



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

				LOCAL INFORMATION			LOCAL REPORT NUMBER*						
<input checked="" type="checkbox"/> PHOTOSTAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input checked="" type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		REPORTING AGENCY NAME* Fairfield Police Department			NCIC*		2 2 0 0 2 6 6 9						
COUNTY* 0 9		LOCALITY* 1-CITY 1 2-VILLAGE 3-TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP*			CRASH DATE / TIME*		UNIT IN ERROR				
				City of Fairfield			01 12 2022 14 23		98-ANIMAL 0 1 99-UNKNOWN				
REFERENCE LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME Resor		ROAD TYPE R D	LATITUDE DECIMAL DEGREES 39 31 87 31		CRASH SEVERITY				
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Gilmore		ROAD TYPE D R	LONGITUDE DECIMAL DEGREES 84 52 45 03		1-FATAL 2-SERIOUS INJURY 3-MINOR INJURY 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY				
REFERENCE POINT 1-INTERSECTION 2-MILE POST 3-HOUSE # 1		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 4					
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 0 1				MANNER OF CRASH COLLISION/IMPACT 1-NOT COLLISION 2-BETWEEN 3-TWO MOTOR VEHICLES IN 4-TRANSPORT 5-REAR-END 6-HEAD-ON 2		DIRECTION OF TRAVEL 1-NORTH 2-SOUTH 3-EAST 4-WEST		ROADWAY 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 0 1		LOCATION OF CRASH IN WORK ZONE 1-BEFORE THE 1ST WORK ZONE 2-ADVANCE WARNING AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA		CONTOUR 1		CONDITIONS 1	SURFACE 2				
LIGHT CONDITION 1-DAYLIGHT 2-DAWN/DUSK 3-DARK - LIGHTED ROADWAY 4-DARK - ROADWAY NOT LIGHTED 5-DARK - UNKNOWN ROADWAY LIGHTING 9-OTHER / UNKNOWN 1				WEATHER 1-CLEAR 2-CLOUDY 3-FOG, SMOG, SMOKE 4-RAIN 5-SLEET, HAIL 0 1 6-SNOW 7-SEVERE CROSSWINDS 8-BLOWING SAND, SOIL, DIRT, SNOW 9-FREEZING RAIN OR FREEZING DRIZZLE 99-OTHER / UNKNOWN		1-STRAIGHT LEVEL 2-STRAIGHT GRADE 3-CURVE LEVEL 4-CURVE GRADE 9-OTHER/UNKNOWN		1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN	1-CONCRETE 2-BLACKTOP, BITUMINOUS, ASPHALT 3-BRICK/BLOCK 4-SLAG, GRAVEL, STONE 5-DIRT 9-OTHER/UNKNOWN				
NARRATIVE On January 12, 2022 at about 2:23 P.M. Unit 1 was traveling westbound on Resor Road at approximately 15 M.P.H. and when at Gilmore Road failed to stop within the assured clear distance ahead and collided with Unit 2 which was also traveling westbound on Resor Road. Both Units were making a right turn onto Gilmore Road at the time of the accident.										 Indicate the north direction with an "N" on the compass diagram.			
SEE OH-2													
CRASH REPORTED DATE / TIME 0 1 12 2022 14 23			DISPATCH DATE / TIME 0 1 12 2022 14 25			ARRIVAL DATE / TIME 0 1 12 2022 14 38			SCENE CLEARED DATE / TIME 0 1 12 2022 15 17			REPORT TAKEN BY	
TOTAL TIME ROADWAY CLOSED 3 0		OTHER INVESTIGATION TIME 8 2		TOTAL MINUTES 8 2		OFFICER'S NAME* C. Frazier			CHECKED BY OFFICER'S NAME* <i>Sel Ad</i>			<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	
						OFFICER'S BADGE NUMBER* 1 5 8			CHECKED BY OFFICER'S BADGE NUMBER* 1 4 6			<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODS)	

OWNER

UNIT # <u>01</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>PENSMOM</u>	VEHICLE IDENTIFICATION # <u>5J8TB4H712GL0061599</u>	VEHICLE YEAR <u>2016</u>	VEHICLE MAKE <u>ACURA</u>
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY <u>STATEFARM</u>	INSURANCE POLICY # <u>C666561F0835</u>	COLOR <u>MAROON</u>	VEHICLE MODEL <u>RDX</u>
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT		#OCCUPANTS <u>0 2</u>	VEHICLE WEIGHT GVWR/GCW 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD

<u>0 3</u>	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNITTRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP
UNIT TYPE	# OF TRAILING UNITS <u>0</u>			

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

<u>0 1</u>	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
CARGO BODY TYPE					

<u>0 1</u>	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		
VEHICLE DEFECTS	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS 4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE					9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT	99 - OTHER / UNKNOWN

<u>0 1</u>	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED 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 99 - OTHER / UNKNOWN
NON-MOTORIST LOCATION AT IMPACT					

<u>0 3</u>	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING <u>0 5</u> 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN	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 99 - OTHER / UNKNOWN	
ACTION					

<u>0 8</u>	1 - NONE 2 - FAILURE TO YIELD 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 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
CONTRIBUTING CIRCUMSTANCES					

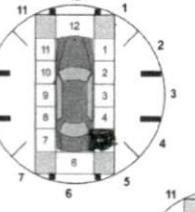
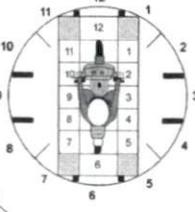
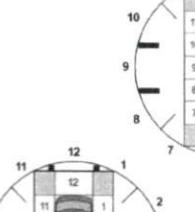
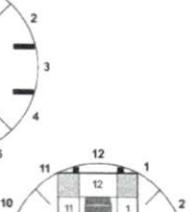
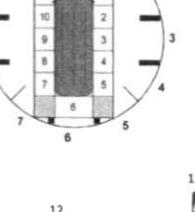
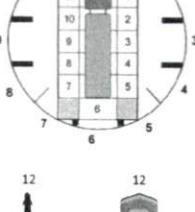
SEQUENCE OF EVENTS	NON-COLLISION				
<u>1 2 0</u>	1 - OVERTURN / ROLLOVER 2 - FIRE EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - 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 MOBILE OBJECT
COLLISION					

<u>4</u>	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 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	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
COLLISION WITH FIXED OBJECT - STRUCK					

<u>1</u>	FIRST HARMFUL EVENT	<u>1</u>	MOST HARMFUL EVENT
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LOCAL REPORT NUMBER <u>2 2 0 0 2 6 6 9</u>		
DAMAGE		
<u>2</u>	DAMAGE SCALE 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		
<u>1 1</u>	0 - NO DAMAGE 1 - 12 - REFER TO UNIT DIAGRAM 13 - TOP	14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
TRAFFIC		
TRAFFIC WAY FLOW	<u>2</u>	TRAFFIC CONTROL
		1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 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		
FROM <u>3</u> TO <u>6</u>		1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
UNIT SPEED		
<u>1 5</u>	DETECTED SPEED	
	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED	
POSTED SPEED		
<u>2 5</u>		

OWNER	UNIT # <u>0 1 2</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>GQC7478</u>	VEHICLE IDENTIFICATION # <u>2FMEK62C519BA181919815</u>	VEHICLE YEAR <u>2009</u>
INSURANCE COMPANY <input checked="" type="checkbox"/> VERIFIED GRANGE		INSURANCE POLICY # <u>PA34762382</u>	VEHICLE MAKE FORD
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/>	HIT/SKIP UNIT <input type="checkbox"/>	#OCCUPANTS <u>0 2</u>	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.
UNIT TYPE <u>0 3</u>		HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	
4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		CLASS # PLACARD ID #	
3 - SPORT UTILITY VEHICLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)		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	
1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - MOTORCYCLE 4 - AUTOCAR		7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCAR 10 - MOVED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	
12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME		18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 199 - UNKNOWN OR HIT/SKIP	
# OF TRAILING UNITS <u>0</u>		WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? <u>2</u> 1 - YES 2 - NO 9 - OTHER / UNKNOWN	
AUTONOMOUS MODE LEVEL <u>0</u>		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN	
SPECIAL FUNCTION <u>0 1</u>		1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	
1 - FIRE 2 - MILITARY 3 - POLICE 4 - PUBLIC UTILITY 5 - CONSTRUCTION EQUIPMENT 6 - MAIL CARRIER 7 - MOWING 8 - SNOW REMOVAL 9 - TOWING 10 - SAFETY SERVICE PATROL		11 - BUS - CHARTER/TOUR 12 - SHUTTLE 13 - SHUTTLE 14 - PUBLIC UTILITY 15 - AMBULANCE	
CARGO BODY TYPE <u>0 1</u>		1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL 8 - TRAILER EQUIPMENT DEFECTIVE 9 - POLE 10 - FLAT BED 11 - DUMP 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 15 - OTHER / UNKNOWN	
VEHICLE DEFECTS <u>0 1</u>		1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK 3 - TRAVEL LANE - OTHER LOCATION	
NON-MOTORIST LOCATION AT IMPACT <u>0 1</u>		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 14 - WALKING, RUNNING, JOGGING, PLAYING 15 - STANDING OUTSIDE DISABLED VEHICLE 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 24 - OTHER UNKNOWN ACTION	
ACTION <u>0 4</u>		1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING <u>0 5</u> 4 - STRUCK PRE-CRASH ACTIONS 5 - BOTH STRIKING & STRUCK 6 - OTHER / UNKNOWN	
CONTRIBUTING CIRCUMSTANCES <u>0 1</u>		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 - DRIVING ON THE WRONG SIDE 13 - SWERVING TO AVOID 14 - WORKING 15 - PUSHING VEHICLE 16 - NEUTRAL POSITION 17 - SWERVING TO AVOID 18 - SWERVING TO AVOID 19 - SWERVING TO AVOID 20 - SWERVING TO AVOID 21 - SWERVING TO AVOID 22 - SWERVING TO AVOID 23 - SWERVING TO AVOID 24 - SWERVING TO AVOID 25 - SWERVING TO AVOID 26 - SWERVING TO AVOID 27 - SWERVING TO AVOID 28 - SWERVING TO AVOID 29 - SWERVING TO AVOID 30 - SWERVING TO AVOID 31 - SWERVING TO AVOID 32 - SWERVING TO AVOID 33 - SWERVING TO AVOID 34 - SWERVING TO AVOID 35 - SWERVING TO AVOID 36 - SWERVING TO AVOID 37 - SWERVING TO AVOID 38 - SWERVING TO AVOID 39 - SWERVING TO AVOID 40 - SWERVING TO AVOID 41 - SWERVING TO AVOID 42 - SWERVING TO AVOID 43 - SWERVING TO AVOID 44 - SWERVING TO AVOID 45 - SWERVING TO AVOID 46 - SWERVING TO AVOID 47 - SWERVING TO AVOID 48 - SWERVING TO AVOID 49 - SWERVING TO AVOID 50 - SWERVING TO AVOID 51 - SWERVING TO AVOID 52 - SWERVING TO AVOID 53 - SWERVING TO AVOID 54 - SWERVING TO AVOID 55 - SWERVING TO AVOID 56 - SWERVING TO AVOID 57 - SWERVING TO AVOID 58 - SWERVING TO AVOID 59 - SWERVING TO AVOID 60 - SWERVING TO AVOID 61 - SWERVING TO AVOID 62 - SWERVING TO AVOID 63 - SWERVING TO AVOID 64 - SWERVING TO AVOID 65 - SWERVING TO AVOID 66 - SWERVING TO AVOID 67 - SWERVING TO AVOID 68 - SWERVING TO AVOID 69 - SWERVING TO AVOID 70 - SWERVING TO AVOID 71 - SWERVING TO AVOID 72 - SWERVING TO AVOID 73 - SWERVING TO AVOID 74 - SWERVING TO AVOID 75 - SWERVING TO AVOID 76 - SWERVING TO AVOID 77 - SWERVING TO AVOID 78 - SWERVING TO AVOID 79 - SWERVING TO AVOID 80 - SWERVING TO AVOID 81 - SWERVING TO AVOID 82 - SWERVING TO AVOID 83 - SWERVING TO AVOID 84 - SWERVING TO AVOID 85 - SWERVING TO AVOID 86 - SWERVING TO AVOID 87 - SWERVING TO AVOID 88 - SWERVING TO AVOID 89 - SWERVING TO AVOID 90 - SWERVING TO AVOID 91 - SWERVING TO AVOID 92 - SWERVING TO AVOID 93 - SWERVING TO AVOID 94 - SWERVING TO AVOID 95 - SWERVING TO AVOID 96 - SWERVING TO AVOID 97 - SWERVING TO AVOID 98 - SWERVING TO AVOID 99 - SWERVING TO AVOID	
SEQUENCE OF EVENTS <u>1 2 0</u>		1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 6 - IMPROPER TURN 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 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 - ANIMAL - FARM 26 - ANIMAL - DEER 27 - ANIMAL - OTHER 28 - MOTOR VEHICLE IN TRANSPORT 29 - OTHER FIXED OBJECT 30 - OTHER UNKNOWN ACTION 31 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 32 - DOWNHILL RUNAWAY 33 - OTHER NON-COLLISION 34 - PEDESTRIAN 35 - PEDAL CYCLE 36 - PARKED MOTOR VEHICLE 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES 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 55 - OTHER UNKNOWN ACTION	
COLLISION WITH FIXED OBJECT - STRUCK <u>4 5 1</u>		1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 6 - IMPROPER TURN 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 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 - ANIMAL - FARM 26 - ANIMAL - DEER 27 - ANIMAL - OTHER 28 - MOTOR VEHICLE IN TRANSPORT 29 - OTHER FIXED OBJECT 30 - OTHER UNKNOWN ACTION 31 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 32 - DOWNHILL RUNAWAY 33 - OTHER NON-COLLISION 34 - PEDESTRIAN 35 - PEDAL CYCLE 36 - PARKED MOTOR VEHICLE 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES 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 55 - OTHER UNKNOWN ACTION	
FIRST HARMFUL EVENT <u>1</u>		1 - MOST HARMFUL EVENT	

LOCAL REPORT NUMBER <u>2 2 0 0 2 6 6 9</u>	
DAMAGE	
DAMAGE SCALE 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 - NO DAMAGE 14 - UNDERCARRIAGE <u>0 5</u> 1 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE DIAGRAM 99 - UNKNOWN 13 - TOP	
TRAFFIC	
TRAFFIC WAY FLOW <u>2</u>	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - TWO-WAY 5 - YIELD SIGN 3 - FLASHER 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	
FROM <u>3</u> TO <u>6</u>	
UNIT SPEED <u>1 5</u>	
DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED	
POSTED SPEED <u>2 5</u>	

MOTORIST / Non-MOTORIST

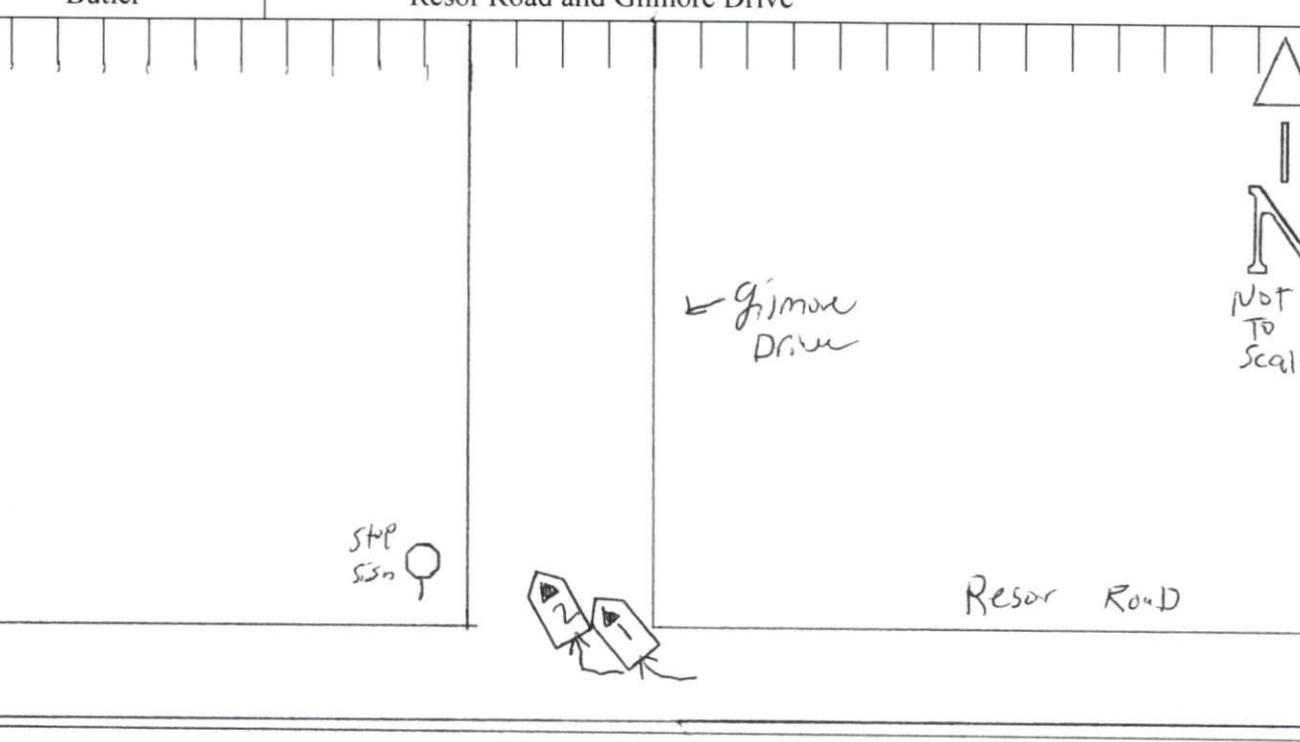
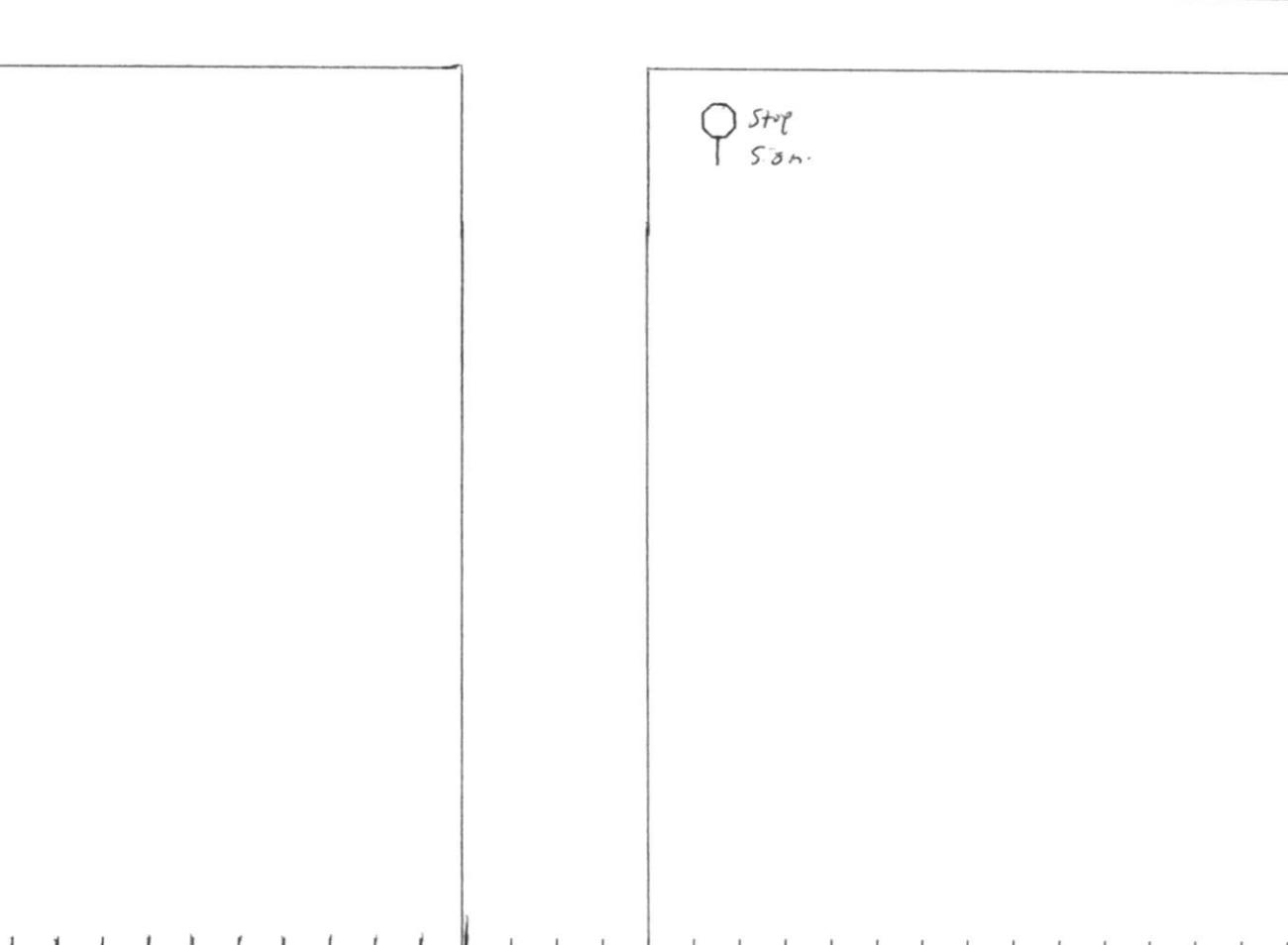
LOCAL REPORT NUMBER
2 2 0 0 2 6 6 9

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE 0 1 PRUDEN, KEYARA, RENEE					DATE OF BIRTH 1 0 2 5 1 9 8 8	AGE 3 3	GENDER F
	ADDRESS: STREET, CITY, STATE, ZIP 11755 NORBOURNE DRIVE APT 804, CINCINNATI, OHIO, 45240					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 O H	OPERATOR LICENSE NUMBER		OFFENSE CHARGED 333.03A	LOCAL CODE <input checked="" type="checkbox"/>	OFFENSE DESCRIPTION ACDA		CITATION NUMBER 249533		
OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	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 1	DRUG TEST(S) STATUS 1
UNIT # 0 2	NAME: LAST, FIRST, MIDDLE CHERRY, PHILLIP, W					DATE OF BIRTH 0 8 1 0 1 9 6 1	AGE 6 0	GENDER M	
ADDRESS: STREET, CITY, STATE, ZIP 7 GILMORE CT, FAIRFIELD, OHIO, 45014					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 O H	OPERATOR LICENSE NUMBER		OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER		
OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	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 1	DRUG TEST(S) STATUS 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 <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER		
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION	ALCOHOL TEST STATUS 1	TYPE 1	VALUE 1	DRUG TEST(S) STATUS 1
INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS			
1-FATAL	1-FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1-NOT DEPLOYED	1-CLASS A	1-ALCOHOL INTERLOCK DEVICE	1-NOT DISTRACTED	1-NONE GIVEN			
2-SUSPECTED SERIOUS INJURY	2-FRONT - MIDDLE	2-DEPLOYED FRONT	2-CLASS B	2-CDL INTRASTATE ONLY	2-MANUALLY OPERATING AN ELECTRONIC 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 UNKNOWN			
4-POSSIBLE INJURY	4-SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4-DEPLOYED BOTH FRONT / SIDE	4-REGULAR CLASS (OHIO = D)	4-FARM WAIVER	4-TEST GIVEN, RESULTS KNOWN	4-TEST GIVEN, RESULTS UNKNOWN			
5-NO APPARENT INJURY	5-SECOND - MIDDLE	5-NOT APPLICABLE	5-M/C MOVED ONLY	5-EXCEPT CLASS A BUS	5-EXCEPT CLASS A & CLASS B BUS	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-EXCEPT TRACTOR-TRAILER	1-NONE			
1-NOT TRANSPORTED / TREATED AT SCENE	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	7-NOT DEPLOYED	7-CLASS A	7-INTERMEDIATE LICENSE RESTRICTIONS	7-OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	2-BLOOD			
2-EMS	8-THIRD - MIDDLE	8-PARTIALLY EJECTED	8-CLASS B	8-PASSenger	8-OTHER DISTRACTION INSIDE THE VEHICLE	3-URINE			
3-POLICE	9-THIRD - RIGHT SIDE	9-TOTALLY EJECTED	9-CLASS C	9-OTHER DISTRACTION OUTSIDE THE VEHICLE	9-OTHER / UNKNOWN	4-BREATH			
9-OTHER / UNKNOWN	10-SLEEPER SECTION OF TRUCK CAB	10-NOT APPLICABLE	10-REGULAR CLASS (OHIO = D)	10-LIMITED TO DAYLIGHT ONLY	10-MILITARY VEHICLES ONLY	5-OTHER			
SAFETY EQUIPMENT	TRAPPED	EJECTION	OL ENDORSEMENT	CONDITION	TEST STATUS	ALCOHOL TEST TYPE	DRUG TEST TYPE	DRUG TEST RESULT(S)	
1-NONE USED	1-NOT TRAPPED	1-NOT EJECTED	H-HAZMAT	1-APPARENTLY NORMAL	1-NONE	1-NONE	1-NONE	1-AMPHETAMINES	
2-SHOULDER BELT ONLY USED	2-EXTRICATED BY MECHANICAL MEANS	2-PARTIALLY EJECTED	M-MOTORCYCLE	2-PHYSICAL IMPAIRMENT	2-BLOOD	2-BLOOD	2-BLOOD	2-BARBITURATES	
3-LAP BELT ONLY USED	3-FREED BY NON-MECHANICAL MEANS	3-TOTALLY EJECTED	P-PASSENGER	3-EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	3-URINE	3-URINE	3-URINE	3-BENZODIAZEPINES	
4-SHOULDER & LAP BELT USED	4-NOT APPLICABLE	4-NOT APPLICABLE	N-TANKER	4-ILLNESS	4-OTHER	4-OTHER	4-OTHER	4-CANNABINOIDs	
5-CHILD RESTRAINT SYSTEM - FORWARD FACING	5-PASSenger IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	5-PASSenger IN UNENCLOSED CARGO AREA	Q-MOTOR SCOOTER	5-FELL ASLEEP, FAINTED, FATIGUED, ETC.	5-COCaine	5-COCaine	5-COCaine	5-OPIATES / OPIOIDS	
6-CHILD RESTRAINT SYSTEM - REAR FACING	6-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	6-TRAILING UNIT	R-THREE-WHEEL MOTORCYCLE	6-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	6-OTHER	6-OTHER	6-OTHER	6-Negative RESULTS	
7-BOOSTER SEAT	7-NOT APPLICABLE	7-NOT APPLICABLE	S-SCHOOL BUS	7-OTHER / UNKNOWN	7-OTHER / UNKNOWN	7-OTHER / UNKNOWN	7-OTHER / UNKNOWN	7-OTHER / UNKNOWN	
8-HELMET USED	8-OTHER / UNKNOWN	8-OTHER / UNKNOWN	T-DOUBLE & TRIPLE TRAILERS	8-OTHER / UNKNOWN	8-OTHER / UNKNOWN	8-OTHER / UNKNOWN	8-OTHER / UNKNOWN	8-OTHER / UNKNOWN	
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	9-OTHER / UNKNOWN	9-OTHER / UNKNOWN	X-TANKER / HAZMAT	9-OTHER / UNKNOWN	9-OTHER / UNKNOWN	9-OTHER / UNKNOWN	9-OTHER / UNKNOWN	9-OTHER / UNKNOWN	
10-REFLECTIVE CLOTHING	10-OTHER / UNKNOWN	10-OTHER / UNKNOWN	GENDER	15-MOTOR VEHICLES WITHOUT AIR BRAKES	15-MOTOR VEHICLES WITHOUT AIR BRAKES	15-MOTOR VEHICLES WITHOUT AIR BRAKES	15-MOTOR VEHICLES WITHOUT AIR BRAKES	15-MOTOR VEHICLES WITHOUT AIR BRAKES	
11-LIGHTING - PEDESTRIAN / CYCLE ONLY	11-OTHER / UNKNOWN	11-OTHER / UNKNOWN	F-FEMALE	16-OUTSIDE MIRROR	16-OUTSIDE MIRROR	16-OUTSIDE MIRROR	16-OUTSIDE MIRROR	16-OUTSIDE MIRROR	
99-OTHER / UNKNOWN	99-OTHER / UNKNOWN	99-OTHER / UNKNOWN	M-MALE	17-PROSTHETIC AID	17-PROSTHETIC AID	17-PROSTHETIC AID	17-PROSTHETIC AID	17-PROSTHETIC AID	
			U-OTHER / UNKNOWN	18-OTHER	18-OTHER	18-OTHER	18-OTHER	18-OTHER	



OCCUPANT / WITNESS ADDENDUM

OCCUPANT	LOCAL REPORT NUMBER																																																																													
	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH			AGE	GENDER																																																																					
1	SAYLES, PARKER			0 2 0 2 2 0 1 4			7	F																																																																						
ADDRESS: STREET, CITY, STATE, ZIP 11755 NORBOURNE DRIVE APT 804, CINCINNATI, OHIO, 45240																																																																														
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LOCAL REPORT NUMBER	PD22002669	REPORTING AGENCY	Fairfield Police Department	DATE OF ACCIDENT	1/12/22
IN COUNTY OF	Butler	ACCIDENT LOCATION	Resor Road and Gilmore Drive		
					
OFFICER'S SIGNATURE			C.Frazier		BADGE NO. 158