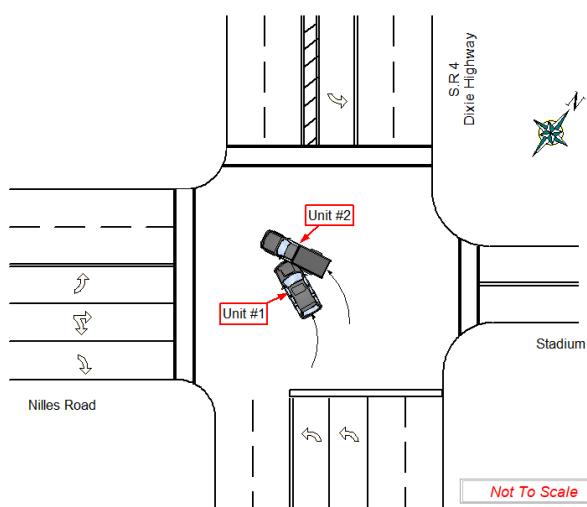


<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION				LOCAL REPORT NUMBER*		
		REPORTING AGENCY NAME* NCIC* Fairfield Police Department 00901				HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
						2 1 - SOLVED 2 - UNSOLVED	2	1 98 - ANIMAL 99 - UNKNOWN
COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP* 09 1 - CITY 2 - VILLAGE 3 - TOWNSHIP Fairfield				CRASH DATE/TIME* 05/20/2024 09:40	CRASH SEVERITY 5 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY	
REFERENCE LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME SR 4		ROAD TYPE	LATITUDE 39.339538	
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Nilles		ROAD TYPE	LONGITUDE -84.534070	
REFERENCE POINT		DIRECTION FROM REFERENCE 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	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 checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA		
DISTANCE FROM REFERENCE		DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS				NUMBER OF APPROACHES 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			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 7 1 - NOT COLLISION 2 - BETWEEN 3 - TWO MOTOR VEHICLES IN 4 - REAR-END 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME 8 - SIDESWIPE, OPPOSITE 9 - HEAD-ON 9 - OTHER/UNKNOWN		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, RAISE MEDIAN (ANY TYPE) 9 - OTHER/UNKNOWN	
WORK ZONE RELATED <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 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 2 - ADVANCE WARNING SIGN 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		CONTOUR 2	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			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		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 05/20/2024 at approximately 9:40 AM unit #1 was turning left onto westbound Nilles Rd. from northbound SR 4. Unit #2 was turning left onto westbound Nilles Rd. from northbound SR 4 in the turn lane next to unit #1. The driver of unit #1 failed to stay in their lane when turning left and collided into unit #2. The driver of unit #1 fled the scene without exchanging information.				DIAGRAM 				
CRASH REPORTED DATE/TIME 05/20/2024 09:44		DISPATCH DATE/TIME 05/20/2024 09:44		ARRIVAL DATE/TIME 05/20/2024 09:51		SCENE CLEARED DATE/TIME 05/20/2024 10:02		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST
TOTAL TIME ROADWAY CLOSED 0	OTHER INVESTIGATION TIME 0	TOTAL MINUTES 18	OFFICER'S NAME* Day, Doug		CHECKED BY OFFICER'S NAME* Cresap, Lori			<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP)
			OFFICER'S BADGE NUMBER* 76		CHECKED BY OFFICER'S BADGE NUMBER* 87			

IR24-002780

UNIT # 1	OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER)		OWNER PHONE: INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER																																		
OWNER ADDRESS: STREET, CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER)																																					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE																																			
LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR																																		
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR Grey																																		
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME																																		
INTERLOCK DEVICE EQUIPPED	HIT/SKIP UNIT <input checked="" type="checkbox"/>	# OCCUPANTS 1	VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.																																		
UNIT TYPE 3	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD																																				
0 # OF TRAILING UNITS	CLASS # PLACARD ID #																																				
<p>1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN</p> <p>7 - MOTORCYCLE 8 - MOTORCYCLE 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV/UTV)</p> <p>12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME</p> <p>18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT OR ANIMAL-WITH RIDER 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</p>																																					
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<p>1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK</p> <p>3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION</p> <p>6 - BICYCLE LANE 7 - SHOULDER/ ROADSIDE 8 - SIDEWALK</p> <p>9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS</p> <p>12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER/UNKNOWN</p>																																					
<p>1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 6 - PRE-CRASHES 7 - MAKING LEFT TURN 8 - MAKING RIGHT TURN 9 - MAKING U-TURN 10 - OTHER/UNKNOWN</p> <p>1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/ PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 7 - MAKING U-TURN</p> <p>8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS</p> <p>13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE</p> <p>18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-SPECIFIED LOCATION 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER/UNKNOWN</p>																																					
<p>1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN</p> <p>7 - LEFT OF CENTER CLOSE/ACDA 8 - FOLLOWING TOO CLOSE 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING</p> <p>13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY</p> <p>17 - VISION OBSTRUCTION FROM A PARKED POSITION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/ FALLING/SPILLING 20 - IMPROPER CROSSING</p> <p>21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION</p>																																					
<p>SEQUENCE OF EVENTS</p> <table border="1"> <thead> <tr> <th colspan="4">EVENTS</th> </tr> </thead> <tbody> <tr> <td>1 20</td> <td>1 - OVERTURN/ ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO/EQUIPMENT LOSS OR SHIFT</td> <td>6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN</td> <td>11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL 12 - DOWNTOWN RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE</td> <td>16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE 23 - STRUCK BY 24 - OTHER MOBILE OBJECT</td> </tr> <tr> <td>2</td> <td>25 - IMPACT ATTENUATOR/ CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE</td> <td>31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER</td> <td>37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN 39 - LIGHT/LUMINARIES 40 - SUPPORT 41 - OTHER POST, POLE 42 - CULVERT</td> <td>43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN</td> </tr> <tr> <td>3</td> <td>40 - OTHER POST, POLE 41 - OTHER POST, POLE 42 - CULVERT</td> <td>43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT</td> <td>50 - WORK ZONE 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN</td> </tr> <tr> <td>4</td> <td>40 - OTHER POST, POLE 41 - OTHER POST, POLE 42 - CULVERT</td> <td>43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT</td> <td>50 - WORK ZONE 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN</td> </tr> <tr> <td>5</td> <td>40 - OTHER POST, POLE 41 - OTHER POST, POLE 42 - CULVERT</td> <td>43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT</td> <td>50 - WORK ZONE 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN</td> </tr> <tr> <td>6</td> <td>40 - OTHER POST, POLE 41 - OTHER POST, POLE 42 - CULVERT</td> <td>43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT</td> <td>50 - WORK ZONE 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN</td> </tr> <tr> <td>1</td> <td>FIRST HARMFUL EVENT</td> <td>MOST HARMFUL EVENT</td> <td></td> </tr> </tbody> </table>				EVENTS				1 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 - DOWNTOWN 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 22 - WORK ZONE 23 - STRUCK BY 24 - OTHER MOBILE OBJECT	2	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 39 - LIGHT/LUMINARIES 40 - SUPPORT 41 - OTHER POST, POLE 42 - CULVERT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN	3	40 - OTHER POST, POLE 41 - OTHER POST, POLE 42 - CULVERT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	50 - WORK ZONE 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN	4	40 - OTHER POST, POLE 41 - OTHER POST, POLE 42 - CULVERT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	50 - WORK ZONE 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN	5	40 - OTHER POST, POLE 41 - OTHER POST, POLE 42 - CULVERT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	50 - WORK ZONE 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN	6	40 - OTHER POST, POLE 41 - OTHER POST, POLE 42 - CULVERT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	50 - WORK ZONE 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN	1	FIRST HARMFUL EVENT	MOST HARMFUL EVENT	
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DAMAGE	
DAMAGE SCALE	
9	1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN
DAMAGED AREA(S) INDICATE ALL THAT APPLY	
<img alt="Diagram of a vehicle showing 12 numbered points of impact. Points 1-12 are arranged in a circle around the vehicle, with 12 at the front, 1 at the top, 11 at the back, and 1	

IR24-002780

UNIT # 2	OWNER NAME: LAST, FIRST, MIDDLE (<input checked="" type="checkbox"/> SAME AS DRIVER) BARHAM, LEONARD G	OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER
-------------	--	---

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
5400 CAMELOT DR APT A, FAIRFIELD, OH 45014

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

LP STATE OH	LICENSE PLATE # KCQ4902	VEHICLE IDENTIFICATION # 1N6AA1E57JN546727	VEHICLE YEAR 2018	VEHICLE MAKE Nissan
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INSURANCE VERIFIED	INSURANCE COMPANY PROGRESSIVE INSURANCE	INSURANCE POLICY # 974322115	COLOR Grey	VEHICLE MODEL Titan
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TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
INTERLOCK DEVICE EQUIPPED		# OCCUPANTS 1	VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.	
			HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL <input type="checkbox"/> RELEASED <input type="checkbox"/> PLACARD CLASS # <input type="checkbox"/> PLACARD ID #	

UNIT TYPE 4	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	# 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	AUTONOMOUS MODE LEVEL			

1	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 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER ISLAND AT INCIDENT SCENE 99 - OTHER/UNKNOWN
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4	ACTION	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH 6 - STRIKING PRE-CRASHES 7 - STRIKING & STRUCK ACTIONS 9 - OTHER/UNKNOWN	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/ PASSING 6 - MAKING LEFT TURN 7 - MAKING U-TURN	8 - ENTERING TRAFFIC 9 - LEAVING TRAFFIC 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 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- MOTORIST SPECIFIED LOCATION 21 - OUTSTANDING SIDE DISABLED VEHICLE 22 - APPROACHING OR LEAVING VEHICLE 23 - STANDING 24 - OTHER UNKNOWN
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1	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 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 EQUIPMENT 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION 24 - OTHER IMPROPER ACTION
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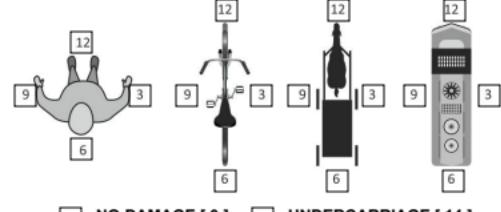
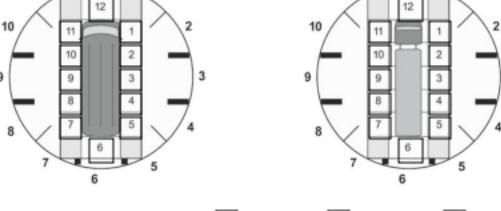
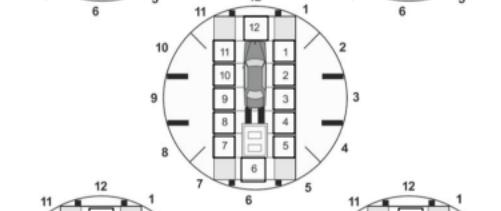
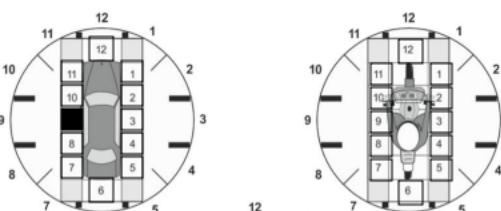
SEQUENCE OF EVENTS

1	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 RIGHT 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 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
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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 41 - MEDIAN CONCRETE 42 - MEDIAN OTHER 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	
5	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	40 - Utility Pole 41 - Other Post, Pole Or Support 42 - Culvert	
6	1	FIRST HARMFUL EVENT	1	MOST HARMFUL EVENT

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

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		
9	0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP	14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN

TRAFFIC	
TRAFFICWAY FLOW 2	TRAFFIC CONTROL 2
1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL

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

UNIT / NON-MOTORIST DIRECTION		
FROM 2	TO 4	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 8 - SOUTHWEST 9 - OTHER/UNKNOWN

UNIT SPEED 15	DETECTED SPEED 1
2 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED	POSTED SPEED 35



MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*

IR24-002780

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH			AGE	GENDER											
	1	PERSON, UNKNOWN										U											
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	99	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED									
OL STATE		OPERATOR LICENSE NUMBER		OFFENSE CHARGED			LOCAL CODE		OFFENSE DESCRIPTION			CITATION NUMBER											
OL CLASS		ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	9	ALCOHOL / DRUG SUSPECTED		CONDITION	9	ALCOHOL TEST			DRUG TEST(S)									
							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA			STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4							
							<input type="checkbox"/> OTHER DRUG			1	1	.	1	1									
UNIT # NAME: LAST, FIRST, MIDDLE													DATE OF BIRTH			AGE	GENDER						
2 BARHAM, LEONARD G													06/23/1956			67	M						
ADDRESS: STREET, CITY, STATE, ZIP													CONTACT PHONE - INCLUDE AREA CODE										
5400 CAMELOT DR APT A, FAIRFIELD, OH 45014																							
INJURIES		INJURED TAKEN BY	EMS AGENCY(NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED	4	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED									
OL STATE		OPERATOR LICENSE NUMBER		OFFENSE CHARGED			LOCAL CODE		OFFENSE DESCRIPTION			CITATION NUMBER											
OL CLASS		ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	1	ALCOHOL / DRUG SUSPECTED		CONDITION	1	ALCOHOL TEST			DRUG TEST(S)									
							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA			STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4							
							<input type="checkbox"/> OTHER DRUG			1	1	.	1	1									
UNIT # NAME: LAST, FIRST, MIDDLE													DATE OF BIRTH			AGE	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		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED									
OL STATE		OPERATOR LICENSE NUMBER		OFFENSE CHARGED			LOCAL CODE		OFFENSE DESCRIPTION			CITATION NUMBER											
OL CLASS		ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	1	ALCOHOL / DRUG SUSPECTED		CONDITION		ALCOHOL TEST			DRUG TEST(S)									
							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA			STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4							
							<input type="checkbox"/> OTHER DRUG			1	1	.	1	1									
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	2 - TEST REFUSED														
3 - SUSPECTED MINOR INJURY		3 - FRONT - RIGHT SIDE		3 - DEPLOYED SIDE		3 - CLASS C	3 - CORRECTIVE LENSES	3 - TEST GIVEN, CONTAMINATED	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 - TEST GIVEN, RESULTS KNOWN	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 - TEST GIVEN, RESULTS UNKNOWN	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		ALCOHOL TEST TYPE														
1 - NOT TRANSPORTED / TREATED AT SCENE		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		8 - THIRD - MIDDLE			7 - EXCEPT TRACTOR-TRAILER	7 - TALKING ON HAND-HELD COMMUNICATION DEVICE	1 - NONE														
2 - EMS		9 - THIRD - RIGHT		10 - SLEEPER SECTION OF TRUCK CAB			8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - TALKING ON HAND-HELD COMMUNICATION DEVICE	2 - TEST REFUSED														
3 - POLICE		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		12 - PASSENGER IN UNENCLOSED CARGO AREA			9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE														
9 - OTHER / UNKNOWN		13 - TRAILING UNIT		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			10 - LIMITED TO DAYLIGHT ONLY	6 - PASSENGER	4 - TEST GIVEN, RESULTS KNOWN														
SAFETY EQUIPMENT		15 - NON-MOTORIST		16 - OUTSIDE MIRROR			11 - LIMITED TO EMPLOYMENT	7 - OTHER DISTRACTION INSIDE THE VEHICLE	5 - TEST GIVEN, RESULTS UNKNOWN														
1 - NONE USED		99 - OTHER / UNKNOWN		17 - PROSTHETIC AID			12 - LIMITED - OTHER	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	ALCOHOL TEST TYPE														
2 - SHOULDER BELT ONLY USED				18 - OTHER			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	9 - OTHER / UNKNOWN	1 - NONE														
3 - LAP BELT ONLY USED							14 - MILITARY VEHICLES ONLY		2 - BLOOD														
4 - SHOULDER & LAP BELT USED							15 - MOTOR VEHICLES WITHOUT AIR BRAKES		3 - URINE														
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING							16 - OUTSIDE MIRROR		4 - BREATH														
6 - CHILD RESTRAINT SYSTEM - REAR FACING							17 - PROSTHETIC AID		5 - OTHER														
7 - BOOSTER SEAT							18 - OTHER		DRUG TEST TYPE														
8 - HELMET USED									1 - NONE														
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)									2 - BLOOD														
10 - REFLECTIVE CLOTHING									3 - URINE														
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY									4 - OTHER														
99 - OTHER / UNKNOWN									DRUG TEST RESULT(S)														
									1 - AMPHETAMINES														
									2 - BARBITURATES														
									3 - BENZODIAZEPINES														
									4 - CANNABINOID														
									5 - COCAINE														
									6 - OPIATES / OPIOIDS														
									7 - OTHER														
									8 - NEGATIVE RESULTS														