



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

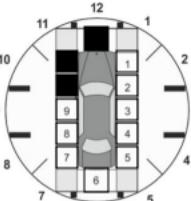
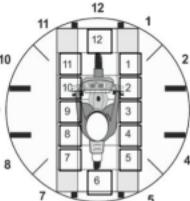
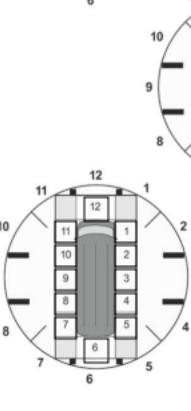
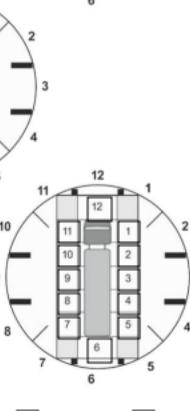
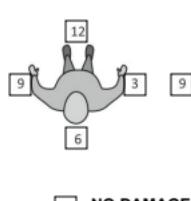
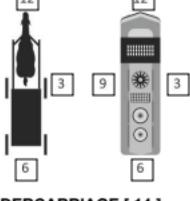
TRAFFIC CRASH REPORT						DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT		
<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION						
REPORTING AGENCY NAME* Fairfield Police Department NCIC* 00901								
REFERENCE LOCATION	COUNTY* 09	LOCALITY* 1 1 - CITY 2 - VILLAGE 3 - TOWNSHIP	LOCATION: CITY, VILLAGE, TOWNSHIP* Fairfield				CRASH DATE/TIME* 09/29/2023 19:50	
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME Dixie	ROAD TYPE HW	LATITUDE 39.306583		CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY
ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 7311	ROAD TYPE	LONGITUDE -84.486672			
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 1 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP			MANNER OF CRASH COLLISION/IMPACT 7 1 - NOT COLLISION 2 - BETWEEN 3 - TWO MOTOR VEHICLES IN TRANSPORT 4 - REAR-END 5 - HEAD-ON 6 - BACKING 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER/UNKNOWN			DIRECTION OF TRAVEL 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN (< 4 FEET) 2 - DIVIDED FLUSH MEDIAN (> 4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISE MEDIAN (ANY TYPE) 9 - OTHER/UNKNOWN	
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE		WORK ZONE TYPE 1 - LANE CLOSURE 2 - LANE SHFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER	LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE 1ST WORK ZONE 2 - ADVANCE WARNING SIGN 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	CONTOUR 1	CONDITIONS 1	SURFACE 2		
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	1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/ UNKNOWN	1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/ UNKNOWN			
NARRATIVE On September 29, 2023, at 7:50 p.m., unit #2 was traveling southeast on Dixie Highway near 7311 Dixie Highway. Unit #1 attempted to go around a disabled van and struck #2 in the left front corner. Unit #2 then lost control of their vehicle, went off the roadway to the right, struck a ditch then came to a rest after striking a street sign. Unit #1 fled the scene prior to police arrival.						DIAGRAM 		
CRASH REPORTED DATE/TIME 09/29/2023 19:50		DISPATCH DATE/TIME 09/29/2023 19:53		ARRIVAL DATE/TIME 09/29/2023 20:17		SCENE CLEARED DATE/TIME 09/29/2023 20:51		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPD)
TOTAL TIME ROADWAY CLOSED 25	OTHER INVESTIGATION TIME 0	TOTAL MINUTES 58	OFFICER'S NAME* Spradling, Nicholas		CHECKED BY OFFICER'S NAME* Miller, Matthew			
			OFFICER'S BADGE NUMBER* 175		CHECKED BY OFFICER'S BADGE NUMBER* 141			

IR23-002807

OWNER	UNIT # OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER)			OWNER PHONE: INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER		
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER)					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP			COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
LP STATE	LICENSE PLATE # UNKNOWN	VEHICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #		COLOR Silver	VEHICLE MODEL	
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME			
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT # OCCUPANTS 1		VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED CLASS # <input type="checkbox"/> PLACARD ID # <input type="checkbox"/> PLACARD			
UNIT TYPE 99	1 - PASSENGER CAR 7 - MOTORCYCLE 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN/ SKATER 2 - PASSENGER VAN (MINIVAN) 2 - WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 3 - SPORT UTILITY VEHICLE 3 - WHEELED 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON- 4 - PICK UP 10 - MOPED OR 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT MOTORIST 5 - CARGO VAN MOTORIZED BICYCLE 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN 26 - BICYCLE 11 - ALL TERRAIN VEHICLE (ATV/UTV) 17 - MOTORHOME 27 - TRAIN 12 - VEHICLE (ATV/UTV)					
	0 # OF TRAILING UNITS	18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN/ SKATER 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 20 - OTHER VEHICLE 25 - OTHER NON- 21 - HEAVY EQUIPMENT MOTORIST 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP				
2 WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION				
	99 SPECIAL FUNCTION	1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER/UNKNOWN 3 - ELECTRONIC RIDE 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL SHARING 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING 4 - SCHOOL TRANSPORT 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL				
1 CARGO BODY TYPE		1 - NO CARGO BODY 3 - VEHICLE TOWING 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER TYPE / NOT APPLICABLE ANOTHER MOTOR VEHICLE 9 - CARGO TANK 13 - AUTO TRANSPORTER 2 - BUS 4 - LOGGING 6 - CARGO VAN/ ENCLOSED BOX 10 - FLAT BED 14 - GARBAGE/REFUSE 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99 - OTHER/UNKNOWN				
	99 VEHICLE DEFECTS	1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER/UNKNOWN 2 - HEAD LAMPS 5 - STEERING 6 - TIRE BLOWOUT 10 - DISABLED FROM PRIOR ACCIDENT 3 - TAIL LAMPS 8 - TRAILER EQUIPMENT DEFECTIVE				
NON-MOTORIST LOCATION AT IMPACT		1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING 12 - FIRST RESPONDER 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER/ ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER/UNKNOWN 5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS				
	3 ACTION	1 - NON-CONTACT 1 - STRAIGHT AHEAD 8 - ENTERING TRAFFIC 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 9 - LEAVING TRAFFIC 14 - ENTERING OR CROSSING 19 - STANDING 3 - STRIKING 3 - CHANGING LANES 10 - PARKED 15 - SPECIFIED LOCATION 20 - OTHER NON- 4 - STRUCK 4 - OVERTAKING/ PASSING 11 - SLOWING OR STOPPED IN MOTORIST 5 - BOTH STRIKING PRE-CRASHES & STRUCK ACTIONS 6 - MAKING LEFT TURN 12 - DRIVERLESS 16 - WORKING 21 - STANDING OUTSIDE 9 - OTHER/UNKNOWN 7 - MAKING U-TURN 13 - IMPROPER START FROM A PARKED 17 - PUSHING VEHICLE 14 - OPERATING DEFECTIVE 18 - SWERVING TO 19 - LOAD SHIFTING/ FALLING/SPILLING 15 - SWERVING TO PARKED ILLEGALLY 20 - IMPROPER 99 - OTHER/UNKNOWN 16 - WORKING CROSSING				
10 CONTRIBUTING CIRCUMSTANCES		1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED 17 - VISION OBSTRUCTION 21 - LYING IN 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE/ACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO 19 - LOAD SHIFTING/ FALLING/SPILLING 4 - RAN STOP SIGN 10 - IMPROPER PASSING 20 - IMPROPER 99 - OTHER IMPROPER 5 - UNSAFE SPEED 11 - DROVE OFF ROAD 12 - IMPROPER BACKING 16 - WRONG WAY ACTION				
	EVENT(S)	SEQUENCE OF EVENTS				
EVENTS						
1 1	1 - OVERTURN/ ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE ANIMAL - FARM MAINTENANCE EQUIPMENT	22 - WORK ZONE MAINTENANCE EQUIPMENT	
2 2	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	17 - ANIMAL - DEER	18 - ANIMAL - OTHER	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE	
3 3	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	12 - DOWNTOWN RUNAWAY	20 - MOTOR VEHICLE IN TRANSPORT	24 - OTHER MOBILE OBJECT	
4 4	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	13 - OTHER NON-COLLISION	21 - PARKED MOTOR VEHICLE		
5 5	5 - CARGO/EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN	15 - PEDALCYCLE		
6 6	25 - IMPACT ATTENUATOR/ CRASH CUSHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT	
7 7	26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN	44 - DITCH	51 - WALL	
8 8	27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	39 - LIGHT/LUMINARIES SUPPORT	45 - EMBANKMENT	52 - BUILDING	
9 9	28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE	46 - FENCE	53 - TUNNEL	
10 10	29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX	54 - OTHER FIXED OBJECT	
11 11	30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	48 - TREE	99 - OTHER/UNKNOWN	
12 12	FIRST HARMFUL EVENT	1 MOST HARMFUL EVENT				
COLLISION WITH FIXED OBJECT - STRUCK						
13 13	25 - IMPACT ATTENUATOR/ CRASH CUSHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT	
14 14	26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN	44 - DITCH	51 - WALL	
15 15	27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	39 - LIGHT/LUMINARIES SUPPORT	45 - EMBANKMENT	52 - BUILDING	
16 16	28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE	46 - FENCE	53 - TUNNEL	
17 17	29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX	54 - OTHER FIXED OBJECT	
18 18	30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	48 - TREE	99 - OTHER/UNKNOWN	
19 19	FIRST HARMFUL EVENT	1 MOST HARMFUL EVENT				
DAMAGE						
DAMAGE SCALE						
20 9	1 - NONE	3 - FUNCTIONAL DAMAGE				
21 2	2 - MINOR DAMAGE	4 - DISABLING DAMAGE				
22 9	9 - UNKNOWN					
DAMAGED AREA(S) INDICATE ALL THAT APPLY						
23 1						
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136 114						
137 115						
138 116	<img alt="Diagram of a vehicle with numbered points 1-12 for					

IR23-002807

UNIT # 2	OWNER NAME: LAST, FIRST, MIDDLE (<input checked="" type="checkbox"/> SAME AS DRIVER) EMMANUEL, RICH		OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER		
OWNER ADDRESS: STREET, CITY, STATE, ZIP (<input checked="" type="checkbox"/> SAME AS DRIVER) 1219 W Galbraith Road, CINCINNATI, OH 45231					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
LP STATE OH	LICENSE PLATE # JXQ4984	VEHICLE IDENTIFICATION # JH4DC54826S021501	VEHICLE YEAR 2006		
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY FOUNDER'S INSURANCE	INSURANCE POLICY # ITFR167423	COLOR Red		
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 3	VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.		
1 UNIT TYPE	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
0 # 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
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 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS	12 - FIRST RESPONDER ISLAND AT INCIDENT SCENE 99 - OTHER/UNKNOWN
4 ACTION	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING PRE-CRASHES 6 - MAKING RIGHT TURN & STRUCK ACTIONS 9 - OTHER/UNKNOWN	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/ PASSING 5 - MAKING LEFT TURN 7 - MAKING U-TURN	8 - ENTERING TRAFFIC 9 - LEAVING TRAFFIC 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A LANE 14 - ENTERING OR CROSSING 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING CROSSING 20 - OTHER NON- SPECIFIED LOCATION 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - OTHER/UNKNOWN
1 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 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 20	1 - OVERTURN/ ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL 12 - DOWNTOWN RUNAWAY 13 - OTHER NON- COLLISION	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 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
2 8	4 - JACKKNIFE 5 - CARGO/EQUIPMENT LOSS OR SHIFT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN 39 - LIGHT/LUMINARIES 40 - SUPPORT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE
3 44	34 - MEDIAN GUARDRAIL BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	49 - FIRE HYDRANT	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT	
4 37	25 - IMPACT ATTENUATOR/ CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT	
5 27	26 - BRIDGE OVERHEAD STRUCTURE	34 - MEDIAN GUARDRAIL BARRIER	49 - FIRE HYDRANT	99 - OTHER/UNKNOWN	
6 28	27 - BRIDGE PIER OR ABUTMENT	35 - MEDIAN CONCRETE BARRIER			
1 1	28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER			
FIRST HARMFUL EVENT		MOST HARMFUL EVENT			

DAMAGE		
DAMAGE SCALE		
4	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		
11	0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP	14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
TRAFFIC		
2	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
5	# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
6	FROM 6	TO 7
UNIT / NON-MOTORIST DIRECTION		
1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER/UNKNOWN		
UNIT SPEED		DETECTED SPEED
40		1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED
40		POSTED SPEED



MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*

IR23-002807

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH			AGE	GENDER												
	1	DRIVER, UNKNOWN										U												
ADDRESS: STREET, CITY, STATE, ZIP													CONTACT PHONE - INCLUDE AREA CODE											
INJURIES		INJURED TAKEN BY	EMS AGENCY(NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED	99	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED										
OL STATE		OPERATOR LICENSE NUMBER		OFFENSE CHARGED			LOCAL CODE		OFFENSE DESCRIPTION			CITATION NUMBER												
OL CLASS		ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	9	ALCOHOL / DRUG SUSPECTED		CONDITION	9	ALCOHOL TEST			DRUG TEST(S)										
							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA			STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4								
							<input type="checkbox"/> OTHER DRUG			1	1	.	1	1										
UNIT # NAME: LAST, FIRST, MIDDLE													DATE OF BIRTH			AGE	GENDER							
2 EMMANUEL, RICH													01/01/1984			39	M							
ADDRESS: STREET, CITY, STATE, ZIP													CONTACT PHONE - INCLUDE AREA CODE											
1219 W Galbraith Road, CINCINNATI, OH 45231																								
INJURIES		INJURED TAKEN BY	EMS AGENCY(NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED	4	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	1	ALCOHOL / DRUG SUSPECTED		CONDITION	1	ALCOHOL TEST			DRUG TEST(S)										
							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA			STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4								
							<input type="checkbox"/> OTHER DRUG			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												
OL CLASS		ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	1	ALCOHOL / DRUG SUSPECTED		CONDITION		ALCOHOL TEST			DRUG TEST(S)										
							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA			STATUS	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4								
							<input type="checkbox"/> OTHER DRUG			1	1	.	1	1										
INJURIES													SEATING POSITION			AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION			TEST STATUS		
1 - FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		1 - NOT DEPLOYED		1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED	1 - NONE GIVEN															
2 - SUSPECTED SERIOUS INJURY		2 - FRONT - MIDDLE		2 - DEPLOYED FRONT		2 - CLASS B	2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC	2 - TEST REFUSED															
3 - SUSPECTED MINOR INJURY		3 - FRONT - RIGHT SIDE		3 - DEPLOYED SIDE		3 - CLASS C	3 - CORRECTIVE LENSES	3 - TEST GIVEN, CONTAMINATED	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE															
4 - POSSIBLE INJURY		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		4 - DEPLOYED BOTH FRONT / SIDE		4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	4 - EXCEPT CLASS A BUS	4 - TEST GIVEN, RESULTS KNOWN															
5 - NO APPARENT INJURY		5 - SECOND - MIDDLE		5 - NOT APPLICABLE		5 - M/C MOPED ONLY	5 - EXCEPT CLASS A & CLASS B BUS	5 - EXCEPT CLASS B BUS	5 - TEST GIVEN, RESULTS UNKNOWN															
INJURED TAKEN BY		6 - SECOND - RIGHT SIDE		9 - DEPLOYMENT UNKNOWN		6 - NO VALID OL	7 - EXCEPT TRACTOR-TRAILER	7 - EXCEPT TRACTOR-TRAILER																
1 - NOT TRANSPORTED / TREATED AT SCENE		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		8 - THIRD - MIDDLE		8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - TALKING ON HAND-HELD COMMUNICATION DEVICE	1 - TEST REFUSED															
2 - EMS		9 - THIRD - RIGHT		9 - THIRD - RIGHT		9 - LEARNER'S PERMIT RESTRICTIONS	9 - LEARNER'S PERMIT RESTRICTIONS	9 - TALKING ON HAND-HELD COMMUNICATION DEVICE	2 - TEST GIVEN, RESULTS KNOWN															
3 - POLICE		10 - SLEEPER SECTION OF TRUCK CAB		10 - SLEEPER SECTION OF TRUCK CAB		10 - LIMITED TO DAYLIGHT ONLY	10 - LIMITED TO DAYLIGHT ONLY	10 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	3 - TEST GIVEN, RESULTS UNKNOWN															
9 - OTHER / UNKNOWN		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11 - LIMITED TO EMPLOYMENT	11 - LIMITED TO EMPLOYMENT	11 - PASSENGER	4 - TEST GIVEN, RESULTS UNKNOWN															
SAFETY EQUIPMENT		12 - PASSENGER IN UNENCLOSED CARGO AREA		12 - PASSENGER IN UNENCLOSED CARGO AREA		12 - LIMITED - OTHER	12 - LIMITED - OTHER	12 - OTHER DISTRACTION INSIDE THE VEHICLE	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE															
1 - NONE USED		13 - TRAILING UNIT		13 - TRAILING UNIT		13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	6 - PASSENGER															
2 - SHOULDER BELT ONLY USED		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14 - MILITARY VEHICLES ONLY	14 - MILITARY VEHICLES ONLY	14 - MILITARY VEHICLES ONLY	7 - OTHER DISTRACTION OUTSIDE THE VEHICLE															
3 - LAP BELT ONLY USED		15 - NON-MOTORIST		15 - NON-MOTORIST		15 - MOTOR VEHICLES WITHOUT AIR BRAKES	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE															
4 - SHOULDER & LAP BELT USED		99 - OTHER / UNKNOWN		99 - OTHER / UNKNOWN		16 - OUTSIDE MIRROR	16 - OUTSIDE MIRROR	16 - OUTSIDE MIRROR	9 - OTHER / UNKNOWN															
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING						17 - PROSTHETIC AID	17 - PROSTHETIC AID	17 - PROSTHETIC AID																
6 - CHILD RESTRAINT SYSTEM - REAR FACING						18 - OTHER	18 - OTHER	18 - OTHER																
7 - BOOSTER SEAT						CONDITION			TEST STATUS															
8 - HELMET USED						1 - APPARENTLY NORMAL			1 - TEST REFUSED															
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						2 - PHYSICAL IMPAIRMENT			2 - TEST GIVEN, RESULTS KNOWN															
10 - REFLECTIVE CLOTHING						3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)			3 - TEST GIVEN, RESULTS KNOWN															
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						4 - ILLNESS			4 - TEST GIVEN, RESULTS KNOWN															
99 - OTHER / UNKNOWN						5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			5 - TEST GIVEN, RESULTS KNOWN															
						6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL			6 - TEST GIVEN, RESULTS KNOWN															
						7 - OTHER			7 - TEST GIVEN, RESULTS KNOWN															
						8 - NEGATIVE RESULTS			8 - TEST GIVEN, RESULTS KNOWN															
INJURIES													SEATING POSITION			AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION			TEST STATUS		
INJURED TAKEN BY		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		1 - NOT DEPLOYED		1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED	1 - NONE GIVEN															
OL STATE		2 - FRONT - MIDDLE		2 - DEPLOYED FRONT		2 - CLASS B	2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC	2 - TEST REFUSED															
OL CLASS		3 - FRONT - RIGHT SIDE		3 - DEPLOYED SIDE		3 - CLASS C	3 - CORRECTIVE LENSES	3 - TEST GIVEN, CONTAMINATED	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE															
		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		4 - DEPLOYED BOTH FRONT / SIDE		4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	4 - EXCEPT CLASS A BUS	4 - TEST GIVEN, RESULTS KNOWN															
		5 - SECOND - MIDDLE		5 - NOT APPLICABLE		5 - M/C MOPED ONLY	5 - EXCEPT CLASS A & CLASS B BUS	5 - EXCEPT CLASS B BUS	5 - TEST GIVEN, RESULTS UNKNOWN															
		6 - SECOND - RIGHT SIDE		9 - DEPLOYMENT UNKNOWN		6 - NO VALID OL	7 - EXCEPT TRACTOR-TRAILER	7 - EXCEPT TRACTOR-TRAILER																
INJURED TAKEN BY		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		8 - THIRD - MIDDLE		8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - TALKING ON HAND-HELD COMMUNICATION DEVICE	1 - TEST REFUSED															
OL STATE		9 - THIRD - RIGHT		9 - THIRD - RIGHT		9 - LEARNER'S PERMIT RESTRICTIONS	9 - LEARNER'S PERMIT RESTRICTIONS	9 - TALKING ON HAND-HELD COMMUNICATION DEVICE	2 - TEST GIVEN, RESULTS KNOWN															
OL CLASS		10 - SLEEPER SECTION OF TRUCK CAB		10 - SLEEPER SECTION OF TRUCK CAB		10 - LIMITED TO DAYLIGHT ONLY	10 - LIMITED TO DAYLIGHT ONLY	10 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	3 - TEST GIVEN, RESULTS UNKNOWN															
		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11 - LIMITED TO EMPLOYMENT	11 - LIMITED TO EMPLOYMENT	11 - PASSENGER	4 - TEST GIVEN, RESULTS UNKNOWN															
SAFETY EQUIPMENT		12 - PASSENGER IN UNENCLOSED CARGO AREA		12 - PASSENGER IN UNENCLOSED CARGO AREA		12 - LIMITED - OTHER	12 - LIMITED - OTHER	12 - OTHER DISTRACTION INSIDE THE VEHICLE	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE															
1 - NONE USED		13 - TRAILING UNIT		13 - TRAILING UNIT		13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	6 - PASSENGER															
2 - SHOULDER BELT ONLY USED		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14 - MILITARY VEHICLES ONLY	14 - MILITARY VEHICLES ONLY	14 - MILITARY VEHICLES ONLY	7 - OTHER DISTRACTION OUTSIDE THE VEHICLE															
3 - LAP BELT ONLY USED		15 - NON-MOTORIST		15 - NON-MOTORIST		15 - MOTOR VEHICLES WITHOUT AIR BRAKES	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE															
4 - SHOULDER & LAP BELT USED		99 - OTHER / UNKNOWN		99 - OTHER / UNKNOWN		16 - OUTSIDE MIRROR	16 - OUTSIDE MIRROR	16 - OUTSIDE MIRROR	9 - OTHER / UNKNOWN															
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING						17 - PROSTHETIC AID	17 - PROSTHETIC AID	17 - PROSTHETIC AID																
6 - CHILD RESTRAINT SYSTEM - REAR FACING						18 - OTHER	18 - OTHER	18 - OTHER																
7 - BOOSTER SEAT						CONDITION			TEST STATUS															
8 - HELMET USED						1 - APPARENTLY NORMAL			1 - TEST REFUSED															
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						2 - PHYSICAL IMPAIRMENT			2 - TEST GIVEN, RESULTS KNOWN															
10 - REFLECTIVE CLOTHING						3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)			3 - TEST GIVEN, RESULTS KNOWN															
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						4 - ILLNESS			4 - TEST GIVEN, RESULTS KNOWN															
99 - OTHER / UNKNOWN						5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			5 - TEST GIVEN, RESULTS KNOWN															
						6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL			6 - TEST GIVEN, RESULTS KNOWN															
						7 - OTHER			7 - TEST GIVEN, RESULTS KNOWN															
						8 - NEGATIVE RESULTS			8 - TEST GIVEN, RESULTS KNOWN															
INJURIES													SEATING POSITION			AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION			TEST STATUS		
INJURED TAKEN BY		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		1 - NOT DEPLOYED		1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED	1 - NONE GIVEN															
OL STATE		2 - FRONT - MIDDLE		2 - DEPLOYED FRONT		2 - CLASS B	2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC	2 - TEST REFUSED															
OL CLASS		3 - FRONT - RIGHT SIDE		3 - DEPLOYED SIDE		3 - CLASS C	3 - CORRECTIVE LENSES	3 - TEST GIVEN, CONTAMINATED	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE															
		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		4 - DEPLOYED BOTH FRONT / SIDE		4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	4 - EXCEPT CLASS A BUS	4 - TEST GIVEN, RESULTS KNOWN															
		5 - SECOND - MIDDLE		5 - NOT APPLICABLE		5 - M/C MOPED ONLY	5 - EXCEPT CLASS A & CLASS B BUS	5 - EXCEPT CLASS B BUS	5 - TEST GIVEN, RESULTS UNKNOWN															
		6 - SECOND - RIGHT SIDE		9 - DEPLOYMENT UNKNOWN		6 - NO VALID OL	7 - EXCEPT TRACTOR-TRAILER	7 - EXCEPT TRACTOR-TRAILER																
INJURED TAKEN BY		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		8 - THIRD - MIDDLE		8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - TALKING ON HAND-HELD COMMUNICATION DEVICE	1 - TEST REFUSED															
OL STATE		9 - THIRD - RIGHT		9 - THIRD - RIGHT		9 - LEARNER'S PERMIT RESTRICTIONS	9 - LEARNER'S PERMIT RESTRICTIONS	9 - TALKING ON HAND-HELD COMMUNICATION DEVICE	2 - TEST GIVEN, RESULTS KNOWN															
OL CLASS		10 - SLEEPER SECTION OF TRUCK CAB		10 - SLEEPER SECTION OF TRUCK CAB		10 - LIMITED TO DAYLIGHT ONLY	10 - LIMITED TO DAYLIGHT ONLY	10 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	3 - TEST GIVEN, RESULTS UNKNOWN															
		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11 - LIMITED TO EMPLOYMENT	11 - LIMITED TO EMPLOYMENT	11 - PASSENGER	4 - TEST GIVEN, RESULTS UNKNOWN															
SAFETY EQUIPMENT		12 - PASSENGER IN UNENCLOSED CARGO AREA		12 - PASSENGER IN UNENCLOSED CARGO AREA		12 - LIMITED - OTHER	12 - LIMITED - OTHER	12 - OTHER DISTRACTION INSIDE THE VEHICLE	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE															
1 - NONE USED		13 - TRAILING UNIT		13 - TRAILING UNIT		13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	6 - PASSENGER															
2 - SHOULDER BELT ONLY USED		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14 - MILITARY VEHICLES ONLY	14 - MILITARY VEHICLES ONLY	14 - MILITARY VEHICLES ONLY	7 - OTHER DISTRACTION OUTSIDE THE VEHICLE															
3 - LAP BELT ONLY USED		15 - NON-MOTORIST		15 - NON-MOTORIST		15 - MOTOR VEHICLES WITHOUT AIR BRAKES	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE															
4 - SHOULDER & LAP BELT USED		99 - OTHER / UNKNOWN		99 - OTHER / UNKNOWN		16 - OUTSIDE MIRROR	16 - OUTSIDE MIRROR	16 - OUTSIDE MIRROR	9 - OTHER / UNKNOWN															
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING						17 - PROSTHETIC AID	17 - PROSTHETIC AID	17 - PROSTHETIC AID																
6 - CHILD RESTRAINT SYSTEM - REAR FACING						18 - OTHER	18 - OTHER	18 - OTHER																
7 - BOOSTER SEAT						CONDITION			TEST STATUS															
8 - HELMET USED						1 - APPARENTLY NORMAL			1 - TEST REFUSED															
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						2 - PHYSICAL IMPAIRMENT			2 - TEST GIVEN, RESULTS KNOWN															
10 - REFLECTIVE CLOTHING						3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)			3 - TEST GIVEN, RESULTS KNOWN															
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						4 - ILLNESS			4 - TEST GIVEN, RESULTS KNOWN															
99 - OTHER / UNKNOWN						5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			5 - TEST GIVEN, RESULTS KNOWN															
						6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL			6 - TEST GIVEN, RESULTS KNOWN															
						7 - OTHER			7 - TEST GIVEN, RESULTS KNOWN															
						8 - NEGATIVE RESULTS			8 - TEST GIVEN, RESULTS KNOWN															
INJURIES													SEATING POSITION			AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION			TEST STATUS		
INJURED TAKEN BY		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		1 - NOT DEPLOYED		1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED	1 - NONE GIVEN															
OL STATE		2 - FRONT - MIDDLE		2 - DEPLOYED FRONT		2 - CLASS B	2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC	2 - TEST REFUSED															
OL CLASS		3 - FRONT - RIGHT SIDE		3 - DEPLOYED SIDE		3 - CLASS C	3 - CORRECTIVE LENSES	3 - TEST GIVEN, CONTAMINATED	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE															
		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		4 - DEPLOYED BOTH FRONT / SIDE		4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	4 - EXCEPT CLASS A BUS	4 - TEST GIVEN, RESULTS KNOWN															
		5 - SECOND - MIDDLE		5 - NOT APPLICABLE		5 - M/C MOPED ONLY	5 - EXCEPT CLASS A & CLASS B BUS	5 - EXCEPT CLASS B BUS	5 - TEST GIVEN, RESULTS UNKNOWN															
		6 - SECOND - RIGHT SIDE		9 - DEPLOYMENT UNKNOWN		6 - NO VALID OL	7 - EXCEPT TRACTOR-TRAILER	7 - EXCEPT TRACTOR-TRAILER																
INJURED TAKEN BY		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		8 - THIRD - MIDDLE		8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - TALKING ON HAND-HELD COMMUNICATION DEVICE	1 - TEST REFUSED															
OL STATE		9 - THIRD - RIGHT		9 - THIRD - RIGHT		9 - LEARNER'S PERMIT RESTRICTIONS	9 - LEARNER'S PERMIT RESTRICTIONS	9 - TALKING ON HAND-HELD COMMUNICATION DEVICE	2 - TEST GIVEN, RESULTS KNOWN															
OL CLASS		10 - SLEEPER SECTION OF TRUCK CAB		10 - SLEEPER SECTION OF TRUCK CAB		10 - LIMITED TO DAYLIGHT ONLY	10 - LIMITED TO DAYLIGHT ONLY	10 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	3 - TEST GIVEN, RESULTS UNKNOWN															
		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11 - LIMITED TO EMPLOYMENT	11 - LIMITED TO EMPLOYMENT	11 - PASSENGER	4 - TEST GIVEN, RESULTS UNKNOWN															
SAFETY EQUIPMENT		12 - PASSENGER IN UNENCLOSED CARGO AREA		12 - PASSENGER IN UNENCLOSED CARGO AREA		12 - LIMITED - OTHER	12 - LIMITED - OTHER	12 - OTHER DISTRACTION INSIDE THE VEHICLE	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE															
1 - NONE USED		13 - TRAILING UNIT		13 - TRAILING UNIT		13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	6 - PASSENGER															
2 - SHOULDER BELT ONLY USED		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14 - MILITARY VEHICLES ONLY	14 - MILITARY VEHICLES ONLY	14 - MILITARY VEHICLES ONLY	7 - OTHER DISTRACTION OUTSIDE THE VEHICLE															
3 - LAP BELT ONLY USED		15 - NON-MOTORIST		15 - NON-MOTORIST		15 - MOTOR VEHICLES WITHOUT AIR BRAKES	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE															
4 - SHOULDER & LAP BELT USED		99 - OTHER / UNKNOWN		99 - OTHER / UNKNOWN		16 - OUTSIDE MIRROR	16 - OUTSIDE MIRROR	16 - OUTSIDE MIRROR	9 - OTHER / UNKNOWN															
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING						17 - PROSTHETIC AID	1																	

IR23-002807

OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER		
	2	MWANGWA, MAIETHER MARTIN				01/01/1995		28	F		
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
1219 W Galbraith Road, Cincinnati, OH 45231											
OCCUPANT	INJURIES	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	AIR BAG USAGE	EJECTION	TRAPPED
	5					4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	3	2	1	1
UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER			
2	MESHAKE, STAMINA				06/01/2023			M			
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
1219 W Galbraith Road, Cincinnati, OH 45231											
OCCUPANT	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	6	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
	5					6	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	6	1	1	1
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
							<input type="checkbox"/> DOT-COMPLIANT MC HELMET				
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
							<input type="checkbox"/> DOT-COMPLIANT MC HELMET				
INJURY			SAFETY EQUIPMENT USED		SEATING POSITION		AIR BAG USAGE				
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY			1 - NONE USED - VEHICLE OCCUPANT 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 - 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 EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS				
INJURED TAKEN BY											
1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN											
GENDER											
F - FEMALE M - MALE U - 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					