

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input checked="" type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION REPORTING AGENCY NAME* NCIC* Fairfield Police Department 00901				LOCAL REPORT NUMBER* IR24-004580								
COUNTY* 09 LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP* Fairfield				CRASH DATE/TIME* 08/23/2024 22:07								
REFERENCE LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME Mack Rd.	ROAD TYPE RD	LATITUDE 39.313121	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 #) 3445	ROAD TYPE	LONGITUDE -84.506212								
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY	INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA									
	DISTANCE FROM REFERENCE 1 - MILES 2 - FEET 3 - YARDS				NUMBER OF APPROACHES <input type="checkbox"/> ROADWAY DIVIDED									
6	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			MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION 2 - BETWEEN 3 - TWO MOTOR VEHICLES IN TRANSPORT 4 - REAR-END 5 - HEAD-ON			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"/> 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 2		CONDITIONS 1		SURFACE 1
4	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			CONTOUR 1 - STRAIGHT LEVEL 2 - STRAIGHT Grade 3 - CURVE Level 4 - CURVE Grade 9 - OTHER/ UNKNOWN		CONDITIONS 1			SURFACE 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN		
	NARRATIVE On 08/23/2024 at 2207hrs. Unit 1 was traveling east on Mack Rd near 3445 Mack Rd. and failed to control their vehicle due to an unknown object jumping into the road. Unit 1 swerved right to avoid striking unknown object and in so doing went off the roadway and struck a Duke utility pole (B7705). The driver of Unit 1 was cited for DUS.			DIAGRAM 										
CRASH REPORTED DATE/TIME 08/23/2024 22:07		DISPATCH DATE/TIME 08/23/2024 22:07		ARRIVAL DATE/TIME 08/23/2024 22:13		SCENE CLEARED DATE/TIME 08/23/2024 22:43		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST						
TOTAL TIME ROADWAY CLOSED 20		OTHER INVESTIGATION TIME 0		TOTAL MINUTES 36		OFFICER'S NAME* King, Trey		CHECKED BY OFFICER'S NAME* Miller, Matthew		SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP)				
OFFICER'S BADGE NUMBER* 161		CHECKED BY OFFICER'S BADGE NUMBER* 141												

IR24-004580

UNIT # 1	OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER) BRYANT, CRAIG THOMAS		OWNER PHONE: INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER	
OWNER ADDRESS: STREET, CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER) 339 S 11TH ST, HAMILTON, OH 45011				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
LP STATE OH	LICENSE PLATE # JWJ5035	VEHICLE IDENTIFICATION # JTHBF30G125006366	VEHICLE YEAR 2002	VEHICLE MAKE Lexus
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR Tan	VEHICLE MODEL es300
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME FOX TOWING	
INTERLOCK DEVICE EQUIPPED		# OCCUPANTS 3	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
UNIT TYPE 1	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
0	# OF TRAILING UNITS			
2	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION
1	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT /COMMUTER			
1	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE			
1	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT			
1	16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL			
1	21 - MAIL CARRIER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP			
1	23 - PEDESTRIAN/ SKATER			
1	28 - CONCRETE MIXER 29 - AUTO TRANSPORTER 30 - FLAT BED 31 - DUMP 32 - GARBAGE/REFUSE 33 - OTHER/UNKNOWN			
1	34 - POLE 35 - CARGO TANK 36 - ENCLOSED BOX 37 - GRAIN/CHIPS/GRAVEL			
1	38 - TURN SIGNALS 39 - HEAD LAMPS 40 - TAIL LAMPS			
1	41 - BRAKES 42 - STEERING 43 - LOGGING 44 - TIRE BLOWOUT			
1	45 - WORN OR SLICK TIRES 46 - TRAILER EQUIPMENT 47 - DEFECTIVE			
1	48 - MOTOR TROUBLE 49 - DISABLED FROM PRIOR ACCIDENT			
1	50 - OTHER/UNKNOWN			
1	51 - INTERSECTION - MARKED CROSSWALK 52 - INTERSECTION - UNMARKED CROSSWALK			
1	53 - INTERSECTION - OTHER 54 - MIDBLOCK - MARKED CROSSWALK 55 - TRAVEL LANE - OTHER LOCATION			
1	56 - BICYCLE LANE 57 - SHOULDER/ ROADSIDE 58 - SIDEWALK			
1	59 - MEDIAN/CROSSING ISLAND 60 - DRIVEWAY ACCESS 61 - SHARED USE PATHS OR TRAILS			
1	62 - FIRST RESPONDER AT INCIDENT SCENE 63 - OTHER/UNKNOWN			
3	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH 6 - STRIKING PRE-CRASHES 7 - STRIKING & STRUCK ACTIONS 8 - MAKING RIGHT TURN 9 - MAKING LEFT TURN 10 - OTHER/UNKNOWN 11 - MAKING U-TURN 12 - MAKING U-TURN			
3	13 - STRAIGHT AHEAD 14 - BACKING 15 - CHANGING LANES 16 - OVERTAKING/ PASSING 17 - MAKING RIGHT TURN 18 - MAKING LEFT TURN 19 - OTHER/UNKNOWN 20 - OTHER/UNKNOWN			
3	21 - ENTERING TRAFFIC 22 - LEAVING TRAFFIC 23 - LEAVING TRAFFIC 24 - SLOWING OR STOPPED IN TRAFFIC 25 - DRIVERLESS			
3	26 - NEGOTIATING A CURVE 27 - ENTERING OR CROSSING 28 - SPECIFIED LOCATION 29 - WALKING, RUNNING, JOGGING, PLAYING 30 - WORKING 31 - PUSHING VEHICLE			
3	32 - APPROACHING OR LEAVING VEHICLE 33 - STANDING 34 - OTHER NON- MOTORIST 35 - STANDING OUTSIDE DISABLED VEHICLE 36 - OTHER/UNKNOWN			
99	37 - APPROXIMATELY 38 - APPROXIMATELY 39 - APPROXIMATELY 40 - APPROXIMATELY 41 - APPROXIMATELY 42 - APPROXIMATELY 43 - APPROXIMATELY 44 - APPROXIMATELY 45 - APPROXIMATELY 46 - APPROXIMATELY 47 - APPROXIMATELY 48 - APPROXIMATELY 49 - APPROXIMATELY 50 - APPROXIMATELY 51 - APPROXIMATELY 52 - APPROXIMATELY 53 - APPROXIMATELY 54 - APPROXIMATELY 55 - APPROXIMATELY 56 - APPROXIMATELY 57 - APPROXIMATELY 58 - APPROXIMATELY 59 - APPROXIMATELY 60 - APPROXIMATELY 61 - APPROXIMATELY 62 - APPROXIMATELY 63 - APPROXIMATELY 64 - APPROXIMATELY 65 - APPROXIMATELY 66 - APPROXIMATELY 67 - APPROXIMATELY 68 - APPROXIMATELY 69 - APPROXIMATELY 70 - APPROXIMATELY 71 - APPROXIMATELY 72 - APPROXIMATELY 73 - APPROXIMATELY 74 - APPROXIMATELY 75 - APPROXIMATELY 76 - APPROXIMATELY 77 - APPROXIMATELY 78 - APPROXIMATELY 79 - APPROXIMATELY 80 - APPROXIMATELY 81 - APPROXIMATELY 82 - APPROXIMATELY 83 - APPROXIMATELY 84 - APPROXIMATELY 85 - APPROXIMATELY 86 - APPROXIMATELY 87 - APPROXIMATELY 88 - APPROXIMATELY 89 - APPROXIMATELY 90 - APPROXIMATELY 91 - APPROXIMATELY 92 - APPROXIMATELY 93 - APPROXIMATELY 94 - APPROXIMATELY 95 - APPROXIMATELY 96 - APPROXIMATELY 97 - APPROXIMATELY 98 - APPROXIMATELY 99 - APPROXIMATELY			
99	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN			
99	7 - LEFT OF CENTER CLOSE/ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING			
99	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY			
99	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/ FALLING/SPILLING 20 - IMPROPER ACTION			
1	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 24 - OTHER IMPROPER ACTION			
1	25 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
2	26 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
3	27 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER/UNKNOWN			
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MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*

IR24-004580

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH				AGE	GENDER	
	1	BRYANT, CHRISTOPHER JAMES							02/10/1981				43	M	
ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE					
760 GORDON SMITH BLVD APT 8, HAMILTON, OH 45013															
INJURIES 3	INJURED TAKEN BY 1	EMS AGENCY(NAME) CITY OF FAIRFIELD		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED 1	DOT-COMPLIANT MC HELMET		SEATING POSITION 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE OH	OPERATOR LICENSE NUMBER			OFFENSE CHARGED 331.34a		LOCAL CODE ■	OFFENSE DESCRIPTION Failure to Control			CITATION NUMBER 2400176302					
OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY 9	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 .	STATUS 1	TYPE 1	RESULT SELECT UP TO 4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
UNIT #	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH				AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE					
INJURIES 1	INJURED TAKEN BY 1	EMS AGENCY(NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED 1	DOT-COMPLIANT MC HELMET		SEATING POSITION 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE 1	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE ■	OFFENSE DESCRIPTION			CITATION NUMBER					
OL CLASS 1	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 .	STATUS 1	TYPE 1	RESULT SELECT UP TO 4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
UNIT #	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH				AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE					
INJURIES 1	INJURED TAKEN BY 1	EMS AGENCY(NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED 1	DOT-COMPLIANT MC HELMET		SEATING POSITION 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
OL STATE 1	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE ■	OFFENSE DESCRIPTION			CITATION NUMBER					
OL CLASS 1	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 .	STATUS 1	TYPE 1	RESULT SELECT UP TO 4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
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		EJECTION		OL ENDORSEMENT	ALCOHOL TEST TYPE										
1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - 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 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 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER									
SAFETY EQUIPMENT		TRAPPED		GENDER	DRUG TEST TYPE										
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		1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS		F - FEMALE M - MALE U - OTHER / UNKNOWN	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 - NONE 2 - BLOOD 3 - URINE 4 - OTHER									
INJURIES		SEATING POSITION		AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS	ALCOHOL TEST TYPE	DRUG TEST TYPE	DRUG TEST RESULT(S)				
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OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER*

IR24-004580

OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER																																																																									
	1	BRYANT, BRAYLON				12/30/2007		16	M																																																																									
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