

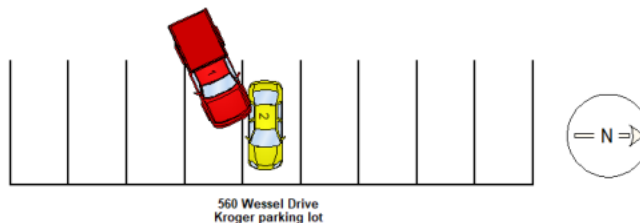
☐ PHOTOS TAKEN ☐ SECONDARY CRASH ☐ PRIVATE PROPERTY		☐ OH-2 ☐ OH-3 ☐ OH-1P ☐ OTHER		LOCAL INFORMATION		IR23-002468					
REPORTING AGENCY NAME* Fairfield Police Department				NCIC* 00901		HIT/SKIP 1 - SOLVED 2 - UNSOLVED		NUMBER OF UNITS 2		UNIT IN ERROR 1 - 98 - ANIMAL 1 - 99 - UNKNOWN	
COUNTY* 09		LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP 1		LOCATION: CITY, VILLAGE, TOWNSHIP* Fairfield		CRASH DATE/TIME* 09/13/2023 17:03		CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY 5			
ROUTE TYPE		ROUTE NUMBER		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		LOCATION ROAD NAME Wessel		ROAD TYPE DR		LATITUDE 39.335857	
ROUTE TYPE		ROUTE NUMBER		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 560		ROAD TYPE		LONGITUDE -84.562903	
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 3		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 ☐ WITHIN INTERSECTION OR ON APPROACH ☐ WITHIN INTERCHANGE AREA NUMBER OF APPROACHES ROADWAY ☐ ROADWAY DIVIDED			
DISTANCE FROM REFERENCE		DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS		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 6		MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION 2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER/UNKNOWN 6		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 (ANY TYPE) 4 - DIVIDED, RAISE MEDIAN (ANY TYPE) 9 - OTHER/UNKNOWN	
☐ WORK ZONE RELATED ☐ WORKERS PRESENT ☐ LAW ENFORCEMENT PRESENT ☐ 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 WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		CONTOUR 1		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 1		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		CRASH REPORTED DATE/TIME 09/13/2023 17:03		DISPATCH DATE/TIME 09/13/2023 17:07		ARRIVAL DATE/TIME 09/13/2023 17:12		SCENE CLEARED DATE/TIME 09/13/2023 18:01	
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 0		TOTAL MINUTES 54		OFFICER'S NAME* Partin, Emma		CHECKED BY OFFICER'S NAME* Sons, Jacob		REPORT TAKEN BY ☐ POLICE AGENCY ☐ MOTORIST ☐ SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPs)	
OFFICER'S BADGE NUMBER* 176		CHECKED BY OFFICER'S BADGE NUMBER* 150									

NARRATIVE

On September 13, 2023 at 5:03p.m., I responded to a hit skip auto accident at 560 Wessel Drive. Unit 1 struck Unit 2 which was parked and unoccupied. Unit 1 left the scene without leaving any personal information. A witness provided unit 1's license plate and he was identified. Unit 1 driver responded to the police department to provide insurance information and to be cited.

Unit 2 is owned by Ean Holdings. The person renting the vehicle's information:
YOLANDA BURDEN
17 N. APPLEWOOD COURT FAIRFIELD OHIO 45014

DIAGRAM



IR23-002468

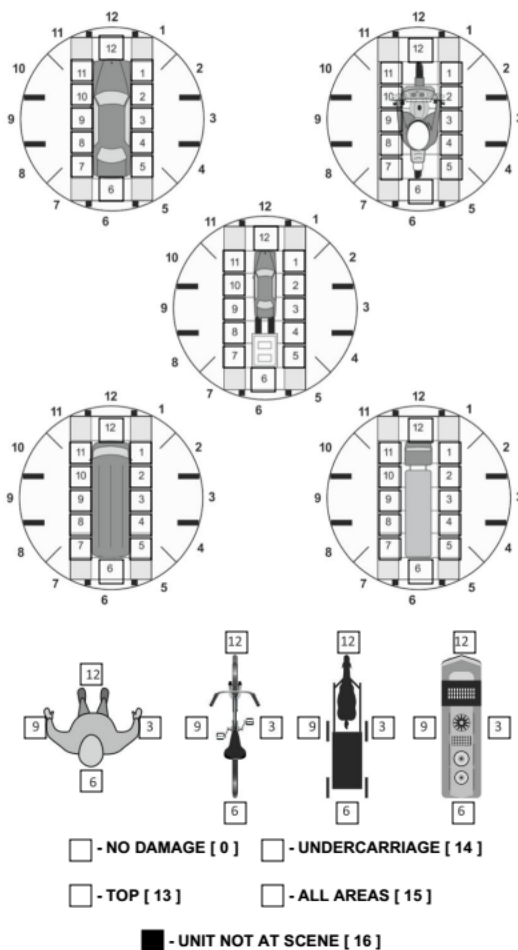
UNIT # 1	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) GIBBONS, BRYAN P	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER) 11818 PIPPIN RD, CINCINNATI, OH 45231		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
LP STATE OH	LICENSE PLATE # GCH4019	VEHICLE IDENTIFICATION # 1GCRCPX7CZ337522
VEHICLE YEAR 2012	VEHICLE MAKE Chevrolet	
INSURANCE VERIFIED	INSURANCE COMPANY AMERICAN FAMILY INSURANCE	INSURANCE POLICY # CA-0019565
COLOR Silver	VEHICLE MODEL SILVERADO	
TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE		
US DOT #		
HAZARDOUS MATERIAL ☐ MATERIAL CLASS # ☐ PLACARD ID #		
TOWED BY: COMPANY NAME		
VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.		
INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT ☒		
# OCCUPANTS 1		
UNIT TYPE 4		
# OF TRAILING UNITS 0		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - YES 2 - NO 9 - OTHER/UNKNOWN		
AUTONOMOUS MODE LEVEL 0		
SPECIAL FUNCTION 1		
CARGO BODY TYPE 1		
VEHICLE DEFECTS 1		
ACTION 3		
CONTRIBUTING CIRCUMSTANCES 6		
SEQUENCE OF EVENTS 1		
EVENTS 1		
COLLISION WITH FIXED OBJECT - STRUCK 1		
FIRST HARMFUL EVENT 1		
MOST HARMFUL EVENT 1		

DAMAGE

DAMAGE SCALE

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

9 - UNKNOWN

DAMAGED AREA(S)
INDICATE ALL THAT APPLY

INITIAL POINT OF CONTACT

11 0 - NO DAMAGE 14 - UNDERCARRIAGE
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
13 - TOP 99 - UNKNOWN

TRAFFIC

TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 6 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD 2	RAIL GRADE CROSSING 1 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION FROM 2 TO 3 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER/UNKNOWN	
UNIT SPEED 5	DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED
POSTED SPEED 10	

IR23-002468

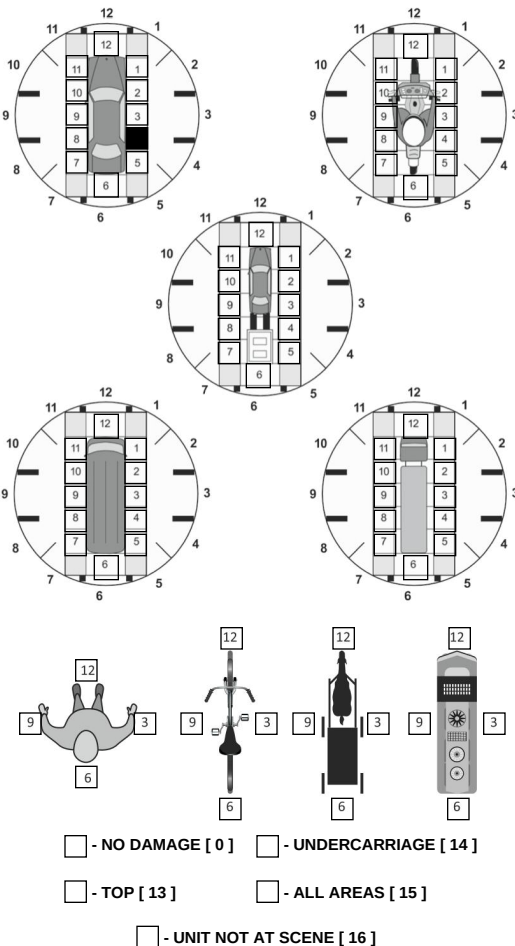
UNIT # 2	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) EAN HOLDINGS		OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER	
OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER) 3700 PARK 42 DR, CINCINNATI, OH 45241				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP			COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	
LP STATE OH	LICENSE PLATE # JNT9099	VEHICLE IDENTIFICATION # 1G1ZD5T6PF246504	VEHICLE YEAR 2023	VEHICLE MAKE Chevrolet
INSURANCE VERIFIED	INSURANCE COMPANY STATE FARM	INSURANCE POLICY # 2625923SFP35	COLOR Black	VEHICLE MODEL Malibu
TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
INTERLOCK DEVICE EQUIPPED ☐		HIT/SKIP UNIT ☐	# OCCUPANTS ☐	
VEHICLE WEIGHT GVWR/GCWR ☐ 1 - <= 10K LBS. ☐ 2 - 10,001 - 26K LBS. ☐ 3 - >= 26K LBS.		HAZARDOUS MATERIAL ☐ MATERIAL RELEASED ☐ CLASS # ☐ PLACARD ID # ☐		
UNIT TYPE ☐ 1 - PASSENGER CAR ☐ 2 - PASSENGER VAN (MINIVAN) ☐ 3 - SPORT UTILITY VEHICLE ☐ 4 - PICK UP ☐ 5 - CARGO VAN ☐ 6 - MOTORCYCLE ☐ 7 - WHEELED ☐ 8 - MOTORCYCLE ☐ 9 - AUTOCYCLE ☐ 10 - MOPED OR MOTORIZED BICYCLE ☐ 11 - ALL TERRAIN VEHICLE (ATV/UTV) ☐ 12 - GOLF CART ☐ 13 - SNOWMOBILE ☐ 14 - SINGLE UNIT TRUCK ☐ 15 - SEMI-TRACTOR ☐ 16 - FARM EQUIPMENT ☐ 17 - MOTORHOME ☐ 18 - LIMO (LIVERY VEHICLE) ☐ 19 - BUS (16+ PASSENGERS) ☐ 20 - OTHER VEHICLE ☐ 21 - HEAVY EQUIPMENT ☐ 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE ☐ 23 - PEDESTRIAN/ SKATER ☐ 24 - WHEELCHAIR (ANY TYPE) ☐ 25 - OTHER NON-MOTORIST ☐ 26 - BICYCLE ☐ 27 - TRAIN ☐ 99 - UNKNOWN OR HIT/SKIP		# OF TRAILING UNITS ☐ 0		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? ☐ 1 - YES ☐ 2 - NO ☐ 9 - OTHER/UNKNOWN		AUTONOMOUS MODE LEVEL ☐ 0 - NO AUTOMATION ☐ 1 - DRIVER ASSISTANCE ☐ 2 - PARTIAL AUTOMATION ☐ 3 - CONDITIONAL AUTOMATION ☐ 4 - HIGH AUTOMATION ☐ 5 - FULL AUTOMATION ☐ 9 - UNKNOWN		
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 ☐ 10 - AMBULANCE ☐ 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 ☐ 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 ☐ 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 ☐ 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 ☐ 1 - NON-CONTACT ☐ 2 - NON-COLLISION ☐ 3 - STRIKING ☐ 4 - STRUCK ☐ 5 - BOTH STRIKING & STRUCK ☐ 9 - OTHER/UNKNOWN ☐ 10 - PRE-CRASH ACTIONS ☐ 11 - STRAIGHT AHEAD ☐ 12 - BACKING ☐ 13 - CHANGING LANES ☐ 14 - OVERTAKING/ PASSING ☐ 15 - MAKING RIGHT TURN ☐ 16 - MAKING LEFT TURN ☐ 17 - MAKING U-TURN ☐ 18 - ENTERING TRAFFIC FROM A PARKED POSITION ☐ 19 - LEAVING TRAFFIC LANE ☐ 20 - PARKED ☐ 21 - SLOWING OR STOPPED IN TRAFFIC ☐ 22 - DRIVERLESS ☐ 13 - NEGOTIATING A CURVE ☐ 14 - ENTERING OR CROSSING SPECIFIED LOCATION ☐ 15 - WALKING, RUNNING, JOGGING, PLAYING ☐ 16 - WORKING ☐ 17 - PUSHING VEHICLE ☐ 18 - APPROACHING OR LEAVING VEHICLE ☐ 19 - STANDING ☐ 20 - OTHER NON-MOTORIST ☐ 21 - STANDING OUTSIDE DISABLED VEHICLE ☐ 99 - OTHER/UNKNOWN		CONTRIBUTING CIRCUMSTANCES ☐ 1 - NONE ☐ 2 - FAILURE TO YIELD ☐ 3 - RAN RED LIGHT ☐ 4 - RAN STOP SIGN ☐ 5 - UNSAFE SPEED ☐ 6 - IMPROPER TURN ☐ 7 - LEFT OF CENTER ☐ 8 - FOLLOWING TOO CLOSE/ACDA ☐ 9 - IMPROPER LANE CHANGE ☐ 10 - IMPROPER PASSING ☐ 11 - DROVE OFF ROAD ☐ 12 - IMPROPER BACKING ☐ 13 - IMPROPER START FROM A PARKED POSITION ☐ 14 - STOPPED OR PARKED ILLEGALLY ☐ 15 - SWERVING TO AVOID ☐ 16 - WRONG WAY ☐ 17 - VISION OBSTRUCTION ☐ 18 - OPERATING DEFECTIVE EQUIPMENT ☐ 19 - LOAD SHIFTING/ FALLING/SPILLING ☐ 20 - IMPROPER CROSSING ☐ 21 - LYING IN ROADWAY ☐ 22 - NOT DISCERNIBLE ☐ 23 - OPENING DOOR INTO ROADWAY ☐ 99 - OTHER IMPROPER ACTION		
SEQUENCE OF EVENTS				
EVENTS				
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 - DOWNHILL 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				
COLLISION WITH FIXED OBJECT - STRUCK				
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 POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 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				
FIRST HARMFUL EVENT ☐ 1 MOST HARMFUL EVENT ☐ 1				

DAMAGE

DAMAGE SCALE

☐ 2 1 - NONE 3 - FUNCTIONAL DAMAGE
2 - MINOR DAMAGE 4 - DISABLING DAMAGE

9 - UNKNOWN

DAMAGED AREA(S)
INDICATE ALL THAT APPLY

INITIAL POINT OF CONTACT

☐ 4 0 - NO DAMAGE 14 - UNDERCARRIAGE
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
13 - TOP 99 - UNKNOWN

TRAFFIC

TRAFFICWAY FLOW

☐ 2 1 - ONE-WAY
2 - TWO-WAY

TRAFFIC CONTROL

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

OF THROUGH LANES ON ROAD

☐ 2

RAIL GRADE CROSSING

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

UNIT / NON-MOTORIST DIRECTION

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

UNIT SPEED

☐ 0

DETECTED SPEED

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

POSTED SPEED

☐ 10



LOCAL REPORT NUMBER*																
UNIT #		NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER							
1		GIBBONS, BRYAN P				05/21/1987		36	M							
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE										
11818 PIPPIN RD, CINCINNATI, OH 45231																
MOTORIST / NON-MOTORIST	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						
	5				4	☐	1	1	1	1						
	OL STATE	OPERATOR LICENSE NUMBER		OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER								
				335.13 a		Stopping After Accident Upon Prop		2300074756								
MOTORIST / NON-MOTORIST	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			1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG		1	STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4			
								1	1	.	1	1				
UNIT #		NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER							
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE										
MOTORIST / NON-MOTORIST	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								
MOTORIST / NON-MOTORIST	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)						
					☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG			STATUS	TYPE	VALUE	STATUS	TYPE	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										
MOTORIST / NON-MOTORIST	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								
MOTORIST / NON-MOTORIST	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)						
					☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG			STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4			
INJURIES		SEATING POSITION		AIR BAG		OL CLASS		OL RESTRICTION(S)		DRIVER DISTRACTION		TEST STATUS				
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 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 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 S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT						1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER				
SAFETY EQUIPMENT				TRAPPED		GENDER				CONDITION		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				
												DRUG TEST RESULT(S)				
												1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS				