



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

☒ PHOTOS TAKEN ☐ SECONDARY CRASH		☒ OH-2 ☐ OH-1P ☐ PRIVATE PROPERTY	LOCAL INFORMATION REPORTING AGENCY NAME* Fairfield Police Department		NCIC* 0,0,9,0,1	2,3,0,1,2,6,8,9		HIT/SKIP 1-SOLVED 2-UNSOLVED		NUMBER OF UNITS 0,2	UNIT IN ERROR 98-ANIMAL 99-UNKNOWN		
COUNTY* 0,9	LOCALITY* 1-CITY 2-VILLAGE 3-TOWNSHIP 1	LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield				CRASH DATE/TIME* 02,17,2023,19,52		CRASH SEVERITY 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY					
ROUTE TYPE S,R	ROUTE NUMBER 4	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DECIMAL DEGREES 39,3,5,1,8,9,0		INTERSECTION RELATED ☐ WITHIN INTERSECTION OR ON APPROACH ☐ WITHIN INTERCHANGE AREA NUMBER OF APPROACHES ROADWAY ☐ ROADWAY DIVIDED					
ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Symmes		ROAD TYPE R,D	LONGITUDE DECIMAL DEGREES 84,5,4,2,3,9,0							
REFERENCE POINT 1-INTERSECTION 2-MILE POST 3-HOUSE # 1		DIRECTION FROM REFERENCE 1-NORTH 2-SOUTH 3-EAST 4-WEST 1		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							
DISTANCE FROM REFERENCE 1,2,8		DISTANCE UNIT OF MEASURE 1-MILES 2-Feet 3-YARDS 2		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 7		MANNER OF CRASH COLLISION/IMPACT 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 (ANY TYPE) 9-OTHER/UNKNOWN			
☐ 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 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 0,1 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 02/17/2023 at around 7:52 P.M., Unit 1 was traveling northbound on S.R.4 near Symmes Rd. Unit 1 attempted to change lanes from the left lane to the right lane and struck unit 2, which was also northbound on S.R.4.									
CRASH REPORTED DATE/TIME 0,2,1,7,2,0,2,3,1,9,5,2		DISPATCH DATE/TIME 0,2,1,7,2,0,2,3,1,9,5,3		ARRIVAL DATE/TIME 0,2,1,7,2,0,2,3,1,9,5,7		SCENE CLEARED DATE/TIME 0,2,1,7,2,0,2,3,2,0,2,3		REPORT TAKEN BY ☒ POLICE AGENCY ☐ MOTORIST ☐ SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)					
TOTAL TIME ROADWAY CLOSED 0,0,0		OTHER INVESTIGATION TIME 3,0		TOTAL MINUTES 6,0		OFFICER'S NAME* J.Mitchell		CHECKED BY OFFICER'S NAME* D.Pott		OFFICER'S BADGE NUMBER* 1,7,1		CHECKED BY OFFICER'S BADGE NUMBER* 1,3,0	

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)				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
VEHICLE	LP STATE KY	LICENSE PLATE # B3Z352	VEHICLE IDENTIFICATION # 1FAHP2E85G153649	VEHICLE YEAR 2016	VEHICLE MAKE Ford
	☒ INSURANCE VERIFIED	INSURANCE COMPANY Commonwealth	INSURANCE POLICY # PAKY009333065	COLOR Red	VEHICLE MODEL Fusion
	☐ COMMERCIAL	☐ GOVERNMENT	☐ IN EMERGENCY RESPONSE	US DOT #	
	☐ INTERLOCK DEVICE EQUIPPED	☐ HIT/SKIP UNIT	#OCCUPANTS 01	VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	
	TYPE OF USE		TOWED BY: COMPANY NAME		
	☐ HAZARDOUS MATERIAL		CLASS # PLACARD ID #		
	1 - PASSENGER CAR		23 - PEDESTRIAN / SKATER		
	2 - PASSENGER VAN (MINIVAN)		24 - WHEELCHAIR (ANY TYPE)		
	3 - SPORT UTILITY VEHICLE		25 - OTHER NON-MOTORIST		
	4 - PICK UP		26 - BICYCLE		
EVENT(S)	UNIT TYPE		27 - TRAIN		
	5 - CARGO VAN		99 - UNKNOWN OR HIT/SKIP		
	6 - VAN (9-15 SEATS)				
	# OF TRAILING UNITS				
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		0 - NO AUTOMATION		
	1 - YES 2 - NO 9 - OTHER / UNKNOWN		1 - DRIVER ASSISTANCE		
	AUTONOMOUS MODE LEVEL		2 - PARTIAL AUTOMATION		
	1 - NONE		3 - CONDITIONAL AUTOMATION		
	2 - TAXI		4 - HIGH AUTOMATION		
	3 - ELECTRONIC RIDE SHARING		5 - FULL AUTOMATION		
VEHICLE	SPECIAL FUNCTION		9 - UNKNOWN		
	4 - SCHOOL TRANSPORT		1 - NONE		
	5 - BUS - TRANSIT / COMMUTER		6 - BUS - CHARTER / TOUR		
	1 - NO CARGO BODY TYPE / NOT APPLICABLE		7 - BUS - INTERCITY		
	2 - BUS		8 - BUS - SHUTTLE		
	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE		9 - BUS - OTHER		
	4 - LOGGING		10 - AMBULANCE		
	5 - INTERMODAL CONTAINER CHASSIS		11 - FIRE		
	6 - CARGO VAN / ENCLOSED BOX		12 - MILITARY		
	7 - GRAIN CHIPS / GRAVEL		13 - POLICE		
VEHICLE	VEHICLE DEFECTS		14 - PUBLIC UTILITY		
	1 - TURN SIGNALS		15 - CONSTRUCTION EQUIPMENT		
	2 - HEAD LAMPS		16 - FARM		
	3 - TAIL LAMPS		17 - MOWING		
	4 - BRAKES		18 - SNOW REMOVAL		
	5 - STEERING		19 - TOWING		
	6 - TIRE BLOWOUT		20 - SAFETY SERVICE PATROL		
	7 - WORN OR SLICK TIRES		21 - MAIL CARRIER		
	8 - TRAILER EQUIPMENT DEFECTIVE		99 - OTHER / UNKNOWN		
	9 - MOTOR TROUBLE				
VEHICLE	NON-MOTORIST LOCATION AT IMPACT		10 - DISABLED FROM PRIOR ACCIDENT		
	1 - INTERSECTION - MARKED CROSSWALK		11 - SHARED USE PATHS OR TRAILS		
	2 - INTERSECTION - UNMARKED CROSSWALK		12 - MEDIAN / CROSSING ISLAND		
	3 - INTERSECTION - OTHER		13 - DRIVEWAY ACCESS		
	4 - MIDDLEBLOCK - MARKED CROSSWALK		14 - ENTERING OR CROSSING SPECIFIED LOCATION		
	5 - TRAVEL LANE - OTHER LOCATION		15 - WALKING, RUNNING, JOGGING, PLAYING		
	6 - BICYCLE LANE		16 - WORKING		
	7 - SHOULDER / ROADSIDE		17 - PUSHING VEHICLE		
	8 - SIDEWALK		18 - APPROACHING OR LEAVING VEHICLE		
	9 - MEDIAN / CROSSING ISLAND		19 - STANDING		
VEHICLE	ACTION		20 - OTHER NON-MOTORIST		
	1 - NON-CONTACT		21 - STANDING OUTSIDE DISABLED VEHICLE		
	2 - NON-COLLISION		99 - OTHER / UNKNOWN		
	3 - STRIKING				
	4 - STRUCK				
	5 - BOTH STRIKING & STRUCK				
	9 - OTHER / UNKNOWN				
	1 - STRAIGHT AHEAD				
	2 - BACKING				
	3 - CHANGING LANES				
VEHICLE	CONTRIBUTING CIRCUMSTANCES		4 - OVERTAKING / PASSING		
	1 - NONE		5 - MAKING RIGHT TURN		
	2 - FAILURE TO YIELD		6 - MAKING LEFT TURN		
	3 - RAN RED LIGHT				
	4 - RAN STOP SIGN				
	5 - UNSAFE SPEED				
	6 - IMPROPER TURN				
	7 - LEFT OF CENTER				
	8 - FOLLOWING TOO CLOSE / ACDA				
	9 - IMPROPER LANE CHANGE				
VEHICLE	SEQUENCE OF EVENTS		10 - IMPROPER PASSING		
	1 - OVERTURN / ROLLOVER		11 - DROVE OFF ROAD		
	2 - FIRE / EXPLOSION		12 - IMPROPER BACKING		
	3 - IMMERISION				
	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				
VEHICLE	COLLISION WITH FIXED OBJECT		10 - CROSS MEDIAN		
	25 - IMPACT ATTENUATOR / CRASH CUSHION		11 - DOWNHILL RUNAWAY		
	26 - BRIDGE OVERHEAD STRUCTURE		12 - OTHER NON-COLLISION		
	27 - BRIDGE PIER OR ABUTMENT		13 - PEDESTRIAN		
	28 - BRIDGE PARAPET		14 - PEDALCYCLE		
	29 - BRIDGE RAIL		15 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL		
	30 - GUARDRAIL FACE		16 - RAILWAY VEHICLE		
	31 - GUARDRAIL END		17 - ANIMAL - FARM		
	32 - PORTABLE BARRIER		18 - ANIMAL - DEER		
	33 - MEDIAN CABLE BARRIER		19 - ANIMAL - OTHER		
VEHICLE	FIRST HARMFUL EVENT		20 - MOTOR VEHICLE IN TRANSPORT		
	1 - MOST HARMFUL EVENT		21 - PARKED MOTOR VEHICLE		
	37 - TRAFFIC SIGN POST		22 - WORK ZONE MAINTENANCE EQUIPMENT		
	38 - OVERHEAD SIGN POST		23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE		
	39 - LIGHT / LUMINARIES SUPPORT		24 - OTHER MOVABLE OBJECT		
	40 - UTILITY POLE				
	41 - OTHER POST, POLE OR SUPPORT				
	42 - CULVERT				
	43 - CURB				
	44 - DITCH				
VEHICLE	TRAFFICWAY FLOW		45 - EMBANKMENT		
	1 - ONE-WAY		46 - FENCE		
	2 - TWO-WAY		47 - MAILBOX		
	# OF THROUGH LANES ON ROAD		48 - TREE		
	4		49 - FIRE HYDRANT		
	50 - WORK ZONE MAINTENANCE EQUIPMENT				
	51 - WALL				
	52 - BUILDING				
	53 - TUNNEL				
	54 - OTHER FIXED OBJECT				
VEHICLE	UNIT SPEED		99 - OTHER / UNKNOWN		
	35				
	POSTED SPEED				
	35				
	DETECTED SPEED				
	1 - STATED / ESTIMATED SPEED				
	2 - CALCULATED / EDR				
	3 - UNDETERMINED				
	UNIT / NON-MOTORIST DIRECTION				
	FROM 2 TO 1				

LOCAL REPORT NUMBER 2, 3, 0, 1, 2, 6, 8, 9	
DAMAGE DAMAGE SCALE 2 1 - NONE 3 - FUNCTIONAL DAMAGE 2 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 0, 5 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 13 - TOP 99 - UNKNOWN	
TRAFFICWAY FLOW 2 1 - ONE-WAY 2 2 - TWO-WAY	TRAFFIC CONTROL 6 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD 4	RAIL GRADE CROSSING 1 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 35	DETECTED SPEED 1 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED 35	

OWNER	UNIT # 02	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				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
VEHICLE	LP STATE OH	LICENSE PLATE # JST2821	VEHICLE IDENTIFICATION # 4S4BR1C1C6D1123123100	VEHICLE YEAR 2013	VEHICLE MAKE Subaru
	☒ INSURANCE VERIFIED	INSURANCE COMPANY Progressive	INSURANCE POLICY # 956964509	COLOR White	VEHICLE MODEL Outback
	☐ COMMERCIAL	TYPE OF USE ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPANY NAME Waynes	
	☐ INTERLOCK DEVICE EQUIPPED	☐ HIT/SKIP UNIT	#OCCUPANTS 01	HAZARDOUS MATERIAL ☐ MATERIAL RELEASED ☐ PLACARD	
	VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.				
	UNIT TYPE 03				
	# of TRAILING UNITS 0				
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 02				
	SPECIAL FUNCTION 01				
	CARGO BODY TYPE 01				
EVENT(S)	VEHICLE DEFECTS				
	NON-MOTORIST LOCATION AT IMPACT				
	ACTION				
	CONTRIBUTING CIRCUMSTANCES				
	SEQUENCE OF EVENTS				
	NON-COLLISION				
	COLLISION WITH FIXED OBJECT				
	STUCK				
	FIRST HARMFUL EVENT				
	MOST HARMFUL EVENT				

LOCAL REPORT NUMBER 23012689	
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 0 - NO DAMAGE 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 13 - TOP 99 - UNKNOWN	
TRAFFIC	
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 4	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 35	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED 35	



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
2 3 0 1 2 6 8 9

UNIT # NAME: LAST, FIRST, MIDDLE
0 1 Davis, Jordan

DATE OF BIRTH AGE GENDER
0 8 0 4 1 9 8 6 3 6 M

ADDRESS: STREET, CITY, STATE, ZIP
2595 Dixie Hwy, Lakeside, KY 41017

CONTACT PHONE - INCLUDE AREA CODE

INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED
5
DOT-COMPLIANT MC HELMET
0 4

SEATING POSITION AIR BAG USAGE EJECTION TRAPPED
0 1 1 1 1

OL STATE OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL CODE OFFENSE DESCRIPTION CITATION NUMBER
K Y 331.08A Improper lane change 253698

OL CLASS ENDORSEMENT SELECT UP TO 2 RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY ALCOHOL / DRUG SUSPECTED CONDITION ALCOHOL TEST DRUG TEST(S)
4 1 ALCOHOL MARIJUANA OTHER DRUG 1 1 1 1 1 1

UNIT # NAME: LAST, FIRST, MIDDLE
0 2 Sullivan, Timothy

DATE OF BIRTH AGE GENDER
1 2 1 5 1 9 9 6 2 6 M

ADDRESS: STREET, CITY, STATE, ZIP
4925 Trudy Ln, Hamilton, OH 45013

CONTACT PHONE - INCLUDE AREA CODE

INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED
5
DOT-COMPLIANT MC HELMET
0 4

SEATING POSITION AIR BAG USAGE EJECTION TRAPPED
0 1 1 1 1

OL STATE OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL CODE OFFENSE DESCRIPTION CITATION NUMBER
O H

OL CLASS ENDORSEMENT SELECT UP TO 2 RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY ALCOHOL / DRUG SUSPECTED CONDITION ALCOHOL TEST DRUG TEST(S)
4 1 ALCOHOL MARIJUANA OTHER DRUG 1 1 1 1 1 1

UNIT # NAME: LAST, FIRST, MIDDLE

DATE OF BIRTH AGE GENDER
0

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 CONDITION ALCOHOL TEST DRUG TEST(S)
ALCOHOL MARIJUANA OTHER DRUG

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 - COU 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 (ORIO = 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 OL	6 - EXCEPT CLASS A & CLASS B BUS	7 - OTHER DISTRACTION INSIDE THE VEHICLE	ALCOHOL TEST TYPE
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION	OL ENDORSEMENT	7 - EXCEPT TRACTOR-TRAILER	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	1 - NONE
2 - EMS	8 - THIRD - MIDDLE	1 - NOT EJECTED	H - HAZMAT	8 - INTERMEDIATE LICENSE RESTRICTIONS	9 - OTHER / UNKNOWN	2 - BLOOD
3 - POLICE	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED	M - MOTORCYCLE	9 - LEARNER'S PERMIT RESTRICTIONS	CONDITION	3 - URINE
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED	P - PASSENGER	10 - LIMITED TO DAYLIGHT ONLY	1 - APPARENTLY NORMAL	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	2 - PHYSICAL IMPAIRMENT	5 - OTHER
1 - NONE USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	TRAPPED	Q - MOTOR SCOOTER	12 - LIMITED - OTHER	3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	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)	4 - ILLNESS	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	5 - FELL ASLEEP FAINTED, FATIGUED, ETC.	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	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	3 - URINE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	99 - OTHER / UNKNOWN	GENDER	X - TANKER / HAZMAT	16 - OUTSIDE MIRROR	9 - OTHER / UNKNOWN	4 - OTHER
6 - CHILD RESTRAINT SYSTEM - REAR FACING		F - FEMALE		17 - PROSTHETIC AID		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 TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH - 2

LOCAL REPORT NUMBER PD-23-012689	REPORTING AGENCY Fairfield City	DATE OF ACCIDENT M 2 10 17 1983
IN COUNTY OF BUTLER	ACCIDENT LOCATION S.R. 4 (Dixie Hwy) // Symmes Rd	

4597
DIXIE HWY

DIXIE HWY. 4

1

2

4600
DIXIE HWY

SYMMES RD.

NOT TO SCALE

HSY 7002 1/82

OFFICER'S SIGNATURE
IX J. Mitchell

BADGE NUMBER
171