

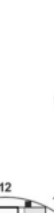













<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> PRIVATE PROPERTY		<input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER		LOCAL INFORMATION		IR23-000502				
REPORTING AGENCY NAME* Fairfield Police Department				NCIC* 00901		HIT/SKIP 1 - SOLVED 2 - UNSOLVED 1	NUMBER OF UNITS 3	UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN 1		
COUNTY* 09	LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP 1	LOCATION: CITY, VILLAGE, TOWNSHIP* Fairfield				CRASH DATE/TIME* 06/15/2023 02:25		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 Billy		ROAD TYPE CR	LATITUDE 39.341808		REFERENCE		
ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 28		ROAD TYPE	LONGITUDE -84.525320				
REFERENCE POINT 3 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 NUMBER OF APPROACHES		
DISTANCE FROM REFERENCE		DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS				ROADWAY <input type="checkbox"/> ROADWAY DIVIDED				
LOCATION OF FIRST HARMFUL EVENT 4 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP 9 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED USE PATHS OR TRAILS 13 - BIKE LANE 14 - TOLL BOOTH 99 - OTHER/UNKNOWN				MANNER OF CRASH COLLISION/IMPACT 6 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 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				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 WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		CONTOUR 1 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/UNKNOWN		CONDITIONS 1 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	SURFACE 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN	
LIGHT CONDITION 3 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER/UNKNOWN				WEATHER 1 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 On 06-15-23, at 2:25 a.m. Unit 1 was traveling west on Billy Cir when it went off the right side of the road, struck a pile of cement paver's and then struck Unit 2, causing Unit 2 to move and strike Unit 3. The driver of Unit 1 then left the area without leaving identifying information or notifying law enforcement. On 06-17-23, at 9:20 a.m. Unit 1 was located parked and unattended. Unit 1 had been reported stolen by Avis Rent-A-Car on 06-14-23. It also had a stolen license plate displayed on the back.					DIAGRAM <p>28</p> <p>Unit 3</p> <p>Unit 2</p> <p>Billy Cir (Private Drive)</p>					
CRASH REPORTED DATE/TIME 06/15/2023 11:14		DISPATCH DATE/TIME 06/15/2023 11:33		ARRIVAL DATE/TIME 06/15/2023 11:33		SCENE CLEARED DATE/TIME 06/15/2023 11:51		REPORT TAKEN BY <input type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST		
TOTAL TIME ROADWAY CLOSED 0	OTHER INVESTIGATION TIME 30	TOTAL MINUTES 48	OFFICER'S NAME* Setterstrom, Daniel		CHECKED BY OFFICER'S NAME* Sprague, Jeffrey		SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)			
			OFFICER'S BADGE NUMBER* 121		CHECKED BY OFFICER'S BADGE NUMBER* 84					

<b>UNIT #</b>	<b>OWNER NAME:</b> LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER )		<b>OWNER PHONE:</b> INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER	
<b>1</b>	<b>AVIS RENT A CAR</b>			
<b>OWNER ADDRESS:</b> STREET, CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER )				
5140 DIXIE HW, FAIRFIELD, OH 45014				
<b>COMMERCIAL CARRIER:</b> NAME, ADDRESS, CITY, STATE, ZIP			<b>COMMERCIAL CARRIER PHONE:</b> INCLUDE AREA CODE	
<b>LP STATE</b>	<b>LICENSE PLATE #</b>	<b>VEHICLE IDENTIFICATION #</b>		<b>VEHICLE YEAR</b>
		3N1CP5CV8LL541207		2020
<input type="checkbox"/> <b>INSURANCE VERIFIED</b>	<b>INSURANCE COMPANY</b>		<b>INSURANCE POLICY #</b>	<b>COLOR</b>
				Grey
<b>TYPE OF USE</b>			<b>US DOT #</b>	<b>TOWED BY:</b> COMPANY NAME
<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE			<b>VEHICLE WEIGHT GVWR/GCWR</b> <input type="checkbox"/> 1 - <= 10K LBS. <input type="checkbox"/> 2 - 10,001 - 26K LBS. <input type="checkbox"/> 3 - >= 26K LBS.	<b>HAZARDOUS MATERIAL</b> <input type="checkbox"/> MATERIAL RELEASED <b>CLASS #</b> <b>PLACARD ID #</b> <input type="checkbox"/> PLACARD <input type="checkbox"/>
<input type="checkbox"/> <b>INTERLOCK DEVICE EQUIPPED</b> <input checked="" type="checkbox"/> <b>HIT/SKIP UNIT</b> <b># OCCUPANTS</b> <input type="text" value="1"/>				
<b>UNIT TYPE</b>	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <input type="text" value="3"/> <ul style="list-style-type: none"> <li>1 - PASSENGER CAR</li> <li>2 - PASSENGER VAN (MINIVAN)</li> <li>3 - SPORT UTILITY VEHICLE</li> <li>4 - PICK UP</li> <li>5 - CARGO VAN</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>7 - MOTORCYCLE 2-WHEELED</li> <li>8 - MOTORCYCLE 3-WHEELED</li> <li>9 - AUTOCYCLE</li> <li>10 - MOPED OR MOTORIZED BICYCLE</li> <li>11 - ALL TERRAIN VEHICLE (ATV/UTV)</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>12 - GOLF CART</li> <li>13 - SNOWMOBILE</li> <li>14 - SINGLE UNIT TRUCK</li> <li>15 - SEMI-TRACTOR</li> <li>16 - FARM EQUIPMENT</li> <li>17 - MOTORHOME</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>18 - LIMO (LIVERY VEHICLE)</li> <li>19 - BUS (16+ PASSENGERS)</li> <li>20 - OTHER VEHICLE</li> <li>21 - HEAVY EQUIPMENT</li> <li>22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>23 - PEDESTRIAN/ SKATER</li> <li>24 - WHEELCHAIR (ANY TYPE)</li> <li>25 - OTHER NON-MOTORIST</li> <li>26 - BICYCLE</li> <li>27 - TRAIN</li> <li>28 - UNKNOWN OR HIT/SKIP</li> </ul> </div> </div>			
<b># OF TRAILING UNITS</b>	<input type="text" value="0"/>			
<b>9</b>	<b>WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?</b> 1 - YES 2 - NO 9 - OTHER/UNKNOWN		<b>AUTONOMOUS MODE LEVEL</b> <input type="text" value="9"/> 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN	
<b>99</b>	<b>SPECIAL FUNCTION</b> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>1 - NONE</li> <li>2 - TAXI</li> <li>3 - ELECTRONIC RIDE SHARING</li> <li>4 - SCHOOL TRANSPORT</li> <li>5 - BUS - TRANSIT /COMMUTER</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>6 - BUS - CHARTER/TOUR</li> <li>7 - BUS - INTERCITY</li> <li>8 - BUS - SHUTTLE</li> <li>9 - BUS - OTHER</li> <li>10 - AMBULANCE</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>11 - FIRE</li> <li>12 - MILITARY</li> <li>13 - POLICE</li> <li>14 - PUBLIC UTILITY</li> <li>15 - CONSTRUCTION EQUIPMENT</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>16 - FARM</li> <li>17 - MOWING</li> <li>18 - SNOW REMOVAL</li> <li>19 - TOWING</li> <li>20 - SAFETY SERVICE PATROL</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>21 - MAIL CARRIER</li> <li>99 - OTHER/UNKNOWN</li> </ul> </div> </div>			
<b>1</b>	<b>CARGO BODY TYPE</b> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>1 - NO CARGO BODY TYPE / NOT APPLICABLE</li> <li>2 - BUS</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE</li> <li>4 - LOGGING</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>5 - INTERMODAL CONTAINER CHASSIS</li> <li>6 - CARGO VAN/ ENCLOSED BOX</li> <li>7 - GRAIN/CHIPS/GRAVEL</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>8 - POLE</li> <li>9 - CARGO TANK</li> <li>10 - FLAT BED</li> <li>11 - DUMP</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>12 - CONCRETE MIXER</li> <li>13 - AUTO TRANSPORTER</li> <li>14 - GARBAGE/REFUSE</li> <li>99 - OTHER/UNKNOWN</li> </ul> </div> </div>			
<b>99</b>	<b>VEHICLE DEFECTS</b> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>1 - TURN SIGNALS</li> <li>2 - HEAD LAMPS</li> <li>3 - TAIL LAMPS</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>4 - BRAKES</li> <li>5 - STEERING</li> <li>6 - TIRE BLOWOUT</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>7 - WORN OR SLICK TIRES</li> <li>8 - TRAILER EQUIPMENT DEFECTIVE</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>9 - MOTOR TROUBLE</li> <li>10 - DISABLED FROM PRIOR ACCIDENT</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>99 - OTHER/UNKNOWN</li> </ul> </div> </div>			
<input type="checkbox"/>	<b>NON-MOTORIST LOCATION AT IMPACT</b> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>1 - INTERSECTION - MARKED CROSSWALK</li> <li>2 - INTERSECTION - UNMARKED CROSSWALK</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>3 - INTERSECTION - OTHER</li> <li>4 - MIDBLOCK - MARKED CROSSWALK</li> <li>5 - TRAVEL LANE - OTHER LOCATION</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>6 - BICYCLE LANE</li> <li>7 - SHOULDER/ ROADSIDE</li> <li>8 - SIDEWALK</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>9 - MEDIAN/CROSSING ISLAND</li> <li>10 - DRIVEWAY ACCESS</li> <li>11 - SHARED USE PATHS OR TRAILS</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>12 - FIRST RESPONDER AT INCIDENT SCENE</li> <li>99 - OTHER/UNKNOWN</li> </ul> </div> </div>			
<b>3</b>	<b>ACTION</b> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>1 - NON-CONTACT</li> <li>2 - NON-COLLISION</li> <li>3 - STRIKING</li> <li>4 - STRUCK</li> <li>5 - BOTH STRIKING &amp; STRUCK</li> <li>9 - OTHER/UNKNOWN</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>1 - STRAIGHT AHEAD</li> <li>2 - BACKING</li> <li>3 - CHANGING LANES</li> <li>4 - OVERTAKING/ PASSING</li> <li>5 - MAKING RIGHT TURN</li> <li>6 - MAKING LEFT TURN</li> <li>7 - MAKING U-TURN</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>8 - ENTERING TRAFFIC LANE</li> <li>9 - LEAVING TRAFFIC LANE</li> <li>10 - PARKED</li> <li>11 - SLOWING OR STOPPED IN TRAFFIC</li> <li>12 - DRIVERLESS</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>13 - NEGOTIATING A CURVE</li> <li>14 - ENTERING OR CROSSING SPECIFIED LOCATION</li> <li>15 - WALKING, RUNNING, JOGGING, PLAYING</li> <li>16 - WORKING</li> <li>17 - PUSHING VEHICLE</li> </ul> </div> <div style="width: 33%;"> <ul style="list-style-type: none"> <li>18 - APPROACHING OR LEAVING VEHICLE</li> <li>19 - STANDING</li> <li>20 - OTHER NON-MOTORIST</li> <li>21 - STANDING OUTSIDE DISABLED VEHICLE</li> <li>99 - OTHER/UNKNOWN</li> </ul> </div> </div>			
<b>11</b>	<b>CONTRIBUTING CIRCUMSTANCES&lt;/</b>			

DAMAGE SCALE	
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">9</div> <div style="display: flex; justify-content: space-between;"> <div> 1 - NONE 2 - MINOR DAMAGE </div> <div> 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE </div> </div> <div style="text-align: center; margin-top: 10px;">9 - UNKNOWN</div>	
DAMAGED AREA(S)	
INDICATE ALL THAT APPLY	
          <div style="display: flex; justify-content: space-around; margin-top: 20px;"> <div style="text-align: center;">  <div style="display: flex; justify-content: space-between; width: 100%;"> <div> <input type="checkbox"/> - NO DAMAGE [ 0 ]  <input type="checkbox"/> - TOP [ 13 ] </div> <div> <input type="checkbox"/> - UNDERCARRIAGE [ 14 ]  <input type="checkbox"/> - ALL AREAS [ 15 ] </div> </div> </div> <div style="text-align: center;">  </div> <div style="text-align: center;">  </div> <div style="text-align: center;">  </div> </div> <div style="text-align: center; margin-top: 10px;"> <input checked="" type="checkbox"/> - UNIT NOT AT SCENE [ 16 ] </div>	
INITIAL POINT OF CONTACT	
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">1</div> <div style="display: flex; justify-content: space-between;"> <div> 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP </div> <div> 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN </div> </div>	
TRAFFIC	
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <div style="text-align: center; background-color: #f2f2f2; padding: 5px; margin-bottom: 10px;">TRAFFICWAY FLOW</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">2</div> <div style="display: flex; justify-content: space-between;"> <div>1 - ONE-WAY</div> <div>2 - TWO-WAY</div> </div> </div> <div style="width: 48%;"> <div style="text-align: center; background-color: #f2f2f2; padding: 5px; margin-bottom: 10px;">TRAFFIC CONTROL</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">6</div> <div style="display: flex; justify-content: space-between;"> <div>1 - ROUNDABOUT</div> <div>2 - SIGNAL</div> <div>3 - FLASHER</div> <div>4 - STOP SIGN</div> <div>5 - YIELD SIGN</div> <div>6 - NO CONTROL</div> </div> </div> </div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <div style="text-align: center; background-color: #f2f2f2; padding: 5px; margin-bottom: 10px;"># OF THROUGH LANES ON ROAD</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">2</div> </div> <div style="width: 48%;"> <div style="text-align: center; background-color: #f2f2f2; padding: 5px; margin-bottom: 10px;">RAIL GRADE CROSSING</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">1</div> <div style="display: flex; justify-content: space-between;"> <div>1 - NOT INVOLVED</div> <div>2 - INVOLVED-ACTIVE CROSSING</div> <div>3 - INVOLVED-PASSIVE CROSSING</div> </div> </div> </div>
UNIT / NON-MOTORIST DIRECTION	
<div style="display: flex; justify-content: space-between;"> <div>FROM</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">3</div> <div>TO</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">4</div> </div>	<div style="display: flex; justify-content: space-between;"> <div> 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST </div> <div> 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER/UNKNOWN </div> </div>
UNIT SPEED	
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">10</div>	<div style="text-align: center; background-color: #f2f2f2; padding: 5px; margin-bottom: 10px;">DETECTED SPEED</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">1</div> <div style="display: flex; justify-content: space-between;"> <div>1 - STATED/ESTIMATED SPEED</div> <div>2 - CALCULATED/EDR</div> <div>3 - UNDETERMINED</div> </div>
POSTED SPEED	
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px; text-align: center;">10</div>	

IR23-000502

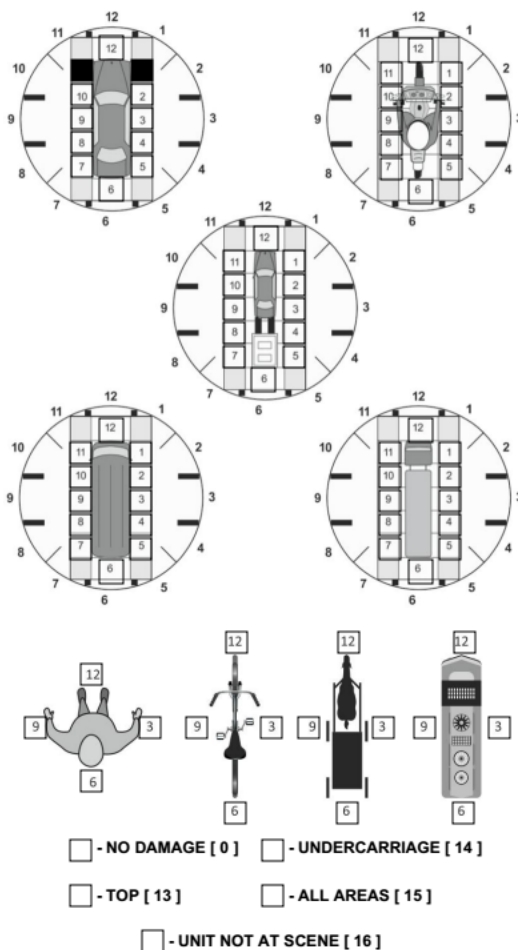
UNIT # 2	OWNER NAME: LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER) HERNANDEZ, RAUL ANTHUAN MENDEZ	OWNER PHONE: INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER
OWNER ADDRESS: STREET, CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER) 28 BILLY CIR, FAIRFIELD, OH 45014		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
LP STATE OH	LICENSE PLATE # HST1838	VEHICLE IDENTIFICATION # JHMBB6249WC003510
VEHICLE YEAR 1998		VEHICLE MAKE Honda
INSURANCE VERIFIED	INSURANCE COMPANY ALLSTATE INSURANCE	INSURANCE POLICY # 980472128
COLOR White		VEHICLE MODEL Prelude
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		
US DOT #		
TOWED BY: COMPANY NAME		
HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL CLASS # <input type="checkbox"/> PLACARD ID #		
HAZARDOUS MATERIAL <input type="checkbox"/> RELEASED <input type="checkbox"/> PLACARD		
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 OCCURED? 1 - YES 2 - NO 9 - OTHER/UNKNOWN 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		
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FIRST HARMFUL EVENT 1		
MOST HARMFUL EVENT 1		

## DAMAGE

## DAMAGE SCALE

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

9 - UNKNOWN

DAMAGED AREA(S)  
INDICATE ALL THAT APPLY

## INITIAL POINT OF CONTACT

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

## TRAFFIC

TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 6 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL
# OF THROUGH LANES ON ROAD 2	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION FROM 1 TO 2 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	



IR23-000502

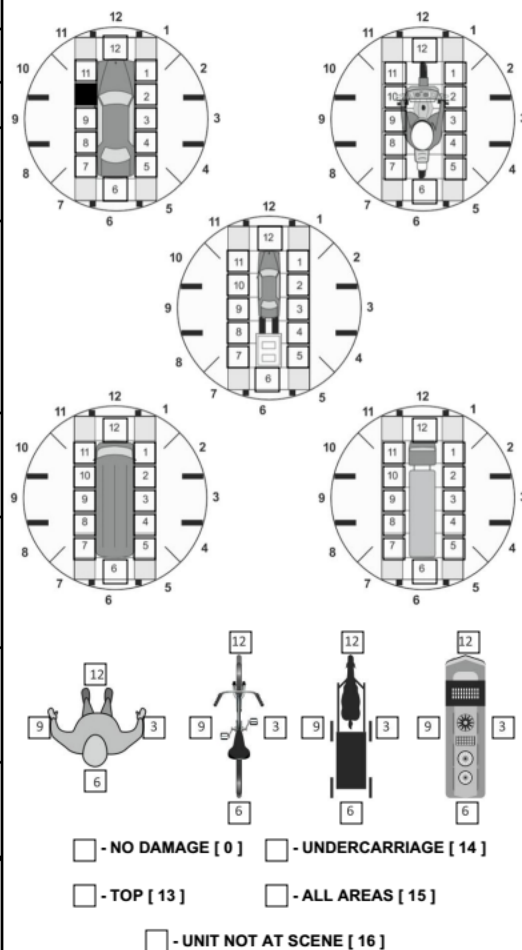
UNIT # 3	OWNER NAME: LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER) HERNANDEZ, RAUL ANTHUAN MENDEZ	OWNER PHONE: INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER
OWNER ADDRESS: STREET, CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER) 28 BILLY CIR, FAIRFIELD, OH 45014		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
LP STATE OH	LICENSE PLATE # HEP4685	VEHICLE IDENTIFICATION # 1J8GW68J14C241110
VEHICLE YEAR 2004	VEHICLE MAKE Jeep	
INSURANCE VERIFIED	INSURANCE COMPANY ALLSTATE INSURANCE	INSURANCE POLICY # 980472128
COLOR Red	VEHICLE MODEL Grand Chero	
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		
US DOT #		
HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL CLASS # <input type="checkbox"/> PLACARD ID #		
TOWED BY: COMPANY NAME		
VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.		
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT <input type="checkbox"/>		
# OCCUPANTS <input type="checkbox"/>		
UNIT TYPE 3 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 0 - # OF TRAILING UNITS		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 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		
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FIRST HARMFUL EVENT 1 - MOST HARMFUL EVENT		

## DAMAGE

## DAMAGE SCALE

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

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DAMAGED AREA(S)  
INDICATE ALL THAT APPLY

## INITIAL POINT OF CONTACT

10 0 - NO DAMAGE 14 - UNDERCARRIAGE  
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
13 - TOP 99 - UNKNOWN

## TRAFFIC

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POSTED SPEED 10	

LOCAL REPORT NUMBER*																	
UNIT #		NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER								
1		DRIVER, UNKNOWN				01/01/1950		73	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	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED						
5						99		1	9	1	1						
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)						
					9		ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/>	9	STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4			
							OTHER DRUG <input type="checkbox"/>		1	1	.	1	1				
UNIT #		NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER								
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE											
INJURIES		INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED						
OL STATE		OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER							
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							ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/>										
							OTHER DRUG <input type="checkbox"/>										
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						
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							ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/>										
							OTHER DRUG <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) 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						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						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					
						GENDER						DRUG TEST RESULT(S)					
						F - FEMALE M - MALE U - OTHER / UNKNOWN						1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS					