

<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				LOCAL REPORT NUMBER*					
				REPORTING AGENCY NAME* NCIC* Fairfield Police Department 00901				HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR			
								1 - SOLVED 2 - UNSOLVED	2	1 98 - ANIMAL 99 - UNKNOWN			
COUNTY* 09		LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP	LOCATION: CITY, VILLAGE, TOWNSHIP* Fairfield				CRASH DATE/TIME* 11/18/2024 09:58		CRASH SEVERITY				
REFERENCE LOCATION	ROUTE TYPE US	ROUTE NUMBER 127	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME Nilles Rd			ROAD TYPE RD	LATITUDE 39.337732	4	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 #)			ROAD TYPE	LONGITUDE -84.560116					
REFERENCE POINT 1		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						
DISTANCE FROM REFERENCE		DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS				<input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA							
NUMBER OF APPROACHES 4				ROADWAY									
				<input type="checkbox"/> ROADWAY DIVIDED									
LOCATION OF FIRST HARMFUL EVENT 1				MANNER OF CRASH COLLISION/IMPACT 3				DIRECTION OF TRAVEL		MEDIAN TYPE			
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				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		1 - NORTH 2 - SOUTH 3 - EAST 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				WORK ZONE TYPE				LOCATION OF CRASH IN WORK ZONE					
				1 - LANE CLOSURE 2 - LANE SHFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER				1 - BEFORE THE 1ST WORK ZONE 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA					
								CONTOUR 1	CONDITIONS 2	SURFACE 2			
								1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 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			
LIGHT CONDITION 1				WEATHER 2									
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER/UNKNOWN				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									
NARRATIVE								DIAGRAM					
<p>On 11/18/2024 at 9:58 am, Unit #1 was traveling southbound on US-127 and when at Nilles Rd, attempted to turn left to travel eastbound on Nilles Rd and in so doing, failed to yield the right of way to oncoming traffic and collided with Unit #2 which was traveling northbound on US-127.</p> <p>The driver of Unit #1 was cited for DUS - 335.072a - F.C.O.</p>													
CRASH REPORTED DATE/TIME 11/18/2024 09:59		DISPATCH DATE/TIME 11/18/2024 10:01		ARRIVAL DATE/TIME 11/18/2024 10:01		SCENE CLEARED DATE/TIME 11/18/2024 11:33		REPORT TAKEN BY					
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 0		TOTAL MINUTES 92		OFFICER'S NAME* Cook, Scotty		CHECKED BY OFFICER'S NAME* Wolfe, Bradley					
						OFFICER'S BADGE NUMBER* 153		CHECKED BY OFFICER'S BADGE NUMBER* 103					
									SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)				

IR24-006319

UNIT # 1	OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER) DEES, NANCY L	OWNER PHONE: INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER
-------------	---	--

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
1031 MINOR AVE, HAMILTON, OH 45015COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE OH LICENSE PLATE # HXT4066 VEHICLE IDENTIFICATION # 4T1BE46KX7U083798 VEHICLE YEAR 2007 VEHICLE MAKE Toyota

INSURANCE VERIFIED INSURANCE COMPANY INSURANCE POLICY # COLOR Red VEHICLE MODEL Camry

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 <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 <input type="checkbox"/> PLACARD CLASS # PLACARD ID #	

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 - 3-WHEELED 10 - AUTOCYCLE 11 - MOVED OR MOTORIZED BICYCLE 12 - 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
----------------	---	--	---	---	---

1 # OF TRAILING UNITS					
--------------------------	--	--	--	--	--

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

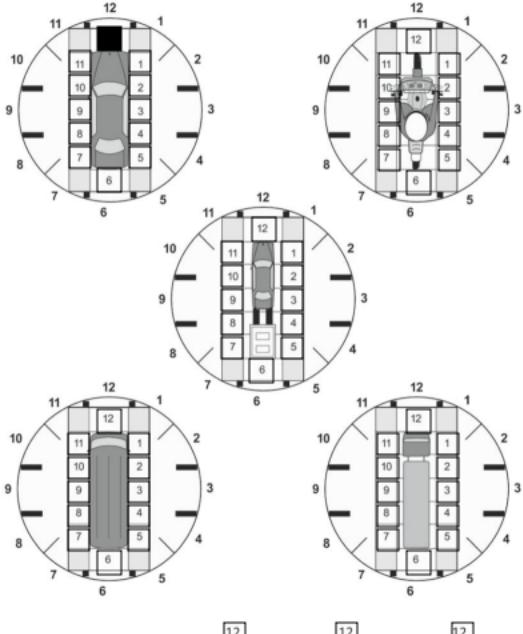
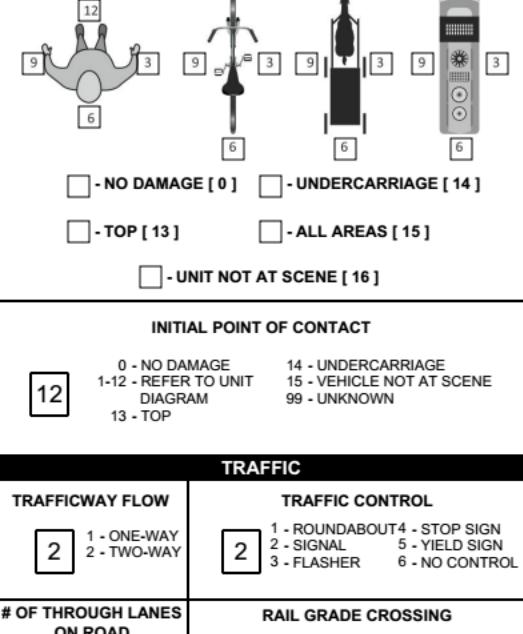
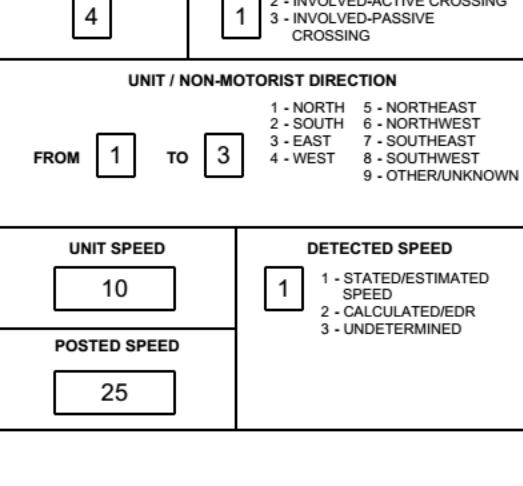
1 SPECIAL FUNCTION	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT /COMMUTER	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL	21 - MAIL CARRIER 99 - OTHER/UNKNOWN
-----------------------	--	---	---	--	---

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
----------------------	--	---	---	--	---

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
----------------------	--	--	--	--	--------------------

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
--------------------------------------	--	---	--	---	--

1 ACTION	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH 6 - STRIKING PRE-CRASH 7 - MAKING LEFT TURN 8 - MAKING U-TURN 9 - OTHER/UNKNOWN	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/ PASSED 5 - BOTH 6 - MAKING LEFT TURN 7 - MAKING U-TURN 8 - MAKING ROLLING STOP	8 - ENTERING TRAFFIC 9 - LEAVING TRAFFIC 10 - PARKED 11 - SLOWING OR STOPPED IN 12 - DRIVERLESS	13 - NEGOTIATING A LANE 14 - ENTERING OR PASSED 15 - WALKING, RUNNING, STOPPED IN 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING SPECIFIED LOCATION 20 - OTHER NON- SPECIFIED LOCATION 21 - STANDING OUTSIDE JOGGING, PLAYING 22 - OTHER 23 - STANDING 24 - OTHER 25 - STANDING 26 - OTHER 27 - OTHER 28 - OTHER 29 - OTHER 30 - OTHER 31 - OTHER 32 - OTHER 33 - OTHER 34 - OTHER 35 - OTHER 36 - OTHER 37 - OTHER 38 - OTHER 39 - OTHER 40 - OTHER 41 - OTHER 42 - OTHER 43 - OTHER 44 - OTHER 45 - OTHER 46 - OTHER 47 - OTHER 48 - OTHER 49 - OTHER 50 - OTHER 51 - OTHER 52 - OTHER 53 - OTHER 54 - OTHER 55 - OTHER 56 - OTHER 57 - OTHER 58 - OTHER 59 - OTHER 60 - OTHER 61 - OTHER 62 - OTHER 63 - OTHER 64 - OTHER 65 - OTHER 66 - OTHER 67 - OTHER 68 - OTHER 69 - OTHER 70 - OTHER 71 - OTHER 72 - OTHER 73 - OTHER 74 - OTHER 75 - OTHER 76 - OTHER 77 - OTHER 78 - OTHER 79 - OTHER 80 - OTHER 81 - OTHER 82 - OTHER 83 - OTHER 84 - OTHER 85 - OTHER 86 - OTHER 87 - OTHER 88 - OTHER 89 - OTHER 90 - OTHER 91 - OTHER 92 - OTHER 93 - OTHER 94 - OTHER 95 - OTHER 96 - OTHER 97 - OTHER 98 - OTHER 99 - OTHER 100 - OTHER 101 - OTHER 102 - OTHER 103 - OTHER 104 - OTHER 105 - OTHER 106 - OTHER 107 - OTHER 108 - OTHER 109 - OTHER 110 - OTHER 111 - OTHER 112 - OTHER 113 - OTHER 114 - OTHER 115 - OTHER 116 - OTHER 117 - OTHER 118 - OTHER 119 - OTHER 120 - OTHER 121 - OTHER 122 - OTHER 123 - OTHER 124 - OTHER 125 - OTHER 126 - OTHER 127 - OTHER 128 - OTHER 129 - OTHER 130 - OTHER 131 - OTHER 132 - OTHER 133 - OTHER 134 - OTHER 135 - OTHER 136 - OTHER 137 - OTHER 138 - OTHER 139 - OTHER 140 - OTHER 141 - OTHER 142 - OTHER 143 - OTHER 144 - OTHER 145 - OTHER 146 - OTHER 147 - OTHER 148 - OTHER 149 - OTHER 150 - OTHER 151 - OTHER 152 - OTHER 153 - OTHER 154 - OTHER 155 - OTHER 156 - OTHER 157 - OTHER 158 - OTHER 159 - OTHER 160 - OTHER 161 - OTHER 162 - OTHER 163 - OTHER 164 - OTHER 165 - OTHER 166 - OTHER 167 - OTHER 168 - OTHER 169 - OTHER 170 - OTHER 171 - OTHER 172 - OTHER 173 - OTHER 174 - OTHER 175 - OTHER 176 - OTHER 177 - OTHER 178 - OTHER 179 - OTHER 180 - OTHER 181 - OTHER 182 - OTHER 183 - OTHER 184 - OTHER 185 - OTHER 186 - OTHER 187 - OTHER 188 - OTHER 189 - OTHER 190 - OTHER 191 - OTHER 192 - OTHER 193 - OTHER 194 - OTHER 195 - OTHER 196 - OTHER 197 - OTHER 198 - OTHER 199 - OTHER 200 - OTHER 201 - OTHER 202 - OTHER 203 - OTHER 204 - OTHER 205 - OTHER 206 - OTHER 207 - OTHER 208 - OTHER 209 - OTHER 210 - OTHER 211 - OTHER 212 - OTHER 213 - OTHER 214 - OTHER 215 - OTHER 216 - OTHER 217 - OTHER 218 - OTHER 219 - OTHER 220 - OTHER 221 - OTHER 222 - OTHER 223 - OTHER 224 - OTHER 225 - OTHER 226 - OTHER 227 - OTHER 228 - OTHER 229 - OTHER 230 - OTHER 231 - OTHER 232 - OTHER 233 - OTHER 234 - OTHER 235 - OTHER 236 - OTHER 237 - OTHER 238 - OTHER 239 - OTHER 240 - OTHER 241 - OTHER 242 - OTHER 243 - OTHER 244 - OTHER 245 - OTHER 246 - OTHER 247 - OTHER 248 - OTHER 249 - OTHER 250 - OTHER 251 - OTHER 252 - OTHER 253 - OTHER 254 - OTHER 255 - OTHER 256 - OTHER 257 - OTHER 258 - OTHER 259 - OTHER 260 - OTHER 261 - OTHER 262 - OTHER 263 - OTHER 264 - OTHER 265 - OTHER 266 - OTHER 267 - OTHER 268 - OTHER 269 - OTHER 270 - OTHER 271 - OTHER 272 - OTHER 273 - OTHER 274 - OTHER 275 - OTHER 276 - OTHER 277 - OTHER 278 - OTHER 279 - OTHER 280 - OTHER 281 - OTHER 282 - OTHER 283 - OTHER 284 - OTHER 285 - OTHER 286 - OTHER 287 - OTHER 288 - OTHER 289 - OTHER 290 - OTHER 291 - OTHER 292 - OTHER 293 - OTHER 294 - OTHER 295 - OTHER 296 - OTHER 297 - OTHER 298 - OTHER 299 - OTHER 300 - OTHER 301 - OTHER 302 - OTHER 303 - OTHER 304 - OTHER 305 - OTHER 306 - OTHER 307 - OTHER 308 - OTHER 309 - OTHER 310 - OTHER 311 - OTHER 312 - OTHER 313 - OTHER 314 - OTHER 315 - OTHER 316 - OTHER 317 - OTHER 318 - OTHER 319 - OTHER 320 - OTHER 321 - OTHER 322 - OTHER 323 - OTHER 324 - OTHER 325 - OTHER 326 - OTHER 327 - OTHER 328 - OTHER 329 - OTHER 330 - OTHER 331 - OTHER 332 - OTHER 333 - OTHER 334 - OTHER 335 - OTHER 336 - OTHER 337 - OTHER 338 - OTHER 339 - OTHER 340 - OTHER 341 - OTHER 342 - OTHER 343 - OTHER 344 - OTHER 345 - OTHER 346 - OTHER 347 - OTHER 348 - OTHER 349 - OTHER 350 - OTHER 351 - OTHER 352 - OTHER 353 - OTHER 354 - OTHER 355 - OTHER 356 - OTHER 357 - OTHER 358 - OTHER 359 - OTHER 360 - OTHER 361 - OTHER 362 - OTHER 363 - OTHER 364 - OTHER 365 - OTHER 366 - OTHER 367 - OTHER 368 - OTHER 369 - OTHER 370 - OTHER 371 - OTHER 372 - OTHER 373 - OTHER 374 - OTHER 375 - OTHER 376 - OTHER 377 - OTHER 378 - OTHER 379 - OTHER 380 - OTHER 381 - OTHER 382 - OTHER 383 - OTHER 384 - OTHER 385 - OTHER 386 - OTHER 387 - OTHER 388 - OTHER 389 - OTHER 390 - OTHER 391 - OTHER 392 - OTHER 393 - OTHER 394 - OTHER 395 - OTHER 396 - OTHER 397 - OTHER 398 - OTHER 399 - OTHER 400 - OTHER 401 - OTHER 402 - OTHER 403 - OTHER 404 - OTHER 405 - OTHER 406 - OTHER 407 - OTHER 408 - OTHER 409 - OTHER 410 - OTHER 411 - OTHER 412 - OTHER 413 - OTHER 414 - OTHER 415 - OTHER 416 - OTHER 417 - OTHER 418 - OTHER 419 - OTHER 420 - OTHER 421 - OTHER 422 - OTHER 423 - OTHER 424 - OTHER 425 - OTHER 426 - OTHER 427 - OTHER 428 - OTHER 429 - OTHER 430 - OTHER 431 - OTHER 432 - OTHER 433 - OTHER 434 - OTHER 435 - OTHER 436 - OTHER 437 - OTHER 438 - OTHER 439 - OTHER 440 - OTHER 441 - OTHER 442 - OTHER 443 - OTHER 444 - OTHER 445 - OTHER 446 - OTHER 447 - OTHER 448 - OTHER 449 - OTHER 450 - OTHER 451 - OTHER 452 - OTHER 453 - OTHER 454 - OTHER 455 - OTHER 456 - OTHER 457 - OTHER 458 - OTHER 459 - OTHER 460 - OTHER 461 - OTHER 462 - OTHER 463 - OTHER 464 - OTHER 465 - OTHER 466 - OTHER 467 - OTHER 468 - OTHER 469 - OTHER 470 - OTHER 471 - OTHER 472 - OTHER 473 - OTHER 474 - OTHER 475 - OTHER 476 - OTHER 477 - OTHER 478 - OTHER 479 - OTHER 480 - OTHER 481 - OTHER 482 - OTHER 483 - OTHER 484 - OTHER 485 - OTHER 486 - OTHER 487 - OTHER 488 - OTHER 489 - OTHER 490 - OTHER 491 - OTHER 492 - OTHER 493 - OTHER 494 - OTHER 495 - OTHER 496 - OTHER 497 - OTHER 498 - OTHER 499 - OTHER 500 - OTHER 501 - OTHER 502 - OTHER 503 - OTHER 504 - OTHER 505 - OTHER 506 - OTHER 507 - OTHER 508 - OTHER 509 - OTHER 510 - OTHER 511 - OTHER 512 - OTHER 513 - OTHER 514 - OTHER 515 - OTHER 516 - OTHER 517 - OTHER 518 - OTHER 519 - OTHER 520 - OTHER 521 - OTHER 522 - OTHER 523 - OTHER 524 - OTHER 525 - OTHER 526 - OTHER 527 - OTHER 528 - OTHER 529 - OTHER 530 - OTHER 531 - OTHER 532 - OTHER 533 - OTHER 534 - OTHER 535 - OTHER 536 - OTHER 537 - OTHER 538 - OTHER 539 - OTHER 540 - OTHER 541 - OTHER 542 - OTHER 543 - OTHER 544 - OTHER 545 - OTHER 546 - OTHER 547 - OTHER 548 - OTHER 549 - OTHER 550 - OTHER 551 - OTHER 552 - OTHER 553 - OTHER 554 - OTHER 555 - OTHER 556 - OTHER 557 - OTHER 558 - OTHER 559 - OTHER 560 - OTHER 561 - OTHER 562 - OTHER 563 - OTHER 564 - OTHER 565 - OTHER 566 - OTHER 567 - OTHER 568 - OTHER 569 - OTHER 570 - OTHER 571 - OTHER 572 - OTHER 573 - OTHER 574 - OTHER 575 - OTHER 576 - OTHER 577 - OTHER 578 - OTHER 579 - OTHER 580 - OTHER 581 - OTHER 582 - OTHER 583 - OTHER 584 - OTHER 585 - OTHER 586 - OTHER 587 - OTHER 588 - OTHER 589 - OTHER 590 - OTHER 591 - OTHER 592 - OTHER 593 - OTHER 594 - OTHER 595 - OTHER 596 - OTHER 597 - OTHER 598 - OTHER 599 - OTHER 600 - OTHER 601 - OTHER 602 - OTHER 603 - OTHER 604 - OTHER 605 - OTHER 606 - OTHER 607 - OTHER 608 - OTHER 609 - OTHER 610 - OTHER 611 - OTHER 612 - OTHER 613 - OTHER 614 - OTHER 615 - OTHER 616 - OTHER 617 - OTHER 618 - OTHER 619 - OTHER 620 - OTHER 621 - OTHER 622 - OTHER 623 - OTHER 624 - OTHER 625 - OTHER 626 - OTHER 627 - OTHER 628 - OTHER 629 - OTHER 630 - OTHER 631 - OTHER 632 - OTHER 633 - OTHER 634 - OTHER 635 - OTHER 636 - OTHER 637 - OTHER 638 - OTHER 639 - OTHER 640 - OTHER 641 - OTHER 642 - OTHER 643 - OTHER 644 - OTHER 645 - OTHER 646 - OTHER 647 - OTHER 648 - OTHER 649 - OTHER 650 - OTHER 651 - OTHER 652 - OTHER 653 - OTHER 654 - OTHER 655 - OTHER 656 - OTHER 657 - OTHER 658 - OTHER 659 - OTHER 660 - OTHER 661 - OTHER 662 - OTHER 663 - OTHER 664 - OTHER 665 - OTHER 666 - OTHER 667 - OTHER 668 - OTHER 669 - OTHER 670 - OTHER 671 - OTHER 672 - OTHER 673 - OTHER 674 - OTHER 675 - OTHER 676 - OTHER 677 - OTHER 678 - OTHER 679 - OTHER 680 - OTHER 681 - OTHER 682 - OTHER 683 - OTHER 684 - OTHER 685 - OTHER 686 - OTHER 687 - OTHER 688 - OTHER 689 - OTHER 690 - OTHER 691 - OTHER 692 - OTHER 693 - OTHER 694 - OTHER 695 - OTHER 696 - OTHER 697 - OTHER 698 - OTHER 699 - OTHER 700 - OTHER 701 - OTHER 702 - OTHER 703 - OTHER 704 - OTHER 705 - OTHER 706 - OTHER 707 - OTHER 708 - OTHER 709 - OTHER 710 - OTHER 711 - OTHER 712 - OTHER 713 - OTHER 714 - OTHER 715 - OTHER 716 - OTHER 717 - OTHER 718 - OTHER 719 - OTHER 720 - OTHER 721 - OTHER 722 - OTHER 723 - OTHER 724 - OTHER 725 - OTHER 726 - OTHER 727 - OTHER 728 - OTHER 729 - OTHER 730 - OTHER 731 - OTHER 732 - OTHER 733 - OTHER 734 - OTHER 735 - OTHER 736 - OTHER 737 - OTHER 738 - OTHER 739 - OTHER 740 - OTHER 741 - OTHER 742 - OTHER 743 - OTHER 744 - OTHER 745 - OTHER 746 - OTHER 747 - OTHER 748 - OTHER 749 - OTHER 750 - OTHER 751 - OTHER 752 - OTHER 753 - OTHER 754 - OTHER 755 - OTHER 756 - OTHER 757 - OTHER 758 - OTHER 759 - OTHER 760 - OTHER 761 - OTHER 762 - OTHER 763 - OTHER 764 - OTHER 765 - OTHER 766 - OTHER 767 - OTHER 768 - OTHER 769 - OTHER 770 - OTHER 771 - OTHER 772 - OTHER 773 - OTHER 774 - OTHER 775 - OTHER 776 - OTHER 777 - OTHER 778 - OTHER 779 - OTHER 780 - OTHER 781 - OTHER 782 - OTHER 783 - OTHER 784 - OTHER 785 - OTHER 786 - OTHER 787 - OTHER 788 - OTHER 789 - OTHER 790 - OTHER 791 - OTHER 792 - OTHER 793 - OTHER 794 - OTHER 795 - OTHER 796 - OTHER 797 - OTHER 798 - OTHER 799 - OTHER 800 - OTHER 801 - OTHER 802 - OTHER 803 - OTHER 804 - OTHER 805 - OTHER 806 - OTHER 807 - OTHER 808 - OTHER 809 - OTHER 810 - OTHER 811 - OTHER 812 - OTHER 813 - OTHER 814 - OTHER 815 - OTHER 816 - OTHER 817 - OTHER 818 - OTHER 819 - OTHER 820 - OTHER 821 - OTHER 822 - OTHER 823 - OTHER 824 - OTHER 825 - OTHER 826 - OTHER 827 - OTHER 828 - OTHER 829 - OTHER 830 - OTHER 831 - OTHER 832 - OTHER 833 - OTHER 834 - OTHER 835 - OTHER 836 - OTHER 837 - OTHER 838 - OTHER 839 - OTHER 840 - OTHER 841 - OTHER 842 - OTHER 843 - OTHER 844 - OTHER 845 - OTHER 846 - OTHER 847 - OTHER 848 - OTHER 849 - OTHER 850 - OTHER 851 - OTHER 852 - OTHER 853 - OTHER 854 - OTHER 855 - OTHER 856 - OTHER 857 - OTHER 858 - OTHER 859 - OTHER 860 - OTHER 861 - OTHER 862 - OTHER 863 - OTHER 864 - OTHER 865 - OTHER 866 - OTHER 867 - OTHER 868 - OTHER 869 - OTHER 870 - OTHER 871 - OTHER 872 - OTHER 873 - OTHER 874 - OTHER 875 - OTHER 876 - OTHER 877 - OTHER 878 - OTHER 879 - OTHER 880 - OTHER 881 - OTHER 882 - OTHER 883 - OTHER 884 - OTHER 885 - OTHER 886 - OTHER 887 - OTHER 888 - OTHER 889 - OTHER 890 - OTHER 891 - OTHER 892 - OTHER 893 - OTHER 894 - OTHER 895 - OTHER 896 - OTHER 897 - OTHER 898 - OTHER 899 - OTHER 900 - OTHER 901 - OTHER 902 - OTHER 903 - OTHER 904 - OTHER 905 - OTHER 906 - OTHER 907 - OTHER 908 - OTHER 909 - OTHER 910 - OTHER 911 - OTHER 912 - OTHER 913 - OTHER 914 - OTHER 915 - OTHER 916 - OTHER 917 - OTHER 918 - OTHER 919 - OTHER 920 - OTHER 921 - OTHER 922 - OTHER 923 - OTHER 924 - OTHER 925 - OTHER 926 - OTHER 927 - OTHER 928 - OTHER 929 - OTHER 930 - OTHER 931 - OTHER 932 - OTHER 933 - OTHER 934 - OTHER 935 - OTHER 936 - OTHER 937 - OTHER 938 - OTHER 939 - OTHER 940 - OTHER 941 - OTHER 942 - OTHER 943 - OTHER 944 - OTHER 945 - OTHER 946 - OTHER 947 - OTHER 948 - OTHER 949 - OTHER 950 - OTHER 951 - OTHER 952 - OTHER 953 - OTHER 954 - OTHER 955 - OTHER 956 - OTHER 957 - OTHER 958 - OTHER 959 - OTHER 960 - OTHER 961 - OTHER 962 - OTHER 963 - OTHER 964 - OTHER 965 - OTHER 966 - OTHER 967 - OTHER 968 - OTHER 969 - OTHER 970 - OTHER 971 - OTHER 972 - OTHER 973 - OTHER 974 - OTHER 975 - OTHER 976 - OTHER 977 - OTHER 978 - OTHER 979 - OTHER 980 - OTHER 981 - OTHER 982 - OTHER 983 - OTHER 984 - OTHER 985 - OTHER 986 - OTHER 987 - OTHER 988 - OTHER 989 - OTHER 990 - OTHER 991 - OTHER 992 - OTHER 993 - OTHER 994 - OTHER 995 - OTHER 996 - OTHER 997 - OTHER 998 - OTHER 999 - OTHER 1000 - OTHER
-------------	--	---	--	---	---

DAMAGE	
DAMAGE SCALE	
4	1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL 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 type="checkbox"/> - UNIT NOT AT SCENE [16]	
INITIAL POINT OF CONTACT	
12	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 - ROUNDABOUT4 - STOP SIGN 2 - SIGNAL5 - YIELD SIGN 3 - FLASHER6 - NO CONTROL
4	# OF THROUGH LANES ON ROAD 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 3

IR24-006319

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

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
3916 ARLINGTON AVE APT 3, HAMILTON, OH 45015

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

LP STATE OH	LICENSE PLATE # HFZ9080	VEHICLE IDENTIFICATION # 1GCEK19T8YE377242	VEHICLE YEAR 2000	VEHICLE MAKE Chevrolet
----------------	----------------------------	---	----------------------	---------------------------

INSURANCE VERIFIED	INSURANCE COMPANY SHELTER MUTUAL INS. CO.	INSURANCE POLICY # 341104127259	COLOR Blue, Dark	VEHICLE MODEL Silverado
-----------------------	--	------------------------------------	---------------------	----------------------------

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 <input checked="" type="checkbox"/> 2	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 <input checked="" type="checkbox"/> 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

OF TRAILING UNITS
 1

WAS VEHICLE OPERATING IN
AUTONOMOUS MODE
WHEN CRASH OCCURRED?
 0
1 - YES 2 - NO 9 - OTHER/UNKNOWN AUTONOMOUS
MODE LEVEL

SPECIAL FUNCTION <input checked="" type="checkbox"/> 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

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

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

NON-MOTORIST LOCATION AT IMPACT <input type="checkbox"/>	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

ACTION <input checked="" type="checkbox"/> 4	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH 6 - MAKING RIGHT TURN 7 - MAKING LEFT TURN 9 - OTHER/UNKNOWN	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/ PASSING 5 - BOTH 6 - MAKING LEFT TURN 7 - MAKING U-TURN 9 - OTHER/UNKNOWN	8 - ENTERING TRAFFIC 9 - LEAVING TRAFFIC 10 - PARKED 11 - SLOWING OR STOPPED IN 12 - DRIVERLESS	13 - NEGOTIATING A LANE 14 - ENTERING OR LANE 15 - PARKED 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING CROSSING 20 - OTHER NON- SPECIFIED LOCATION 21 - WALKING, RUNNING, JOGGING, PLAYING 22 - APPROACHING OR LEAVING 23 - STANDING OUTSIDE JOGGING, PLAYING 24 - WORKING 99 - OTHER/UNKNOWN

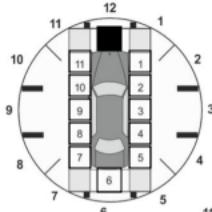
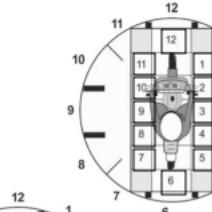
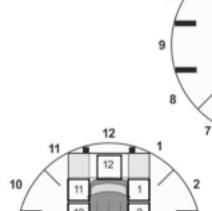
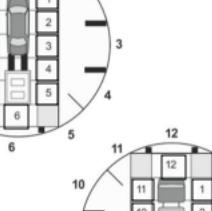
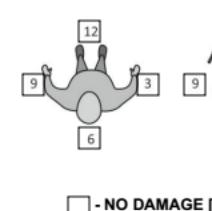
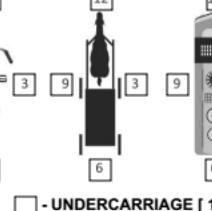
CONTRIBUTING CIRCUMSTANCES <input checked="" type="checkbox"/> 1	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	7 - LEFT OF CENTER 8 - FOLLOWING TOO 9 - IMPROPER LANE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	13 - IMPROPER START CLOSE/ACDA POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	17 - VISION OBSTRUCTION FROM A PARKED POSITION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - STOPPED OR PARKED ILLEGALLY 19 - LOAD SHIFTING/ FALLING/SPILLING 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

	EVENTS			
1 <input checked="" 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 - DOWNTOWN RUNAWAY 13 - OTHER NON- COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM MAINTENANCE 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 MOBILE OBJECT

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

1 MOST HARMFUL EVENT

DAMAGE		
DAMAGE SCALE		
3	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 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 - ROUNDABOUT4 - STOP SIGN 2 - SIGNAL5 - YIELD SIGN 3 - FLASHER6 - NO CONTROL
4	# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
2	FROM 2	TO 1
UNIT / NON-MOTORIST DIRECTION		
1	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER/UNKNOWN
UNIT SPEED		
1	DETECTED SPEED 1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED	
POSTED SPEED		
25		



MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER

IR24-006319

MOTORIST / NON-MOTORIST	UNIT # NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH				AGE		GENDER		
	1	PRICHARD, TAMMY SHIRLENE										10/24/1972				52		F	
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE								
1745 PLEASANT AVE, HAMILTON, OH 45015																			
INJURIES		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
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)					
6		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG			1	1	1	1	RESULT SELECT UP TO 4					
UNIT #		NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH				AGE		GENDER	
2		MCGHEE, JOHNATHON E										02/25/1975				49		M	
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE								
3916 ARLINGTON AVE APT 3, HAMILTON, OH 45015																			
INJURIES		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
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)					
4		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG			1	1	1	RESULT SELECT UP TO 4						
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"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG				1	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		1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - NOT APPLICABLE 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		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		10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		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 - 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 - BREATH 5 - OTHER					
SAFETY EQUIPMENT		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		TRAPPED		GENDER		15 - MOTOR VEHICLES WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER		CONDITION		DRUG TEST TYPE					
								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 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOID 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS					

IR24-006319

OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE 2 PETREE, JESSICA N				DATE OF BIRTH 08/02/1993	AGE 31	GENDER F																																																																						
	ADDRESS: STREET, CITY, STATE, ZIP 460 CENTRAL AVE, HAMILTON, OH 45011				CONTACT PHONE - INCLUDE AREA CODE																																																																									
OCCUPANT	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																																																																				
	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER																																																																						
OCCUPANT	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 []	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION []	AIR BAG USAGE []	EJECTION []	TRAPPED []																																																																				
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																																																																						
OCCUPANT	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 []	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION []	AIR BAG USAGE []	EJECTION []	TRAPPED []																																																																				
<table border="1"> <thead> <tr> <th>INJURY</th> <th>SAFETY EQUIPMENT USED</th> <th>SEATING POSITION</th> <th>AIR BAG USAGE</th> </tr> </thead> <tbody> <tr> <td>1 - FATAL</td> <td>1 - NONE USED - VEHICLE OCCUPANT</td> <td>1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)</td> <td>1 - NOT DEPLOYED</td> </tr> <tr> <td>2 - SUSPECTED SERIOUS INJURY</td> <td>2 - SHOULDER BELT ONLY USED</td> <td>2 - FRONT - MIDDLE</td> <td>2 - DEPLOYED FRONT</td> </tr> <tr> <td>3 - SUSPECTED MINOR INJURY</td> <td>3 - LAP BELT ONLY USED</td> <td>3 - FRONT - RIGHT SIDE</td> <td>3 - DEPLOYED SIDE</td> </tr> <tr> <td>4 - POSSIBLE INJURY</td> <td>4 - SHOULDER & LAP BELT USED</td> <td>4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)</td> <td>4 - DEPLOYED BOTH FRONT / SIDE</td> </tr> <tr> <td>5 - NO APPARENT INJURY</td> <td>5 - CHILD RESTRAINT SYSTEM - FORWARD FACING</td> <td>5 - SECOND - MIDDLE</td> <td>5 - NOT APPLICABLE</td> </tr> <tr> <td colspan="2">INJURED TAKEN BY</td> <td>6 - CHILD RESTRAINT SYSTEM - REAR FACING</td> <td>6 - SECOND - RIGHT SIDE</td> </tr> <tr> <td colspan="2">1 - NOT TRANSPORTED / TREATED AT SCENE</td> <td>7 - BOOSTER SEAT</td> <td>7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)</td> </tr> <tr> <td colspan="2">2 - EMS</td> <td>8 - HELMET USED</td> <td>8 - THIRD - MIDDLE</td> </tr> <tr> <td colspan="2">3 - POLICE</td> <td>9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)</td> <td>9 - THIRD - RIGHT</td> </tr> <tr> <td colspan="2">9 - OTHER / UNKNOWN</td> <td>10 - REFLECTIVE CLOTHING</td> <td>10 - SLEEPER SECTION OF TRUCK CAB</td> </tr> <tr> <td colspan="2">GENDER</td> <td>11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY</td> <td>11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)</td> </tr> <tr> <td colspan="2">F - FEMALE</td> <td>99 - OTHER / UNKNOWN</td> <td>12 - PASSENGER IN UNENCLOSED CARGO AREA</td> </tr> <tr> <td colspan="2">M - MALE</td> <td></td> <td>13 - TRAILING UNIT</td> </tr> <tr> <td colspan="2">U - OTHER / UNKNOWN</td> <td></td> <td>14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)</td> </tr> <tr> <td colspan="2"></td> <td></td> <td>15 - NON-MOTORIST</td> </tr> <tr> <td colspan="2"></td> <td></td> <td>99 - OTHER / UNKNOWN</td> </tr> </tbody> </table>											INJURY	SAFETY EQUIPMENT USED	SEATING POSITION	AIR BAG USAGE	1 - FATAL	1 - NONE USED - VEHICLE OCCUPANT	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED	2 - SUSPECTED SERIOUS INJURY	2 - SHOULDER BELT ONLY USED	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	3 - SUSPECTED MINOR INJURY	3 - LAP BELT ONLY USED	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	4 - POSSIBLE INJURY	4 - SHOULDER & LAP BELT USED	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SIDE	5 - NO APPARENT INJURY	5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	INJURED TAKEN BY		6 - CHILD RESTRAINT SYSTEM - REAR FACING	6 - SECOND - RIGHT SIDE	1 - NOT TRANSPORTED / TREATED AT SCENE		7 - BOOSTER SEAT	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	2 - EMS		8 - HELMET USED	8 - THIRD - MIDDLE	3 - POLICE		9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	9 - THIRD - RIGHT	9 - OTHER / UNKNOWN		10 - REFLECTIVE CLOTHING	10 - SLEEPER SECTION OF TRUCK CAB	GENDER		11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	F - FEMALE		99 - OTHER / UNKNOWN	12 - PASSENGER IN UNENCLOSED CARGO AREA	M - MALE			13 - TRAILING UNIT	U - OTHER / UNKNOWN			14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				15 - NON-MOTORIST				99 - OTHER / UNKNOWN
INJURY	SAFETY EQUIPMENT USED	SEATING POSITION	AIR BAG USAGE																																																																											
1 - FATAL	1 - NONE USED - VEHICLE OCCUPANT	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED																																																																											
2 - SUSPECTED SERIOUS INJURY	2 - SHOULDER BELT ONLY USED	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT																																																																											
3 - SUSPECTED MINOR INJURY	3 - LAP BELT ONLY USED	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE																																																																											
4 - POSSIBLE INJURY	4 - SHOULDER & LAP BELT USED	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SIDE																																																																											
5 - NO APPARENT INJURY	5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	5 - SECOND - MIDDLE	5 - NOT APPLICABLE																																																																											
INJURED TAKEN BY		6 - CHILD RESTRAINT SYSTEM - REAR FACING	6 - SECOND - RIGHT SIDE																																																																											
1 - NOT TRANSPORTED / TREATED AT SCENE		7 - BOOSTER SEAT	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)																																																																											
2 - EMS		8 - HELMET USED	8 - THIRD - MIDDLE																																																																											
3 - POLICE		9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	9 - THIRD - RIGHT																																																																											
9 - OTHER / UNKNOWN		10 - REFLECTIVE CLOTHING	10 - SLEEPER SECTION OF TRUCK CAB																																																																											
GENDER		11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)																																																																											
F - FEMALE		99 - OTHER / UNKNOWN	12 - PASSENGER IN UNENCLOSED CARGO AREA																																																																											
M - MALE			13 - TRAILING UNIT																																																																											
U - OTHER / UNKNOWN			14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)																																																																											
			15 - NON-MOTORIST																																																																											
			99 - OTHER / UNKNOWN																																																																											
WITNESS	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER																																																																							
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE																																																																									
WITNESS	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER																																																																							
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE																																																																									
WITNESS	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER																																																																							
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE																																																																									