



# 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  
REPORTING AGENCY NAME\* Fairfield Police Department  
NCIC\* 00901

2 2 0 0 4 6 0 8  
HIT/SKIP  
1 - SOLVED  
2 - UNSOLVED  
NUMBER OF UNITS 02  
UNIT IN ERROR  
98 - ANIMAL  
99 - UNKNOWN  
01

COUNTY\* 09  
LOCALITY\* 1  
LOCATION: CITY, VILLAGE, TOWNSHIP\* City of Fairfield

CRASH DATE / TIME\* 01212022 1231  
CRASH SEVERITY  
1 - FATAL  
2 - SERIOUS INJURY SUSPECTED  
3 - MINOR INJURY SUSPECTED  
4 - INJURY POSSIBLE  
5 - PROPERTY DAMAGE ONLY  
5

ROUTE TYPE S R  
ROUTE NUMBER 4  
PREFIX 1 - NORTH  
2 - SOUTH  
3 - EAST  
4 - WEST

LATITUDE DECIMAL DEGREES 39.338913

REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)  
5166

LONGITUDE DECIMAL DEGREES -84.533053

REFERENCE POINT  
1 - INTERSECTION  
2 - MILE POST  
3 - HOUSE #  
3  
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  
☐ WITHIN INTERSECTION OR ON APPROACH  
☐ WITHIN INTERCHANGE AREA  
NUMBER OF APPROACHES  
ROADWAY  
☐ ROADWAY DIVIDED

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  
1  
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, DEPRESSIONED MEDIAN  
4 - DIVIDED, RAISED 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

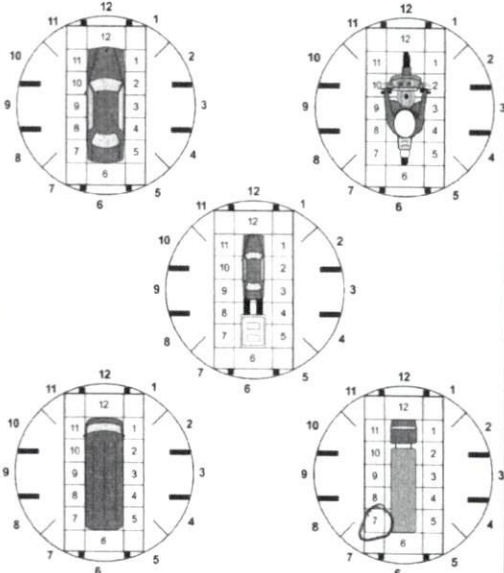
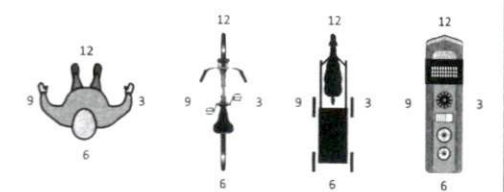
CONTOUR  
1 - STRAIGHT LEVEL  
2 - STRAIGHT GRADE  
3 - CURVE LEVEL  
4 - CURVE GRADE  
9 - OTHER/UNKNOWN  
CONDITIONS  
1 - DRY  
2 - WET  
3 - SNOW  
4 - ICE  
5 - SAND, MUD, DIRT, OIL, GRAVEL  
6 - WATER (STANDING, MOVING)  
7 - SLUSH  
9 - OTHER/UNKNOWN  
SURFACE  
1 - CONCRETE  
2 - BLACKTOP, BITUMINOUS, 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

NARRATIVE  
On 01-21-22, at 12:31 p.m. Unit 1 was turning right from Dixie Hwy onto Nilles Rd when a set of trailer tires separated from the trailer and struck Unit 2 which, was traveling north on Dixie Hwy. The driver of Unit 1 continued on Nilles Rd unaware that the tires had separated from the trailer. He returned once he became aware of the issue.  
SEE OH-2  
Indicate the north direction with an "N" on the compass diagram.

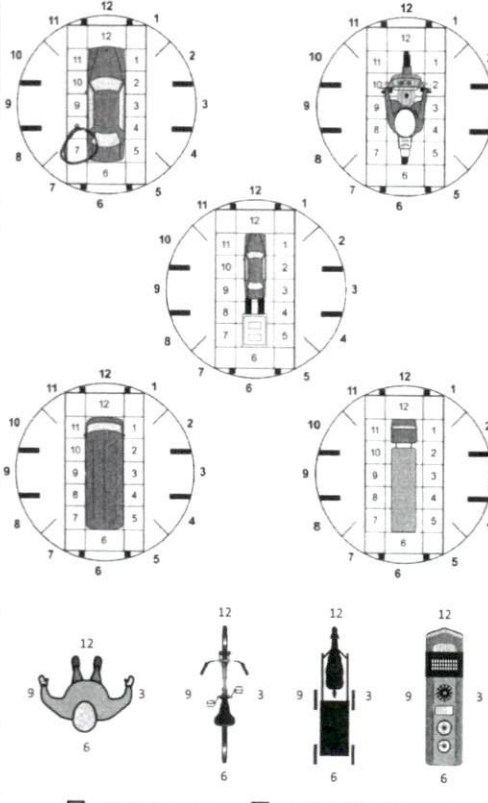
CRASH REPORTED DATE / TIME 01212022 1231  
DISPATCH DATE / TIME 01212022 1232  
ARRIVAL DATE / TIME 01212022 1237  
SCENE CLEARED DATE / TIME 01212022 1322  
TOTAL TIME ROADWAY CLOSED 0  
OTHER INVESTIGATION TIME 0  
TOTAL MINUTES 50  
OFFICER'S NAME\* D. Setterstrom  
OFFICER'S BADGE NUMBER\* 121  
CHECKED BY OFFICER'S NAME\*  
CHECKED BY OFFICER'S BADGE NUMBER\* 103  
REPORT TAKEN BY  
☒ POLICE AGENCY  
☐ MOTORIST  
☐ SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO JSPS)

OWNER	UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER)		OWNER PHONE: INCLUDE AREA CODE (X SAME AS DRIVER)	
	01				
VEHICLE	OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)				
	Tyton Trucking				
VEHICLE	LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
	OH	PWM6672	1XKADIB9X07J153975	2007	Kenworth
VEHICLE	<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
		Great American	GTP1814843401	White	Semi
VEHICLE	TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME	
	<input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		113676		
VEHICLE	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS	HAZARDOUS MATERIAL	
			01	<input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	
VEHICLE	VEHICLE WEIGHT GVWR/GCWR		CLASS # PLACARD ID #		
	3				
VEHICLE	UNIT TYPE				
	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 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 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP				
VEHICLE	# OF TRAILING UNITS				
	1				
VEHICLE	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?				
	1 - YES 2 - NO 9 - OTHER / UNKNOWN 0				
VEHICLE	AUTONOMOUS MODE LEVEL				
	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				
VEHICLE	CARGO BODY TYPE				
	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	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				
VEHICLE	NON-MOTORIST LOCATION AT IMPACT				
	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK 3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION 6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK 9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN				
VEHICLE	ACTION				
	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 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				
VEHICLE	CONTRIBUTING CIRCUMSTANCES				
	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				
VEHICLE	SEQUENCE OF EVENTS				
	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 MOVABLE OBJECT				
VEHICLE	COLLISION WITH FIXED OBJECT - STRUCK				
	25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN				
VEHICLE	FIRST HARMFUL EVENT				
	1				
VEHICLE	MOST HARMFUL EVENT				
	1				

LOCAL REPORT NUMBER	
2 2 0 0 4 6 0 8	
DAMAGE	
DAMAGE SCALE	
1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
3	
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 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN	
0 7	
TRAFFIC	
TRAFFICWAY FLOW	TRAFFIC CONTROL
1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
4	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	DETECTED SPEED
1 0	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED	
3 5	



OWNER	UNIT # 02	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					
VEHICLE	LP STATE OH	LICENSE PLATE # GVU4011	VEHICLE IDENTIFICATION # KNA G M 4 A 7 3 F 5 6 0 0 8 7	VEHICLE YEAR 2015	VEHICLE MAKE Kia		
	<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY Progressive	INSURANCE POLICY # 933178089	COLOR White	VEHICLE MODEL Optima		
	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	US DOT #			
	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> 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 Fox				
			HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD				
	UNIT TYPE 01		CLASS # PLACARD ID #				
	# OF TRAILING UNITS 0						
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		AUTONOMOUS MODE LEVEL				
	1 - YES 2 - NO 9 - OTHER / UNKNOWN		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN				
SPECIAL FUNCTION	1 - NONE		6 - BUS - CHARTER/TOUR		11 - FIRE	16 - FARM	21 - MAIL CARRIER
	2 - TAXI		7 - BUS - INTERCITY		12 - MILITARY	17 - MOWING	99 - OTHER / UNKNOWN
	3 - ELECTRONIC RIDE SHARING		8 - BUS - SHUTTLE		13 - POLICE	18 - SNOW REMOVAL	
	4 - SCHOOL TRANSPORT		9 - BUS - OTHER		14 - PUBLIC UTILITY	19 - TOWING	
CARGO BODY TYPE	1 - NO CARGO BODY TYPE / NOT APPLICABLE		3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE		5 - INTERMODAL CONTAINER CHASSIS	8 - POLE	12 - CONCRETE MIXER
	2 - BUS		4 - LOGGING		6 - CARGO VAN/ENCLOSED BOX	9 - CARGO TANK	13 - AUTO TRANSPORTER
VEHICLE DEFECTS	1 - TURN SIGNALS		4 - BRAKES		7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN
	2 - HEAD LAMPS		5 - STEERING		8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT	
NON-MOTORIST LOCATION AT IMPACT	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
ACTION	1 - NON-CONTACT		1 - STRAIGHT AHEAD		7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE
	2 - NON-COLLISION		2 - BACKING		8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19 - STANDING
PRE-CRASH ACTIONS	3 - STRIKING		3 - CHANGING LANES		9 - LEAVING TRAFFIC LANE	15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST
	4 - STRUCK		4 - OVERTAKING/PASSING		10 - PARKED	16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE
CONTRIBUTING CIRCUMSTANCES	5 - BOTH STRIKING & STRUCK		5 - MAKING RIGHT TURN		11 - SLOWING OR STOPPED IN TRAFFIC	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN
	9 - OTHER / UNKNOWN		6 - MAKING LEFT TURN		12 - DRIVERLESS		
SEQUENCE OF EVENTS	1 - NONE		7 - LEFT OF CENTER		13 - IMPROPER START FROM A PARKED POSITION	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY
	2 - FAILURE TO YIELD		8 - FOLLOWING TOO CLOSE / ACDA		14 - STOPPED OR PARKED ILLEGALLY	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE
FIRST HARMFUL EVENT	3 - RAN RED LIGHT		9 - IMPROPER LANE CHANGE		15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLING/ SPILLING	23 - OPENING DOOR INTO ROADWAY
	4 - RAN STOP SIGN		10 - IMPROPER PASSING		16 - WRONG WAY	20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION
MOST HARMFUL EVENT	5 - UNSAFE SPEED		11 - DROVE OFF ROAD				
	6 - IMPROPER TURN		12 - IMPROPER BACKING				
NON-COLLISION	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
COLLISION WITH FIXED OBJECT - STRUCK	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	19 - ANIMAL - OTHER	
FIRST HARMFUL EVENT	5 - CARGO / EQUIPMENT LOSS OR SHIFT		10 - CROSS MEDIAN		15 - PEDAL CYCLE	20 - MOTOR VEHICLE IN TRANSPORT	
						21 - PARKED MOTOR VEHICLE	
FIRST HARMFUL EVENT	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
FIRST HARMFUL EVENT	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
FIRST HARMFUL EVENT	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
FIRST HARMFUL EVENT						49 - FIRE HYDRANT	

LOCAL REPORT NUMBER 2 2 0 0 4 6 0 8	
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 1-12 - REFER TO UNIT DIAGRAM 13 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN	
TRAFFIC TRAFFICWAY FLOW 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 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 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
UNIT SPEED 1 5	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED 3 5	





# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER									
2	2	0	0	4	6	0	8		

MOTORIST / NON-MOTORIST	UNIT # 0 1	NAME: LAST, FIRST, MIDDLE Loechel, Donald G.					DATE OF BIRTH 0 6 0 1 1 9 5 5			AGE 6 6	GENDER M
	ADDRESS: STREET, CITY, STATE, ZIP 6920 Brooks Rd Harrison, OH 45030						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	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 5	EJECTION 1	TRAPPED 1
	OL STATE O H	OPERATOR LICENSE NUMBER RR571505		OFFENSE CHARGED		LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER		
	OL CLASS 1	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 .		DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4

MOTORIST / NON-MOTORIST	UNIT # 0 2	NAME: LAST, FIRST, MIDDLE Allen, Jacob C.					DATE OF BIRTH 0 3 0 3 1 9 8 3			AGE 3 8	GENDER M
	ADDRESS: STREET, CITY, STATE, ZIP 7972 Laurel Wood Dr Maineville, OH 45039						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	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
	OL STATE O H	OPERATOR LICENSE NUMBER RY514273		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 .		DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4

MOTORIST / NON-MOTORIST	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	<input type="checkbox"/> 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 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 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN	1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO = D) 5 - M/C MOPED ONLY 6 - NO VALID OL	1 - ALCOHOL INTERLOCK DEVICE 2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A & CLASS B BUS 7 - EXCEPT TRACTOR-TRAILER 8 - INTERMEDIATE LICENSE RESTRICTIONS 9 - LEARNER'S PERMIT RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER	1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING) 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD COMMUNICATION DEVICE 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE 6 - PASSENGER 7 - OTHER DISTRACTION INSIDE THE VEHICLE 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE 9 - OTHER / UNKNOWN	1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN
INJURED TAKEN BY	EJECTION		OL ENDORSEMENT	ALCOHOL TEST TYPE		
1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN	1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE		H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT	1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER		
SAFETY EQUIPMENT	TRAPPED		GENDER	DRUG TEST TYPE		
1 - NONE USED 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN	1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS		F - FEMALE M - MALE U - OTHER / UNKNOWN	1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER		
				CONDITION	DRUG TEST RESULT(S)	
				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 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS	

LOCAL REPORT NUMBER 22-004608	REPORTING AGENCY Fairfield Police Department	DATE OF ACCIDENT 1-21-22
IN COUNTY OF Butler	ACCIDENT LOCATION Dixie Hwy // Nilles Rd. // Stadium Dr. // 5166	

STADIUM DR.

DIXIE HWY.

NILLES RD

5166

Semi Trailer Tires

#2

NOT TO SCALE

N

OFFICER'S SIGNATURE

BADGE NO. 121