

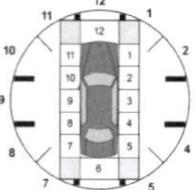
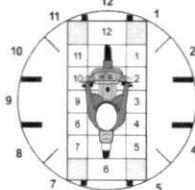
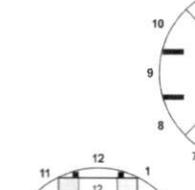
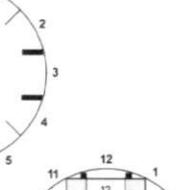
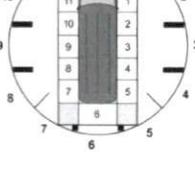
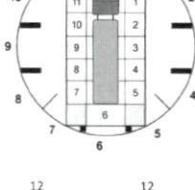
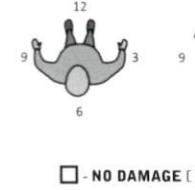
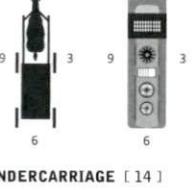
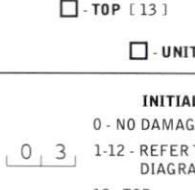
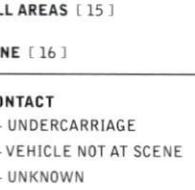


TRAFFIC CRASH REPORT

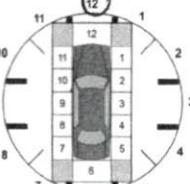
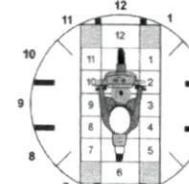
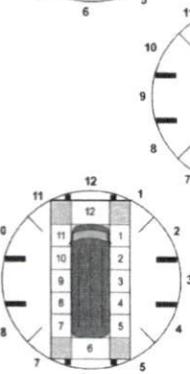
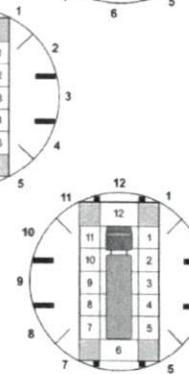
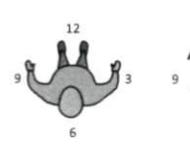
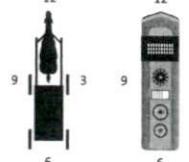
*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION			LOCAL REPORT NUMBER*			
		REPORTING AGENCY NAME* Fairfield Police Department NCIC* 00901			HIT/SKIP 1 - SOLVED 2 - UNSOLVED	NUMBER OF UNITS 0 2	UNIT IN ERROR 98 - ANIMAL 0 1 99 - UNKNOWN	
0 9	1 - CITY 2 - VILLAGE 3 - TOWNSHIP	LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield			CRASH DATE / TIME* 01092022 1117	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	LOCATION ROAD NAME MACK		ROAD TYPE R D	LATITUDE DECIMAL DEGREES 39° 31' 20.27"		
ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) SPRINGBOK		ROAD TYPE D R	LONGITUDE DECIMAL DEGREES -84° 49' 53.35"		
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 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 3				
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			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	
<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 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 2 - ADVANCE WARNING SIGN 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	CONTOUR 1	CONDITIONS 1 - DRY 2 - WET 3 - SNOW 4 - ICE 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 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN			WEATHER 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					
<p>NARRATIVE</p> <p>On 01/09/2022 at approximately 1117 hours, Unit 2 was traveling east on Mack Road approaching Springbok Dr. Unit 1 was traveling west on Mack Road approaching Springbok Dr. Unit 1 then turned left onto Springbok Dr failing to yield to Unit 2 and was struck by it.</p> <p>Unit 1 was issued a citation for No OL.</p>								
 <p>Indicate the north direction with an "N" on the compass diagram.</p> <p>Mack Rd.</p> <p>Springbok Dr.</p> <p>Not to Scale</p>								
CRASH REPORTED DATE / TIME 01092022 1117		DISPATCH DATE / TIME 01092022 1119		ARRIVAL DATE / TIME 01092022 1123	SCENE CLEARED DATE / TIME 01092022 1155	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 OPRS)		
TOTAL TIME ROADWAY CLOSED 0	OTHER INVESTIGATION TIME 2 5	TOTAL MINUTES 6 1	OFFICER'S NAME* A. ROUSH	CHECKED BY OFFICER'S NAME* S J				
			OFFICER'S BADGE NUMBER* 1 7 0	CHECKED BY OFFICER'S BADGE NUMBER* 1 0 3				

UNIT # 0 1	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER)	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)				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
LP STATE O H	LICENSE PLATE # JNV9351	VEHICLE IDENTIFICATION # K N A G R 4 A 6 X B 5 1 6 5 5 6 9	VEHICLE YEAR 2 0 1 1	VEHICLE MAKE KIA
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY NATIONAL GENERAL	INSURANCE POLICY # 2010570211	COLOR WHITE	VEHICLE MODEL OPTIMA
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME FOX	
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	# OCCUPANTS 0 1	VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	
UNIT TYPE 0 1		HAZARDOUS MATERIAL MATERIAL RELEASED PLACARD		
UNIT TYPE 0 1		CLASS # PLACARD ID #		
UNIT TYPE 0 1		# OF TRAILING UNITS		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 0	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN
SPECIAL FUNCTION 0 1		AUTONOMOUS MODE LEVEL		
CARGO BODY TYPE 0 1		1 - NONE 6 - BUS - CHARTERTOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER/UNKNOWN 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL		
CARGO BODY TYPE 0 1		1 - NO CARGO BODY TYPE /NOT APPLICABLE 2 - BUS		
VEHICLE DEFECTS 0 1		3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 5 - STEERING 6 - TIRE BLOWOUT 7 - TURN SIGNALS 8 - BRAKES 9 - HEAD LAMPS 10 - TAIL LAMPS		
NON-MOTORIST LOCATION AT IMPACT 0 1		5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL 8 - TURN SIGNALS 9 - HEAD LAMPS 10 - TAIL LAMPS		
ACTION 0 4		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		
ACTION 0 4		1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		
ACTION 0 4		1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 7 - TURN SIGNALS 8 - BRAKES 9 - HEAD LAMPS 10 - TAIL LAMPS		
ACTION 0 4		7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE /ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING		
ACTION 0 4		13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY		
ACTION 0 4		17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LEAVING TRAFFIC LANE 20 - PARKED IN TRAFFIC 21 - MAKING U-TURN 22 - ENTERING TRAFFIC LANE 23 - LEAVING TRAFFIC LANE 24 - SLOWING OR STOPPED IN TRAFFIC 25 - MAKING LEFT TURN 26 - MAKING RIGHT TURN 27 - TURN SIGNALS 28 - HEAD LAMPS 29 - TAIL LAMPS		
ACTION 0 4		20 - IMPROPER CROSSING 21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 24 - WORKING 25 - APPROACHING OR LEAVING VEHICLE 26 - STANDING 27 - WALKING, RUNNING, JOGGING, PLAYING 28 - STANDING OUTSIDE DISABLED VEHICLE 29 - PUSHING VEHICLE 30 - OTHER/UNKNOWN		
ACTION 0 4		31 - MAKING LEFT TURN 32 - MAKING RIGHT TURN 33 - TURN SIGNALS 34 - HEAD LAMPS 35 - TAIL LAMPS		
ACTION 0 4		36 - SWERVING TO AVOID 37 - LEAVING TRAFFIC LANE 38 - TURN SIGNALS 39 - HEAD LAMPS 40 - TAIL LAMPS		
ACTION 0 4		41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT		
ACTION 0 4		43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT		
ACTION 0 4		50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER/UNKNOWN		
SEQUENCE OF EVENTS 0 1		1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO/EQUIPMENT LOSS OR SHIFT 25 - IMPACT ATTENUATOR /CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE		
SEQUENCE OF EVENTS 0 1		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 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 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		
SEQUENCE OF EVENTS 0 1		31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER		
SEQUENCE OF EVENTS 0 1		37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT		

LOCAL REPORT NUMBER 2 2 0 0 1 9 1 7	
DAMAGE DAMAGE SCALE 4 1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
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 0 3 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP	
TRAFFIC TRAFFIC WAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY	
TRAFFIC CONTROL 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL	
# OF THROUGH LANES ON ROAD 2	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION FROM 3 TO 4 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER/UNKNOWN	
UNIT SPEED 1 0 1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED	
DETECTED SPEED 1 1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED	
POSTED SPEED 2 5	

OWNER	UNIT # <u>012</u>	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER	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																																																																																		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE																																																																																	
LP STATE <u>O H</u>	LICENSE PLATE # <u>JCZ3684</u>	VEHICLE IDENTIFICATION # <u>KMHCU5AE7CU021529</u>	VEHICLE YEAR <u>2012</u> VEHICLE MAKE <u>HYUNDAI</u>																																																																																
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY <u>PROGRESSIVE</u>	INSURANCE POLICY # <u>951345750</u>	COLOR <u>WHITE</u> VEHICLE MODEL <u>ACCENT</u>																																																																																
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT # <u></u>	TOWED BY: COMPANY NAME <u>MARCELLI'S</u>																																																																																
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT <input type="checkbox"/> EQUIPPED		# OCCUPANTS <u>0 1</u>	VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.																																																																																
UNIT TYPE 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		# OF TRAILING UNITS 7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)																																																																																	
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? <u>0</u>		AUTONOMOUS MODE LEVEL 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION																																																																																	
SPECIAL FUNCTION 1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		1 - FIRE 2 - MILITARY 3 - POLICE 4 - BUS - SHUTTLE 5 - BUS - OTHER 6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE 11 - FARM 12 - MOWING 13 - PUBLIC UTILITY 14 - MAIL CARRIER 15 - CONSTRUCTION EQUIPMENT 16 - BICYCLE 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																																																																																	
CARGO BODY TYPE 1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS		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																																																																																	
NON-MOTORIST LOCATION AT IMPACT 1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		1 - INTERSECTION - OTHER CROSSWALK 2 - MIDBLOCK - MARKED CROSSWALK 3 - INTERSECTION - OTHER LOCATION 4 - BICYCLE LANE 5 - SHOULDER / ROADSIDE 6 - SIDEWALK 7 - MEDIAN/CROSSING ISLAND 8 - TRAVEL LANE - OTHER LOCATION 9 - MEDIAN/CROSSING ISLAND AT INCIDENT SCENE 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER AT INCIDENT SCENE																																																																																	
ACTION 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN		ACTION 1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS 13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - LYING IN ROADWAY 23 - NOT DISCERNIBLE 24 - OPENING DOOR INTO ROADWAY 25 - LOAD SHIFTING/FALLING/SPILLING 26 - OTHER IMPROPER ACTION 27 - SWERVING TO AVOID																																																																																	
CONTRIBUTING CIRCUMSTANCES 1 - RAN RED LIGHT 2 - FAILURE TO YIELD 3 - RAN STOP SIGN 4 - RAN ROUGH TURN 5 - UNSAFE SPEED 6 - IMPROPER TURN		1 - IMPROPER START FROM A PARKED POSITION 2 - FOLLOWING TOO CLOSE / ACDA 3 - IMPROPER LANE CHANGE 4 - IMPROPER PASSING 5 - DROVE OFF ROAD 6 - IMPROPER BACKING 7 - LEFT OF CENTER 8 - FOLLOWING TOO 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																																																																																	
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LOCAL REPORT NUMBER <u>2 2 0 0 1 9 1 7</u>	
DAMAGE	
DAMAGE SCALE 4 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
DAMAGED AREA(S) INDICATE ALL THAT APPLY	
     	
<input type="checkbox"/> - NO DAMAGE <u>0</u> <input type="checkbox"/> - UNDERCARRIAGE <u>14</u> <input type="checkbox"/> - TOP <u>13</u> <input type="checkbox"/> - ALL AREAS <u>15</u> <input type="checkbox"/> - UNIT NOT AT SCENE <u>16</u>	
INITIAL POINT OF CONTACT 0 - NO DAMAGE 14 - UNDERCARRIAGE 1 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN 13 - TOP	
TRAFFIC	
TRAFFIC FLOW <u>2</u>	TRAFFIC CONTROL 1 - ONE-WAY 4 - STOP SIGN 2 - TWO-WAY 5 - YIELD SIGN 6 - NO CONTROL
# OF THROUGH LANES ON ROAD <u>2</u>	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
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 <u>2 5</u>	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED <u>2 5</u>	



MOTORIST / Non-MOTORIST

MOTORIST / NON-MOTORIST	LOCAL REPORT NUMBER																
	2 2 0 0 1 9 1 7					DATE OF BIRTH		AGE	GENDER								
UNIT #	NAME: LAST, FIRST, MIDDLE																
0 1	TRINIDAD PENA, ALORKIN																
ADDRESS: STREET, CITY, STATE, ZIP																	
605 ETHEL CT, MIDDLETON, OH 45044																	
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DOT-Compliant MC HELMET				SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
5						0 4	<input type="checkbox"/>				0 1	1	1	1			
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION				CITATION NUMBER						
				331.17a		<input checked="" type="checkbox"/>	FAIL TO YIELD LEFT TURN				250301						
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST			DRUG TEST(S)						
6				9	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	1	<input type="checkbox"/> STATUS	<input type="checkbox"/> TYPE	<input type="checkbox"/> VALUE	<input type="checkbox"/> STATUS	<input type="checkbox"/> TYPE	<input type="checkbox"/> RESULT	SELECT UP TO 4				
UNIT #	NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH				AGE	GENDER	
0 2	GOODMAN, ERIC TIMOTHY										0 5 2 0 2 0 0 0				2 1	M	
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE						
3546 HAZELWOOD CT, FAIRFIELD, OH 45014																	
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			
3	1	FAIRFIELD FD				0 4	<input type="checkbox"/>				0 1	1	1	1			
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION				CITATION NUMBER						
O H						<input type="checkbox"/>											
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	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	1	<input type="checkbox"/> STATUS	<input type="checkbox"/> TYPE	<input type="checkbox"/> VALUE	<input type="checkbox"/> STATUS	<input type="checkbox"/> TYPE	<input type="checkbox"/> RESULT	SELECT UP TO 4				
UNIT #	NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH				AGE	GENDER	
															0		
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE						
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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- TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		3- TEST GIVEN, RESULTS KNOWN					
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 UNKNOWN					
5- NO APPARENT INJURY		5- SECOND - MIDDLE		5- NOT APPLICABLE		5- M/C MOPED ONLY		5- EXCEPT CLASS A BUS		5- OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		5- NONE					
INJURED TAKEN BY		6- SECOND - RIGHT SIDE		9- DEPLOYMENT UNKNOWN		6- NO VALID OL		6- EXCEPT CLASS A & CLASS B BUS		6- PASSENGER		2- BLOOD					
1- NOT TRANSPORTED / TREATED AT SCENE		7- THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		1- NOT EJECTED		H- HAZMAT		7- EXCEPT TRACTOR-TRAILER		7- OTHER DISTRACTION INSIDE THE VEHICLE		3- URINE					
2- EMS		8- THIRD - MIDDLE		2- PARTIALLY EJECTED		M- MOTORCYCLE		8- INTERMEDIATE LICENSE RESTRICTIONS		8- OTHER DISTRACTION OUTSIDE THE VEHICLE		4- BREATH					
3- POLICE		9- THIRD - RIGHT SIDE		3- TOTALLY EJECTED		P- PASSENGER		9- LEARNER'S PERMIT RESTRICTIONS		9- OTHER / UNKNOWN		5- OTHER					
9- OTHER / UNKNOWN		10- SLEEPER SECTION OF TRUCK CAB		4- NOT APPLICABLE		N- TANKER		10- LIMITED TO DAYLIGHT ONLY									
SAFETY EQUIPMENT				TRAPPED		Q- MOTOR SCOOTER		11- LIMITED TO EMPLOYMENT									
1- NONE USED		11- PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		1- NOT TRAPPED		R- THREE-WHEEL MOTORCYCLE		12- LIMITED - OTHER									
2- SHOULDER BELT ONLY USED		12- PASSENGER IN UNENCLOSED CARGO AREA		2- EXTRICATED BY MECHANICAL MEANS		S- SCHOOL BUS		13- MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)									
3- LAP BELT ONLY USED		13- TRAILING UNIT		3- FREED BY NON-MECHANICAL MEANS		T- DOUBLE & TRIPLE TRAILERS		14- MILITARY VEHICLES ONLY									
4- SHOULDER & LAP BELT USED		14- RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				X- TANKER / HAZMAT		15- MOTOR VEHICLES WITHOUT AIR BRAKES									
5- CHILD RESTRAINT SYSTEM - FORWARD FACING		15- NON-MOTORIST						16- OUTSIDE MIRROR									
6- CHILD RESTRAINT SYSTEM - REAR FACING		99- OTHER / UNKNOWN						17- PROSTHETIC AID									
7- BOOSTER SEAT								18- OTHER									
8- HELMET USED																	
9- PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)																	
10- REFLECTIVE CLOTHING																	
11- LIGHTING - PEDESTRIAN / CYCLE ONLY																	
99- OTHER / UNKNOWN																	
											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					
												1- AMPHETAMINES					
												2- BARBITURATES					
												3- BENZODIAZEPINES					
												4- CANNABINOID					
												5- COCAINE					
												6- OPIATES / OPIOIDS					
												7- OTHER					
												8- NEGATIVE RESULTS					