

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY				LOCAL INFORMATION				LOCAL REPORT NUMBER*			
				REPORTING AGENCY NAME* NCIC* Fairfield Police Department 00901				HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR	
								1 - SOLVED 2 - UNSOLVED	2	1 98 - ANIMAL 99 - UNKNOWN	
COUNTY* 09		LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP* Fairfield				CRASH DATE/TIME* 12/11/2023 19:00		3	
REFERENCE LOCATION	ROUTE TYPE SR	ROUTE NUMBER 4	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME			ROAD TYPE	LATITUDE 39.329291			
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Production			ROAD TYPE DR	LONGITUDE -84.515476			
REFERENCE POINT 1		DIRECTION FROM REFERENCE 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #		ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY	INTERSECTION RELATED <input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA					
DISTANCE FROM REFERENCE		DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS						NUMBER OF APPROACHES <input type="checkbox"/> ROADWAY DIVIDED			
LOCATION OF FIRST HARMFUL EVENT 1				MANNER OF CRASH COLLISION/IMPACT 6 1 - NOT COLLISION 2 - BETWEEN 3 - TWO MOTOR VEHICLES IN 4 - TRANSPORT 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - HEAD-ON 10 - REAR-TO-REAR 11 - CROSSOVER 12 - SHARED USE PATHS OR 13 - RAILWAY GRADE 14 - CROSSING 15 - TRAILS 16 - BIKE LANE 17 - TOLL BOOTH 18 - 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		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	
<input type="checkbox"/> LAW ENFORCEMENT PRESENT		<input type="checkbox"/> ACTIVE SCHOOL ZONE									
LIGHT CONDITION 5 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 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/ UNKNOWN	
NARRATIVE On 12/11/2023 at about 1900 hours Unit 1 was northbound on Dixie Hw when, at the intersection with Production Dr., the driver of Unit 1 made a right hand turn on Production Dr. from the left lane on Dixie Hw. Unit 2 was traveling north as well in the exterior lane. Unit 2 struck Unit 1 when Unit 1 entered the lane of Unit 2. The driver of Unit 2 was suspended and issued a citation for DUS.						DIAGRAM 					
CRASH REPORTED DATE/TIME 12/11/2023 19:02		DISPATCH DATE/TIME 12/11/2023 19:03		ARRIVAL DATE/TIME 12/11/2023 19:10		SCENE CLEARED DATE/TIME 12/11/2023 19:56		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST			
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 0		TOTAL MINUTES 53		OFFICER'S NAME* Larsh, Samuel		CHECKED BY OFFICER'S NAME* Miller, Matthew			
						OFFICER'S BADGE NUMBER* 134		CHECKED BY OFFICER'S BADGE NUMBER* 141			
										<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP)	

UNIT # OWNER NAME: LAST, FIRST, MIDDLE (  SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE  SAME AS DRIVER  
1 ABOAGYE, RITA P

OWNER ADDRESS: STREET, CITY, STATE, ZIP (  SAME AS DRIVER)  
39 VIEW DR, FAIRFIELD, OH 45014

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE  
OH JZE1108 2T3S1RFV3MW169203 2021 Toyota

INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MODEL  
VERIFIED TREXIS 11-34-018103844 Green RAV4

TYPE OF USE US DOT # TOWED BY: COMPANY NAME  
 COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE FOX TOWING  
 INTERLOCK DEVICE EQUIPPED # OCCUPANTS VEHICLE WEIGHT GVWR/GCWR  
 HIT/SKIP UNIT 3  
1 - <= 10K LBS.  
2 - 10,001 - 26K LBS.  
3 - >= 26K LBS.

UNIT TYPE 1 - PASSENGER CAR 7 - MOTORCYCLE 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN/ SKATER  
2 - PASSENGER VAN 2-WHEELED 8 - MOTORCYCLE 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)  
(MINIVAN) 3-WHEELED 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 20 - OTHER VEHICLE 25 - OTHER NON-  
3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 16 - FARM EQUIPMENT 17 - MOTORHOME 21 - HEAVY EQUIPMENT 26 - BICYCLE  
4 - PICK UP 10 - MOPED OR 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN 27 - TRAIN  
5 - CARGO VAN MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV/UTV) 18 - LIMO (LIVERY VEHICLE) 99 - UNKNOWN OR  
# OF TRAILING UNITS HIT/SKIP

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

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

1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER/UNKNOWN  
2 - HEAD LAMPS 5 - STEERING 6 - TIRE BLOWOUT 8 - TRAILER EQUIPMENT DEFECTIVE  
3 - TAIL LAMPS

1 - INTERSECTION - 3 - INTERSECTION - 6 - BICYCLE LANE 9 - MEDIAN/CROSSING 12 - FIRST RESPONDER  
MARKED CROSSWALK OTHER 7 - SHOULDER/ ISLAND AT INCIDENT SCENE  
2 - INTERSECTION - 4 - MIDBLOCK - ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER/UNKNOWN  
UNMARKED CROSSWALK 5 - TRAVEL LANE - 8 - SIDEWALK 11 - SHARED USE PATHS  
OTHER LOCATION

1 - NON-CONTACT 1 - STRAIGHT AHEAD 8 - ENTERING TRAFFIC 13 - NEGOTIATING A 18 - APPROACHING OR  
2 - NON-COLLISION 2 - BACKING LANE 9 - LEAVING TRAFFIC 14 - ENTERING OR LEAVING VEHICLE  
3 - STRIKING 3 - CHANGING LANES 10 - PARKED 15 - SPECIFIED LOCATION 19 - STANDING  
4 - STRUCK 3 - OVERTAKING/ 11 - SLOWING OR 16 - WALKING, RUNNING, 20 - OTHER NON-  
5 - BOTH STRIKING PRE-CRASHES 6 - MAKING RIGHT TURN 12 - STOPPED IN 17 - JOGGING, PLAYING 21 - STANDING OUTSIDE  
& STRUCK ACTIONS 7 - MAKING LEFT TURN 13 - CHANGE 18 - TRAFFIC 22 - OTHER NON-  
9 - OTHER/UNKNOWN 8 - MAKING U-TURN 14 - SWERVING TO 19 - LOAD SHIFTING/ 23 - DISABLED VEHICLE  
7 - MAKING U-TURN 15 - AVOID 20 - IMPROPER 24 - WORKING  
12 - IMPROPER BACKING 16 - WRONG WAY 21 - PUSHING VEHICLE 99 - OTHER/UNKNOWN

1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START 17 - VISION OBSTRUCTION 21 - LYING IN  
2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE/ACDA 14 - POSITION 18 - OPERATING 22 - NOT DISCERNIBLE  
3 - RAN RED LIGHT 9 - IMPROPER LANE 15 - STOPPED OR 19 - DEFECTIVE 23 - OPENING DOOR  
4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - SWERVING TO 20 - PARKED ILLEGALLY 24 - FALLING/SPILLING  
5 - UNSAFE SPEED 11 - DROVE OFF ROAD 17 - AVOID 21 - IMPROPER 99 - OTHER IMPROPER  
6 - IMPROPER TURN 12 - IMPROPER BACKING 18 - WRONG WAY 22 - OTHER ACTION

SEQUENCE OF EVENTS EVENTS

1 20 1 - OVERTURN/ ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE 16 - RAILWAY VEHICLE 22 - WORK ZONE  
2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DIRECTION OF TRAVEL 17 - ANIMAL - FARM MAINTENANCE  
3 - IMMERSION 8 - RAN OFF ROAD 13 - OTHER NON- 18 - ANIMAL - DEER EQUIPMENT  
4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 23 - STRUCK BY  
5 - CARGO/EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 20 - MOTOR VEHICLE FALLING, SHIFTING  
21 - PARKED MOTOR VEHICLE CARGO OR ANYTHING  
22 - WORK ZONE SET IN MOTION BY A  
23 - STRUCK BY MOTOR VEHICLE  
24 - OTHER MOVABLE OBJECT

4 25 - IMPACT 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE  
ATTENUATOR/ CRASH CUSHION 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN 44 - DITCH MAINTENANCE  
33 - MEDIAN CABLE POST 45 - EMBANKMENT EQUIPMENT  
5 26 - BRIDGE OVERHEAD BARRIER 39 - LIGHT/LUMINARIES 46 - FENCE 51 - WALL  
STRUCTURE 34 - MEDIAN GUARDRAIL SUPPORT 47 - MAILBOX 52 - BUILDING  
27 - BRIDGE PIER OR ABUTMENT 35 - MEDIAN CONCRETE 48 - TREE 53 - TUNNEL  
36 - MEDIAN OTHER BARRIER 49 - OTHER POST, POLE 54 - OTHER FIXED  
50 - WORK ZONE  
51 - WALL  
52 - BUILDING  
53 - TUNNEL  
54 - OTHER FIXED  
55 - OTHER UNKNOWN  
6 28 - BRIDGE PARAPET 40 - SUPPORT  
29 - BRIDGE RAIL 41 - OTHER POST, POLE 42 - CULVERT  
30 - GUARDRAIL FACE BARRIER  
1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

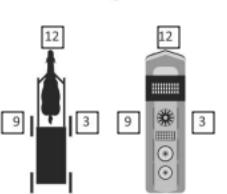
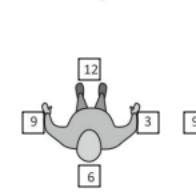
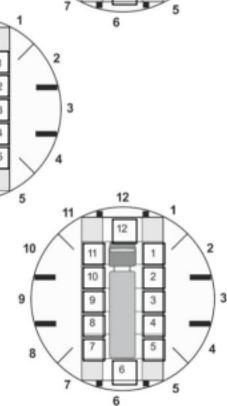
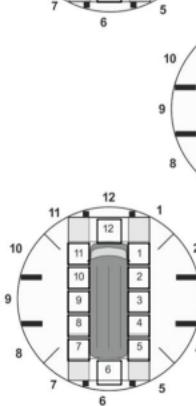
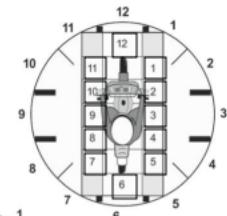
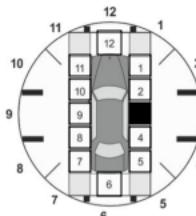
## DAMAGE

## DAMAGE SCALE

4

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

9 - UNKNOWN

DAMAGED AREA(S)  
INDICATE ALL THAT APPLY

- NO DAMAGE [ 0 ]  - UNDERCARRIAGE [ 14 ]

- TOP [ 13 ]  - ALL AREAS [ 15 ]

- UNIT NOT AT SCENE [ 16 ]

## INITIAL POINT OF CONTACT

3

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

## TRAFFIC

## TRAFFICWAY FLOW

2

## TRAFFIC CONTROL

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

## UNIT / NON-MOTORIST DIRECTION

2

## UNIT SPEED

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

3

## DETECTED SPEED

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

## POSTED SPEED

50

IR23-004312

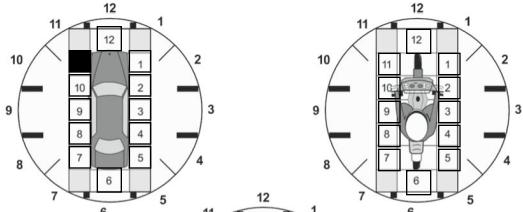
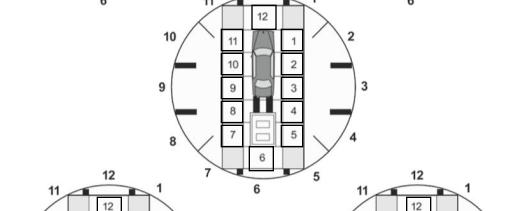
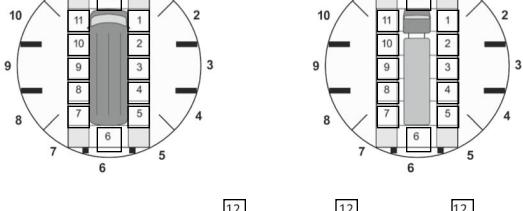
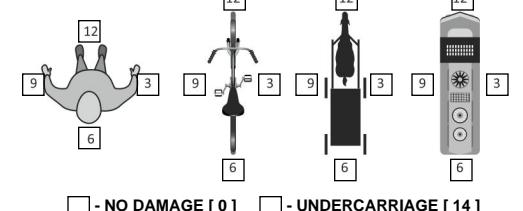
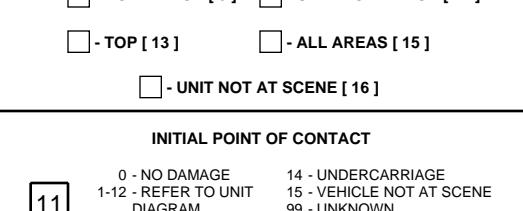
OWNER	UNIT # OWNER NAME: LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER) ROBLERO GARCIA, HERMELINDA			OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER		
	OWNER ADDRESS: STREET, CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER) 199 SAMMY DR, FAIRFIELD, OH 45014					
VEHICLE	COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP			COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
	LP STATE OH	LICENSE PLATE # JYG5048	VEHICLE IDENTIFICATION # 1GKKRSKD4EJ104202	VEHICLE YEAR 2014	VEHICLE MAKE GMC	VEHICLE MODEL Acadia
CARGO BODY TYPE	<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR Black	VEHICLE MODEL Acadia	
	TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME		
SPECIAL FUNCTION	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	# OCCUPANTS 4	VEHICLE WEIGHT GVWR/GCWR 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - > 26K LBS.	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD CLASS # PLACARD ID #	
	UNIT TYPE 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV/UTV)					
EVENT(S)	# OF TRAILING UNITS 0			# OF TRAILING UNITS 0		
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? <input type="checkbox"/> 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		
CONTRIBUTING CIRCUMSTANCES	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		
	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		
SEQUENCE OF EVENTS	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS			4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 99 - OTHER/UNKNOWN		
	1 - 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 13 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - APPROACHING OR LEAVING VEHICLE 14 - ENTERING OR CROSSING 20 - OTHER NON-MOTORIST 15 - WALKING, RUNNING, JOGGING, PLAYING 21 - STANDING OUTSIDE DISABLED VEHICLE 16 - WORKING 99 - OTHER/UNKNOWN 17 - PUSHING VEHICLE		
EVENT(S)	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING PRE-CRASHES & STRUCK ACTIONS 6 - MAKING LEFT TURN 7 - MAKING U-TURN 9 - OTHER/UNKNOWN			1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/ PASSING 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS 13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING 15 - SPECIFIED LOCATION 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - APPROACHING OR LEAVING VEHICLE 14 - ENTERING OR CROSSING 19 - STANDING 20 - OTHER NON-MOTORIST 15 - WALKING, RUNNING, JOGGING, PLAYING 21 - STANDING OUTSIDE DISABLED VEHICLE 16 - WORKING 99 - OTHER/UNKNOWN 17 - PUSHING VEHICLE		
	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 8 - FOLLOWING TOO CLOSE 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		
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 - DOWNTOWN RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOBILE OBJECT			
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			
1 - FIRST HARMFUL EVENT			1 - MOST HARMFUL EVENT			

**DAMAGE**

**DAMAGE SCALE**

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

**DAMAGED AREA(S)**  
INDICATE ALL THAT APPLY

- NO DAMAGE [ 0 ]

- TOP [ 13 ]

- UNDERCARRIAGE [ 14 ]

- ALL AREAS [ 15 ]

- UNIT NOT AT SCENE [ 16 ]

**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 <input type="checkbox"/> 2 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL <input type="checkbox"/> 6 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - NO CONTROL
# OF THROUGH LANES ON ROAD <input type="checkbox"/> 2	RAIL GRADE CROSSING <input type="checkbox"/> 1 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
FROM <input type="checkbox"/> 2 TO <input type="checkbox"/> 1	UNIT / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER/UNKNOWN

**UNIT SPEED**

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

**DETECTED SPEED**

50 POSTED SPEED



## MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER\*

IR23-004312

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH			AGE	GENDER								
	1	ABOAGYE, DENZIL MIKE						04/13/2006			17	M								
ADDRESS: STREET, CITY, STATE, ZIP 39 VIEW DR, FAIRFIELD, OH 45014													CONTACT PHONE - INCLUDE AREA CODE							
INJURIES 5		INJURED TAKEN BY 1		EMS AGENCY(NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED 4	DOT-COMPLIANT MC HELMET		SEATING POSITION 1	AIR BAG USAGE 4	EJECTION 1	TRAPPED 1					
OL STATE OH		OPERATOR LICENSE NUMBER		OFFENSE CHARGED 331.14a			LOCAL CODE ■	OFFENSE DESCRIPTION Signals Before Changing Course, T			CITATION NUMBER 2300124707									
OL CLASS 4		ENDORSEMENT SELECT UP TO 2 1		RESTRICTION SELECT UP TO 3 1		DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG			CONDITION 1	ALCOHOL TEST STATUS 1 TYPE 1 VALUE .	DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4								
UNIT # NAME: LAST, FIRST, MIDDLE 2 PEREZ ROBLERO, YURGIN G													DATE OF BIRTH 08/16/1997			AGE 26	GENDER M			
ADDRESS: STREET, CITY, STATE, ZIP 59 BILLY CIR, FAIRFIELD, OH 45014													CONTACT PHONE - INCLUDE AREA CODE							
INJURIES 4		INJURED TAKEN BY 1		EMS AGENCY(NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED 4	DOT-COMPLIANT MC HELMET		SEATING POSITION 1	AIR BAG USAGE 2	EJECTION 1	TRAPPED 1					
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ADDRESS: STREET, CITY, STATE, ZIP													CONTACT PHONE - INCLUDE AREA CODE							
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INJURIES 1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY													SEATING POSITION 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)			AIR BAG 1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN	OL CLASS 1 - NOT APPLICABLE 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN	OL RESTRICTION(S) 1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO = D) 5 - M/C MOPED ONLY 6 - NO VALID OL	DRIVER DISTRACTION 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	TEST STATUS 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
INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN													EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE			OL ENDORSEMENT H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT	ALCOHOL TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER			
SAFETY EQUIPMENT 1 - NONE USED 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN													TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS			GENDER F - FEMALE M - MALE U - OTHER / UNKNOWN	DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER			
CONDITION 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													DRUG TEST RESULT(S) 1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS							

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	1	ABOAGYE, RITA P				02/24/1973		50	F																																																																
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP 39 VIEW DR, FAIRFIELD, OH 45014					CONTACT PHONE - INCLUDE AREA CODE																																																																			
	INJURIES 3	INJURED TAKEN BY 2	EMS AGENCY (NAME) CITY OF FAIRFIELD FIRE	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) MERCY FAIRFIELD HOSPITAL, FAIRFIELD	SAFETY EQUIPMENT USED 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 3	AIR BAG USAGE 4	EJECTION 1	TRAPPED 3																																																															
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER																																																																
	1	ABOGYE, ETHAN				09/30/2008		15	M																																																																
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP 39 VIEW DR, FAIRFIELD, OH 45014					CONTACT PHONE - INCLUDE AREA CODE																																																																			
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	2	GUZMAN, IRMA				12/28/1996		26	F																																																																
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP 103 SAMMY DR, FAIRFIELD, OH 45014					CONTACT PHONE - INCLUDE AREA CODE																																																																			
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	2	GUZMAN, ISAAC MAXIMILIANO PEREZ				11/16/2020		3	M																																																																
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OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE 2 PEREZ GUZMAN, LUNA				DATE OF BIRTH 08/20/2023	AGE	GENDER F																																																																		
	ADDRESS: STREET, CITY, STATE, ZIP 103 SAMMY DR, FAIRFIELD, OH 45014					CONTACT PHONE - INCLUDE AREA CODE																																																																				
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