []	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION []	AIR BAG USAGE []	EJECTION []	TRAPPED []																																																															
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