



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

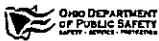
☒ PHOTOS TAKEN ☐ SECONDARY CRASH		☒ OH-2 ☐ OH-1P ☐ OTHER ☐ PRIVATE PROPERTY		LOCAL INFORMATION		2 3 0 2 4 9 9 8	
COUNTY* 3 1		LOCALITY* 1 2-VILLAGE 3-TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield		CRASH DATE / TIME* 04 06 20 23 10 58	
REPORTING AGENCY NAME* Fairfield Police Department		NCIC* 0 0 9 0 1		HITS/SKIP 1-SOLVED 2-UNSOLVED		NUMBER OF UNITS 0 2	
CRASH SEVERITY 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY		LATITUDE DECIMAL DEGREES 39 3 0 1 9 6 6		LONGITUDE DECIMAL DEGREES 84 5 2 3 7 6 8		CRASH SEVERITY 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY	
ROUTE TYPE 1-NORTH 2-SOUTH 3-EAST 4-WEST		ROUTE NUMBER 1-NORTH 2-SOUTH 3-EAST 4-WEST		LOCATION ROAD NAME South Gilmore		ROAD TYPE R D	
REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Cincinnati Mall		ROAD TYPE D R		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Cincinnati Mall		ROAD TYPE D R	
REFERENCE POINT 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 PL-PLACE 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	
DISTANCE FROM REFERENCE 2 0		DISTANCE UNIT OF MEASURE 1-MILES 2-Feet 3-YARDS		LOCATION OF FIRST HARMFUL EVENT 1-ON ROADWAY 2-ON SHOULDER 3-IN MEDIAN 4-ON ROADSIDE 5-ON GORE 6-OUTSIDE TRAFFIC WAY 7-ON RAMP 8-OFF RAMP 9-CROSSOVER 10-DRIVEWAY/ALLEY ACCESS 11-RAILWAY GRADE CROSSING 12-SHARED USE PATHS OR TRAILS 13-BIKE LANE 14-TOLL BOOTH 99-OTHER / UNKNOWN		MANNER OF CRASH COLLISION/IMPACT 1-NOT COLLISION 2-REAR-END 3-HEAD-ON 4-REAR-TO-REAR 5-BACKING 6-ANGLE 7-SIDESWIPE, SAME DIRECTION 8-SIDESWIPE, OPPOSITE DIRECTION 9-OTHER / UNKNOWN	
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, RAISED MEDIAN (ANY TYPE) 9-OTHER/UNKNOWN		INTERSECTION RELATED ☐ WITHIN INTERSECTION OR ON APPROACH ☐ WITHIN INTERCHANGE AREA NUMBER OF APPROACHES		ROADWAY ☐ ROADWAY DIVIDED	
WORK ZONE RELATED ☐ WORKERS PRESENT ☐ LAW ENFORCEMENT PRESENT ☐ ACTIVE SCHOOL ZONE		WORK ZONE TYPE 1-LANE CLOSURE 2-LANE SHIFT/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 2 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 1 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 04/06/2023 at about 10:58 A.M., unit 1 was traveling northbound on South Gilmore Rd. at approximately 20 MPH, when it failed to stop within the assured clear distance ahead, and in so doing, collided with the rear of unit 2 which was stopped in traffic on northbound South Gilmore Rd. The driver of unit 1 left the scene without stopping.		SEE OH-2		Indicate the north direction with an "N" on the compass diagram.			
CRASH REPORTED DATE / TIME 04 06 20 23 10 59		DISPATCH DATE / TIME 04 06 20 23 11 00		ARRIVAL DATE / TIME 04 06 20 23 11 06		SCENE CLEARED DATE / TIME 04 06 20 23 11 16	
TOTAL TIME ROADWAY CLOSED 1 6		OTHER INVESTIGATION TIME 1 6		TOTAL MINUTES 1 6		OFFICER'S NAME* C. Singleton	
OFFICER'S BADGE NUMBER* 8 9		CHECKED BY OFFICER'S NAME* S. [Signature]		CHECKED BY OFFICER'S BADGE NUMBER* 8 7		REPORT TAKEN BY ☒ POLICE AGENCY ☐ MOTORIST ☐ SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO GPS)	

OWNER	UNIT # 01	OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)		
VEHICLE	COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
	LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #
EVENT(S)	INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #
	TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE	US DOT #	VEHICLE YEAR
VEHICLE MAKE	INTERLOCK DEVICE EQUIPPED	HIT/SKIP UNIT	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.
	#OCCUPANTS 01	HAZARDOUS MATERIAL ☐ MATERIAL RELEASED ☐ PLACARD	VEHICLE MODEL
VEHICLE TYPE	1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER		
	2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)		
VEHICLE MAKE	3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST		
	4 - PICK UP 10 - MOPED OR MOTORIZED BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE		
VEHICLE MAKE	5 - CARGO VAN 11 - ALL TERRAIN VEHICLE (ATV/UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN		
	6 - VAN (9-15 SEATS) 17 - MOTORHOME 29 - UNKNOWN OR HIT/SKIP		
VEHICLE MAKE	# OF TRAILING UNITS		
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		
VEHICLE MAKE	1 - YES 2 - NO 9 - OTHER / UNKNOWN		
	AUTONOMOUS MODE LEVEL		
VEHICLE MAKE	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		
VEHICLE MAKE	3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL		
	4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING		
VEHICLE MAKE	5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL		
	1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER		
VEHICLE MAKE	2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 9 - CARGO TANK 13 - AUTO TRANSPORTER		
	7 - GRAIN CHIPS/GRAVEL 10 - FLAT BED 14 - GARBAGE/REFUSE		
VEHICLE MAKE	99 - OTHER / UNKNOWN		
	1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN		
VEHICLE MAKE	2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT		
	3 - TAIL LAMPS 6 - TIRE BLOWOUT		
VEHICLE MAKE	1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE		
	2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN		
VEHICLE MAKE	5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS		
	1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE		
VEHICLE MAKE	2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING		
	3 - STRIKING 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST		
VEHICLE MAKE	4 - STRUCK PRE-CRASH ACTIONS 4 - OVERTAKING/PASSING 10 - PARKED 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE		
	5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN		
VEHICLE MAKE	9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS		
	1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY		
VEHICLE MAKE	2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE		
	3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY		
VEHICLE MAKE	4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION		
	5 - UNSAFE SPEED 11 - DROVE OFF ROAD 21 - OTHER IMPROPER ACTION		
VEHICLE MAKE	6 - IMPROPER TURN 12 - IMPROPER BACKING		
	SEQUENCE OF EVENTS		
VEHICLE MAKE	1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT		
	2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE		
VEHICLE MAKE	3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT		
	4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 20 - MOTOR VEHICLE IN TRANSPORT		
VEHICLE MAKE	5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDAL CYCLE 21 - PARKED MOTOR VEHICLE		
	COLLISION WITH FIXED OBJECT - STRUCK		
VEHICLE MAKE	25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT		
	26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL		
VEHICLE MAKE	27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING		
	28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL		
VEHICLE MAKE	29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT		
	30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 99 - OTHER / UNKNOWN		
VEHICLE MAKE	FIRST HARMFUL EVENT		
	MOST HARMFUL EVENT		

LOCAL REPORT NUMBER 2, 3, 0, 2, 4, 9, 9, 8	
DAMAGE	
DAMAGE SCALE 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 0 - NO DAMAGE 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 13 - TOP 99 - UNKNOWN	
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
# OF THROUGH LANES ON ROAD 5	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION FROM 2 TO 1 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
UNIT SPEED 20	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED 35	

OWNER	UNIT # 012	OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE (X SAME AS DRIVER)																														
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)																																
	COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE																														
	LP STATE OH	LICENSE PLATE # 190ZAE	VEHICLE IDENTIFICATION # 2HGFB2F52EH545429																														
	☒ INSURANCE VERIFIED	INSURANCE COMPANY State Farm	INSURANCE POLICY # 4479818E0335E																														
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	☐ INTERLOCK DEVICE EQUIPPED	☐ HIT/SKIP UNIT	#OCCUPANTS 01																														
	VEHICLE YEAR 2014		VEHICLE MAKE Honda																														
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LOCAL REPORT NUMBER 23024998	
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☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]	
INITIAL POINT OF CONTACT	
0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN	
TRAFFIC	
TRAFFICWAY FLOW	TRAFFIC CONTROL
1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
5	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
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
0	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED	
3 5	



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
2 3 0 2 4 9 9 8

UNIT # 0 1	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH				AGE 0	GENDER F
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 9 9	☐ DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 9	EJECTION 1	TRAPPED 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 9	ALCOHOL / DRUG SUSPECTED ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG		CONDITION 9	ALCOHOL TEST STATUS TYPE VALUE 1 1 .		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4 1 1 .

UNIT # 0 2	NAME: LAST, FIRST, MIDDLE Maloney, Eric				DATE OF BIRTH 0 7 2 7 1 9 8 8				AGE 3 4	GENDER M
ADDRESS: STREET, CITY, STATE, ZIP 3749 Wilson Farm Blvd. Franklin, Ohio 45005					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED 0 4	☐ DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
OL STATE OH	OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE ☐	OFFENSE DESCRIPTION			CITATION NUMBER	
OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG		CONDITION 1	ALCOHOL TEST STATUS TYPE VALUE 1 1 .		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4 1 1 .

UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH				AGE 0	GENDER
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	☐ DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
OL STATE	OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE ☐	OFFENSE DESCRIPTION			CITATION NUMBER	
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG		CONDITION	ALCOHOL TEST STATUS TYPE VALUE		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4

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 COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2 - TEST REFUSED
3 - SUSPECTED MINOR INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C	3 - CORRECTIVE LENSES	3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE	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 - TALKING ON HAND-HELD COMMUNICATION DEVICE	4 - TEST GIVEN, RESULTS KNOWN
5 - NO APPARENT INJURY	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - MC MOPED ONLY	5 - EXCEPT CLASS A BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5 - TEST GIVEN, RESULTS UNKNOWN
INJURED TAKEN BY	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID DL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER	ALCOHOL TEST TYPE
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION	OL ENDORSEMENT	7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION - INSIDE THE VEHICLE	1 - NONE
2 - EHS	8 - THIRD - MIDDLE	1 - NOT EJECTED	H - HAZMAT	8 - INTERMEDIATE LICENSE - RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	2 - BLOOD
3 - POLICE	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED	M - MOTORCYCLE	9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	3 - URINE
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED	P - PASSENGER	10 - LIMITED TO DAYLIGHT ONLY	CONDITION	4 - BREATH
SAFETY EQUIPMENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE	N - TANKER	11 - LIMITED TO EMPLOYMENT	1 - APPARENTLY NORMAL	5 - OTHER
1 - NONE USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	TRAPPED	Q - MOTOR SCOOTER	12 - LIMITED - OTHER	2 - PHYSICAL IMPAIRMENT	DRUG TEST TYPE
2 - SHOULDER BELT ONLY USED	13 - TRAILING UNIT	1 - NOT TRAPPED	R - THREE-WHEEL MOTORCYCLE	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	1 - NONE
3 - LAP BELT ONLY USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2 - EXTRICATED BY MECHANICAL MEANS	S - SCHOOL BUS	14 - MILITARY VEHICLES ONLY	4 - ILLNESS	2 - BLOOD
4 - SHOULDER & LAP BELT USED	15 - NON-MOTORIST	3 - FREED BY NON-MECHANICAL MEANS	T - DOUBLE & TRIPLE TRAILERS	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	3 - URINE
5 - CHILD RESTRAINT SYSTEM FORWARD FACING	99 - OTHER / UNKNOWN	GENDER	X - TANKER / HAZMAT	16 - OUTSIDE MIRROR	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	4 - OTHER
6 - CHILD RESTRAINT SYSTEM REAR FACING		F - FEMALE		17 - PROSTHETIC AID	9 - OTHER / UNKNOWN	DRUG TEST RESULT(S)
7 - BOOSTER SEAT		M - MALE		18 - OTHER		1 - AMPHETAMINES
8 - HELMET USED		U - OTHER / UNKNOWN				2 - BARBITURATES
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						3 - BENZODIAZEPINES
10 - REFLECTIVE CLOTHING						4 - CANNABINOIDS
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						5 - COCAINE
99 - OTHER / UNKNOWN						6 - OPIATES / OPIOIDS
						7 - OTHER
						8 - NEGATIVE RESULTS

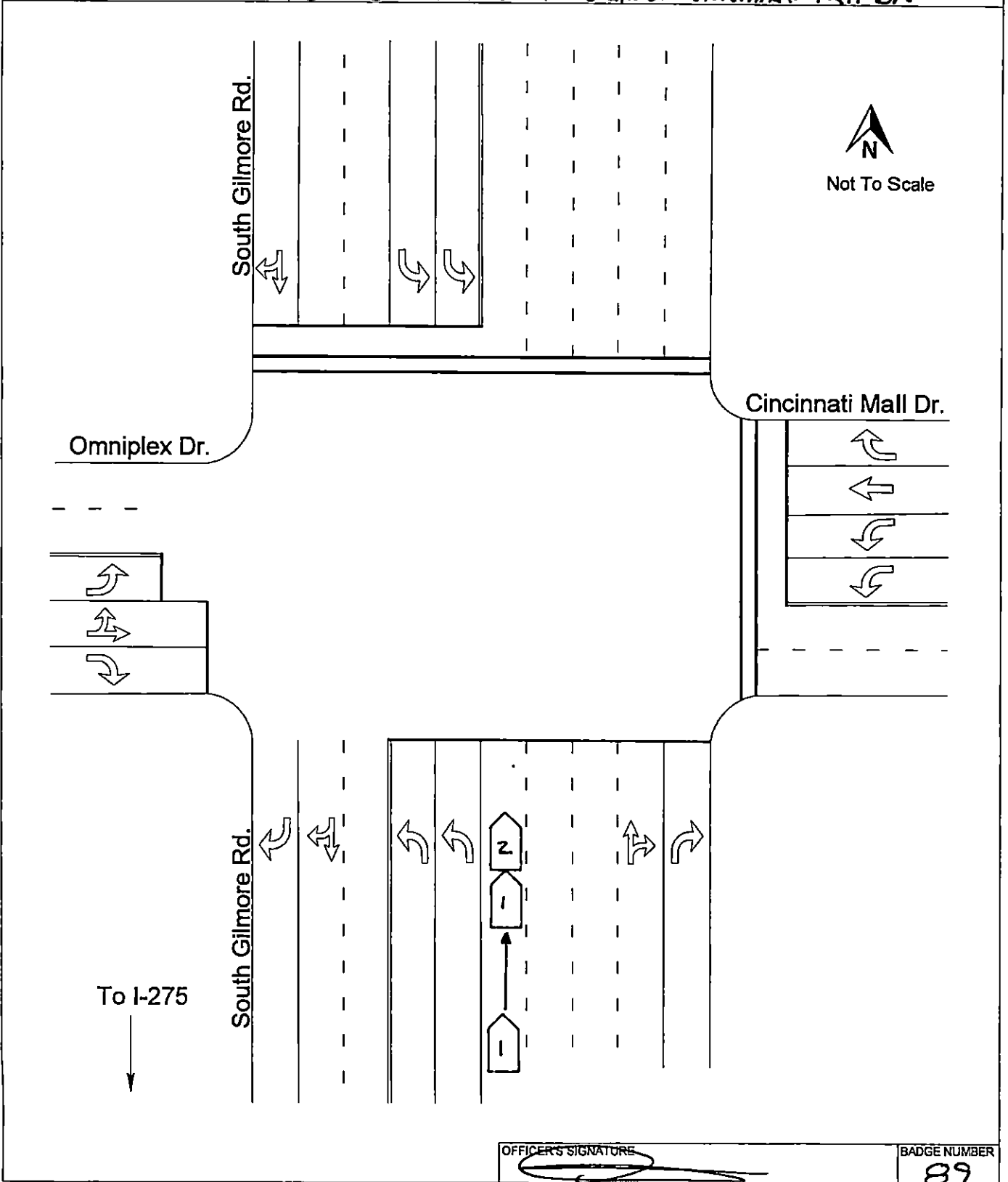


OHIO DEPARTMENT
OF PUBLIC SAFETY
SAFETY • SERVICE • PROTECTION

OHIO TRAFFIC CRASH REPORT
DIAGRAM / NARRATIVE CONTINUATION

OH-2

LOCAL REPORT NUMBER 23-024998	REPORTING AGENCY Fairfield Police Department	DATE OF CRASH M 04 D 06 Y 23
IN COUNTY OF Hamilton	CRASH LOCATION South Gilmore Rd. 20 feet south of Cincinnati Mall Dr.	



OFFICER'S SIGNATURE 	BADGE NUMBER 89
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