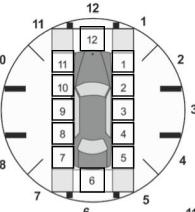
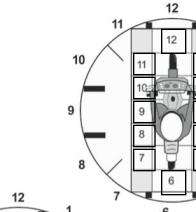
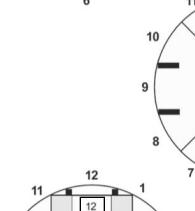
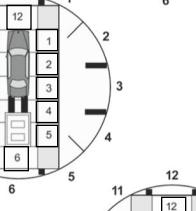
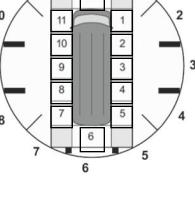
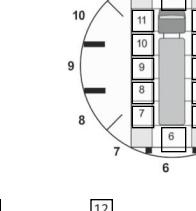
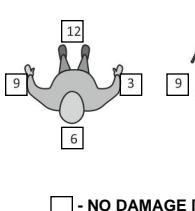
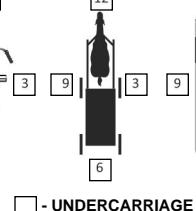


<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION				LOCAL REPORT NUMBER*			
		REPORTING AGENCY NAME* NCIC*				IR24-002934			
		Fairfield Police Department 00901				HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR	
COUNTY* 09		LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP	LOCATION: CITY, VILLAGE, TOWNSHIP* Fairfield				1 - SOLVED 2 - UNSOLVED	1	1 98 - ANIMAL 99 - UNKNOWN
REFERENCE LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME Boehm		ROAD TYPE	CRASH DATE/TIME* 05/28/2024 01:53		CRASH SEVERITY 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	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 5304		ROAD TYPE	LATITUDE 39.330875		LONGITUDE -84.528519
REFERENCE POINT 3 - 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 <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA			NUMBER OF APPROACHES ROADWAY <input type="checkbox"/> ROADWAY DIVIDED	
DISTANCE FROM REFERENCE 1 - MILES 2 - FEET 3 - YARDS		DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS							
LOCATION OF FIRST HARMFUL EVENT 4 - 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 1 - NOT COLLISION 2 - BETWEEN 3 - TWO MOTOR VEHICLES IN TRANSPORT 4 - REAR-END 5 - 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 - 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		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 AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	CONTOUR 1	CONDITIONS 1	SURFACE 2			
LIGHT CONDITION 3 - 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 05-28-24, at 1:53 a.m. Unit 1 was backing south on Boehm Dr when the driver went off the left side of the road and struck a mailbox. The driver of Unit 1 then left the area without leaving identifying information or notifying law enforcement. The mailbox is owned by the US Post Office 700 Wessel Dr Fairfield, OH 45014					DIAGRAM				
					<p style="text-align: center;">Not To Scale</p>				
CRASH REPORTED DATE/TIME 05/28/2024 08:56		DISPATCH DATE/TIME 05/28/2024 08:56		ARRIVAL DATE/TIME 05/28/2024 09:07		SCENE CLEARED DATE/TIME 05/28/2024 09:56		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	
TOTAL TIME ROADWAY CLOSED 0	OTHER INVESTIGATION TIME 0	TOTAL MINUTES 60	OFFICER'S NAME* Setterstrom, Daniel		CHECKED BY OFFICER'S NAME* Setterstrom, Daniel			<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP)	
			OFFICER'S BADGE NUMBER* 121		CHECKED BY OFFICER'S BADGE NUMBER* 121				

IR24-002934

OWNER	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	VEHICLE MAKE
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #		COLOR White	VEHICLE MODEL
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 <input type="checkbox"/> HIT/SKIP UNIT # OCCUPANTS 1		VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED CLASS # <input type="checkbox"/> PLACARD ID # <input type="checkbox"/> PLACARD		
UNIT TYPE  3 0	1 - PASSENGER CAR 7 - MOTORCYCLE 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN/ SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 15 - SEMI-TRACTOR 20 - OTHER VEHICLE 25 - OTHER NON- 4 - PICK UP 10 - MOPED OR 16 - FARM EQUIPMENT 21 - HEAVY EQUIPMENT 26 - BICYCLE 5 - CARGO VAN MOTORIZED BICYCLE 17 - MOTORHOME 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN 27 - TRAIN 11 - ALL TERRAIN VEHICLE (ATV/UTV) 18 - LIMO (LIVERY VEHICLE) 99 - UNKNOWN OR # OF TRAILING UNITS HIT/SKIP				
	1 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN 2 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION				
SPECIAL FUNCTION  1 5	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 5 - BUS - TRANSIT /COMMUTER				
	1 - NO CARGO BODY 3 - VEHICLE TOWING 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER TYPE / NOT APPLICABLE ANOTHER MOTOR VEHICLE 6 - CARGO VAN/ ENCLOSED BOX 9 - CARGO TANK 13 - AUTO TRANSPORTER 2 - BUS 4 - LOGGING 7 - GRAIN/CHIPS/GRAVEL 10 - FLAT BED 14 - GARBAGE/REFUSE 11 - DUMP 99 - OTHER/UNKNOWN				
CARGO BODY TYPE  1 VEHICLE DEFECTS	1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER/UNKNOWN 2 - HEAD LAMPS 5 - STEERING 6 - TIRE BLOWOUT 10 - DISABLED FROM PRIOR ACCIDENT 3 - TAIL LAMPS 8 - TRAILER EQUIPMENT DEFECTIVE				
	1 - INTERSECTION - 3 - INTERSECTION - 6 - BICYCLE LANE 9 - MEDIAN/CROSSING 12 - FIRST RESPONDER MARKED CROSSWALK OTHER 7 - SHOULDER/ ISLAND AT INCIDENT SCENE 2 - INTERSECTION - 4 - MIDBLOCK - 8 - SIDEWALK 10 - DRIVEWAY ACCESS 99 - OTHER/UNKNOWN UNMARKED CROSSWALK 5 - TRAVEL LANE - 11 - SHARED USE PATHS OR TRAILS				
NON-MOTORIST LOCATION AT IMPACT  1 ACTION	1 - NON-CONTACT 1 - STRAIGHT AHEAD 8 - ENTERING TRAFFIC 13 - NEGOTIATING A CURVE 18 - APPROACHING OR 2 - NON-COLLISION 2 - BACKING 9 - LEAVING TRAFFIC 14 - ENTERING OR CROSSING 19 - STANDING 3 - STRIKING 3 - CHANGING LANES 10 - PARKED 15 - WALKING, RUNNING, 20 - OTHER NON- 4 - STRUCK 4 - OVERTAKING/ 11 - SLOWING OR STOPPED IN SPECIFIED LOCATION MOTORIST 5 - BOTH STRIKING PRE-CRASHES 6 - MAKING LEFT TURN 12 - DRIVERLESS 16 - WORKING 21 - STANDING OUTSIDE & STRUCK ACTIONS 7 - MAKING U-TURN 13 - IMPROPER START FROM A PARKED 17 - PUSHING VEHICLE 9 - OTHER/UNKNOWN 14 - STOPPED OR POSITION DEFECTIVE 18 - OPERATING EQUIPMENT 15 - SWERVING TO PARKED ILLEGALLY 15 - SWERVING TO 19 - LOAD SHIFTING/ 22 - NOT DISCERNIBLE 6 - IMPROPER TURN 10 - IMPROPER PASSING AVOID FALLING/SPILLING 23 - OPENING DOOR 11 - DROVE OFF ROAD 11 - WRONG WAY 16 - IMPROPER CROSSING 24 - OTHER IMPROPER ACTION 12 - IMPROPER BACKING				
	1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED 17 - VISION OBSTRUCTION 21 - LYING IN 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE/ACDA POSITION 18 - OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 14 - STOPPED OR PARKED ILLEGALLY 19 - LOAD SHIFTING/ 23 - OPENING DOOR 4 - RAN STOP SIGN 10 - IMPROPER PASSING 15 - SWERVING TO FALLING/SPILLING 24 - OTHER IMPROPER 5 - UNSAFE SPEED 11 - DROVE OFF ROAD 16 - IMPROPER CROSSING ACTION				
CONTRIBUTING CIRCUMSTANCES  12 EVENT(S)	SEQUENCE OF EVENTS				
	EVENTS				
1 9	1 - OVERTURN/ ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE OPPOSITE	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT
2 47	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	17 - ANIMAL - FARM TRAVEL	18 - ANIMAL - DEER	19 - ANIMAL - OTHER
3 47	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	12 - DOWNTOWN RUNAWAY	20 - MOTOR VEHICLE IN TRANSPORT	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
4 25	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	13 - OTHER NON-COLLISION	21 - PARKED MOTOR VEHICLE	24 - OTHER MOBILE OBJECT
5 47	5 - CARGO/EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN	15 - PEDALCYCLE	
6 25	26 - BRIDGE OVERHEAD STRUCTURE	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT
7 25	27 - BRIDGE PIER OR ABUTMENT	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN	44 - DITCH	51 - WALL
8 25	28 - BRIDGE PARAPET	33 - MEDIAN CABLE BARRIER	39 - LIGHT/LUMINARIES SUPPORT	45 - EMBANKMENT	52 - BUILDING
9 25	29 - BRIDGE RAIL	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE	46 - FENCE	53 - TUNNEL
10 25	30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX	54 - OTHER FIXED OBJECT
11 25	12 - FIRST HARMFUL EVENT	36 - MEDIAN OTHER BARRIER	42 - CULVERT	48 - TREE	99 - OTHER/UNKNOWN
12 25	13 - MOST HARMFUL EVENT			49 - FIRE HYDRANT	
COLLISION WITH FIXED OBJECT - STRUCK					
1 5	25 - IMPACT ATTENUATOR/ CRASH CUSHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT
2 5	26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN	44 - DITCH	51 - WALL
3 5	27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	39 - LIGHT/LUMINARIES SUPPORT	45 - EMBANKMENT	52 - BUILDING
4 5	28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE	46 - FENCE	53 - TUNNEL
5 5	29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX	54 - OTHER FIXED OBJECT
6 5	30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	48 - TREE	99 - OTHER/UNKNOWN
7 5	12 - FIRST HARMFUL EVENT	37 - TRAFFIC SIGN POST	43 - CURB	49 - FIRE HYDRANT	
8 5	13 - MOST HARMFUL EVENT			50 - WORK ZONE MAINTENANCE EQUIPMENT	
DAMAGE					
DAMAGE SCALE					
2	1 - NONE	3 - FUNCTIONAL DAMAGE			
	2 - MINOR DAMAGE	4 - DISABLING DAMAGE			
	9 - UNKNOWN				
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 checked="" type="checkbox"/> - UNIT NOT AT SCENE [ 16 ]					
INITIAL POINT OF CONTACT					
7	0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 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			
2	# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
1 2	UNIT / NON-MOTORIST DIRECTION FROM 1 TO 2	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER/UNKNOWN			
5	UNIT SPEED 5	DETECTED SPEED 1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED			
25	POSTED SPEED 25				



## MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER\*

IR24-002934

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	ALCOHOL TEST	DRUG TEST(S)					
							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA		1	1	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4		
							<input type="checkbox"/> OTHER DRUG										
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		ALCOHOL / DRUG SUSPECTED			CONDITION	ALCOHOL TEST	DRUG TEST(S)					
							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA		1	1	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4		
							<input type="checkbox"/> OTHER DRUG										
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		ALCOHOL / DRUG SUSPECTED			CONDITION	ALCOHOL TEST	DRUG TEST(S)					
							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA		1	1	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4		
							<input type="checkbox"/> OTHER DRUG										
INJURIES SEATING POSITION AIR BAG OL CLASS OL RESTRICTION(S) DRIVER DISTRACTION TEST STATUS																	
1 - FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		1 - NOT DEPLOYED		1 - CLASS A		1 - ALCOHOL INTERLOCK DEVICE		1 - NOT DISTRACTED		1 - NONE GIVEN					
2 - SUSPECTED SERIOUS INJURY		2 - FRONT - MIDDLE		2 - DEPLOYED FRONT		2 - CLASS B		2 - CDL INTRASTATE ONLY		2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		2 - TEST REFUSED					
3 - SUSPECTED MINOR INJURY		3 - FRONT - RIGHT SIDE		3 - DEPLOYED SIDE		3 - CLASS C		3 - CORRECTIVE LENSES		3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		3 - TEST GIVEN, RESULTS KNOWN					
4 - POSSIBLE INJURY		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		4 - DEPLOYED BOTH FRONT / SIDE		4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		4 - EXCEPT CLASS A BUS		4 - TEST GIVEN, RESULTS UNKNOWN					
5 - NO APPARENT INJURY		5 - SECOND - MIDDLE		5 - NOT APPLICABLE		5 - M/C MOPED ONLY		5 - EXCEPT CLASS A & CLASS B BUS		5 - EXCEPT TRACTOR-TRAILER		5 - TEST GIVEN, RESULTS UNKNOWN					
INJURED TAKEN BY		6 - SECOND - RIGHT SIDE		6 - DEPLOYMENT UNKNOWN		6 - NO VALID OL		6 - EXCEPT		6 - INTERMEDIATE LICENSE RESTRICTIONS		6 - TEST GIVEN, RESULTS UNKNOWN					
1 - NOT TRANSPORTED / TREATED AT SCENE		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		7 - NOT DEPLOYED		7 - CLASS A		7 - LEARNER'S PERMIT RESTRICTIONS		7 - TALKING ON HAND-HELD COMMUNICATION DEVICE		7 - TEST GIVEN, RESULTS UNKNOWN					
2 - EMS		8 - THIRD - MIDDLE		8 - PARTIALLY DEPLOYED		8 - CLASS B		8 - LIMITED TO DAYLIGHT ONLY		8 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		8 - TEST GIVEN, RESULTS UNKNOWN					
3 - POLICE		9 - THIRD - RIGHT		9 - NOT APPLICABLE		9 - CLASS C		9 - LIMITED TO EMPLOYMENT		9 - PASSENGER		9 - TEST GIVEN, RESULTS UNKNOWN					
9 - OTHER / UNKNOWN		10 - SLEEPER SECTION OF TRUCK CAB		10 - NOT DEPLOYED		10 - REGULAR CLASS (OHIO = D)		10 - LIMITED - OTHER		10 - OTHER DISTRACTION INSIDE THE VEHICLE		10 - TEST GIVEN, RESULTS UNKNOWN					
SAFETY EQUIPMENT		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11 - NOT DEPLOYED		11 - M/C MOPED ONLY		11 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		11 - OTHER DISTRACTION OUTSIDE THE VEHICLE		11 - TEST GIVEN, RESULTS UNKNOWN					
1 - NONE USED		12 - PASSENGER IN UNENCLOSED CARGO AREA		12 - PARTIALLY DEPLOYED		12 - MILITARY VEHICLES ONLY		12 - OTHER / UNKNOWN		12 - OTHER / UNKNOWN		12 - TEST GIVEN, RESULTS UNKNOWN					
2 - SHOULDER BELT ONLY USED		13 - TRAILING UNIT		13 - NOT APPLICABLE		13 - MOTOR VEHICLES WITHOUT AIR BRAKES		13 - APPARENTLY NORMAL		13 - PHYSICAL IMPAIRMENT		13 - TEST GIVEN, RESULTS UNKNOWN					
3 - LAP BELT ONLY USED		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14 - EXTRICATED BY MECHANICAL MEANS		14 - OUTSIDE MIRROR		14 - APPARENTLY NORMAL		14 - PHYSICAL IMPAIRMENT		14 - TEST GIVEN, RESULTS UNKNOWN					
4 - SHOULDER & LAP BELT USED		15 - NON-MOTORIST		15 - FREED BY NON-MECHANICAL MEANS		15 - PROSTHETIC AID		15 - APPARENTLY NORMAL		15 - APPARENTLY NORMAL		15 - TEST GIVEN, RESULTS UNKNOWN					
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING		99 - OTHER / UNKNOWN		16 - OTHER / UNKNOWN		16 - OTHER / UNKNOWN		16 - APPARENTLY NORMAL		16 - APPARENTLY NORMAL		16 - TEST GIVEN, RESULTS UNKNOWN					
6 - CHILD RESTRAINT SYSTEM - REAR FACING		17 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)		17 - OTHER / UNKNOWN		17 - OTHER / UNKNOWN		17 - APPARENTLY NORMAL		17 - APPARENTLY NORMAL		17 - TEST GIVEN, RESULTS UNKNOWN					
7 - BOOSTER SEAT		18 - HELMET USED		18 - OTHER / UNKNOWN		18 - OTHER / UNKNOWN		18 - APPARENTLY NORMAL		18 - APPARENTLY NORMAL		18 - TEST GIVEN, RESULTS UNKNOWN					
8 - HELMET USED		19 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)		19 - OTHER / UNKNOWN		19 - OTHER / UNKNOWN		19 - APPARENTLY NORMAL		19 - APPARENTLY NORMAL		19 - TEST GIVEN, RESULTS UNKNOWN					
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)		20 - REFLECTIVE CLOTHING		20 - OTHER / UNKNOWN		20 - OTHER / UNKNOWN		20 - APPARENTLY NORMAL		20 - APPARENTLY NORMAL		20 - TEST GIVEN, RESULTS UNKNOWN					
10 - REFLECTIVE CLOTHING		21 - LIGHTING - PEDESTRIAN / BICYCLE ONLY		21 - OTHER / UNKNOWN		21 - OTHER / UNKNOWN		21 - APPARENTLY NORMAL		21 - APPARENTLY NORMAL		21 - TEST GIVEN, RESULTS UNKNOWN					
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY		22 - OTHER / UNKNOWN		22 - OTHER / UNKNOWN		22 - OTHER / UNKNOWN		22 - APPARENTLY NORMAL		22 - APPARENTLY NORMAL		22 - TEST GIVEN, RESULTS UNKNOWN					
99 - OTHER / UNKNOWN		23 - OTHER / UNKNOWN		23 - OTHER / UNKNOWN		23 - OTHER / UNKNOWN		23 - APPARENTLY NORMAL		23 - APPARENTLY NORMAL		23 - TEST GIVEN, RESULTS UNKNOWN					
INJURIES SEATING POSITION AIR BAG OL CLASS OL RESTRICTION(S) DRIVER DISTRACTION TEST STATUS													ALCOHOL TEST TYPE				
													1 - NONE				
													2 - BLOOD				
													3 - URINE				
													4 - BREATH				
													5 - OTHER				
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													1 - NONE				
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													1 - AMPHETAMINES				
													2 - BARBITURATES				
													3 - BENZODIAZEPINES				
													4 - CANNABINOID				
													5 - COCAINE				
													6 - OPIATES / OPIOIDS				
													7 - OTHER				
													8 - NEGATIVE RESULTS				

IR24-002934

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