



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

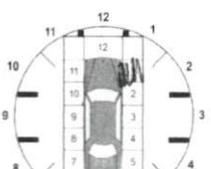
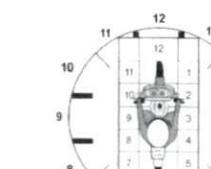
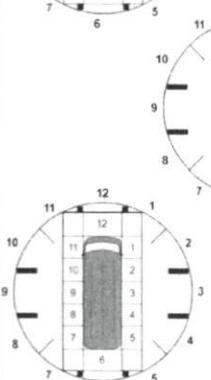
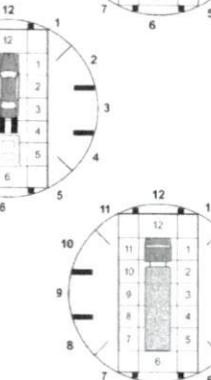
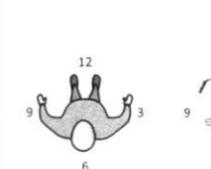
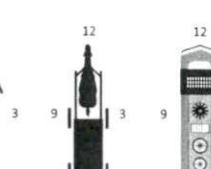
			LOCAL INFORMATION			LOCAL REPORT NUMBER*					
<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input checked="" type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		REPORTING AGENCY NAME* Fairfield Police Department			NCIC* 0 0 9 0 1						
COUNTY* 0 9		LOCALITY* 1-CITY 1 2-VILLAGE 1 3-TOWNSHIP 1			LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield			HIT/SKIP 2 2 0 0 6 7 8 9 1-SOLVED 2-UNRESOLVED	NUMBER OF UNITS 0 2	UNIT IN ERROR 98-ANIMAL 0 1 99-UNKNOWN	
LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME South Gilmore	ROAD TYPE R D	LATITUDE DECIMAL DEGREES 3 9 3 0 4 6 8 2		CRASH SEVERITY 5 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	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 6305	ROAD TYPE	LONGITUDE DECIMAL DEGREES -8 4 5 2 3 5 3 3					
REFERENCE POINT	DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE	INTERSECTION RELATED							
	1-INTERSECTION 2-MILE POST 3-HOUSE #	1-NORTH 2-SOUTH 3-EAST 4-WEST	IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	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	<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA						
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	ROUTE TYPE	ROAD TYPE	NUMBER OF APPROACHES							
	1-MILES 2-FEET 3-YARDS	1-MILES 2-FEET 3-YARDS	1-NORTH 2-SOUTH 3-EAST 4-WEST	ROADWAY							
LOCATION OF FIRST HARMFUL EVENT			MANNER OF CRASH COLLISION/IMPACT			DIRECTION OF TRAVEL		MEDIAN TYPE			
0 1	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-NOT COLLISION 2-BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 3-REAR-END 4-HEAD-ON	4-REAR-TO-REAR 5-BACKING 6-ANGLE 7-SIDESWIPE, SAME DIRECTION 8-SIDESWIPE, OPPOSITE DIRECTION 9-OTHER/ UNKNOWN	1-NORTH 2-SOUTH 3-EAST 4-WEST		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	LOCATION OF CRASH IN WORK ZONE			CONTOUR	CONDITIONS	SURFACE			
		1-LANE CLOSURE 2-LANE SHIFT/CROSSOVER 3-WORK ON SHOULDER OR MEDIAN 4-INTERMITTENT OR MOVING WORK 5-OTHER	1-BEFORE THE 1ST WORK ZONE WARNING SIGN 2-ADVANCE WARNING AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA			1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9	1-CONCRETE 2-BLACKTOP, BITUMINOUS, ASPHALT 3-BRICK/BLOCK 4-SLAG, GRAVEL, STONE 5-DIRT 9-OTHER/UNKNOWN			
LIGHT CONDITION			WEATHER								
2	1-DAYLIGHT 2-DAWN/DUSK 3-DARK - LIGHTED ROADWAY 4-DARK - ROADWAY NOT LIGHTED 5-DARK - UNKNOWN ROADWAY LIGHTING 9-OTHER / UNKNOWN	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											
<p>On 1/29/22 at 5:34 P.M. Unit 1 was traveling northbound in the right through lane on South Gilmore Road near 6305. Unit 2 was traveling northbound in the left through lane on South Gilmore Road near 6305. Unit 1 failed to clear the lane before changing into the left lane, and striking unit 2 on the passenger side causing damage.</p> <p>Unit 1 was also cited for driving without a valid license.</p> <p>See OH-2</p>											
CRASH REPORTED DATE / TIME 0 1 2 9 2 0 2 2 1 7 3 4			DISPATCH DATE / TIME 0 1 2 9 2 0 2 2 1 7 4 1			ARRIVAL DATE / TIME 0 1 2 9 2 0 2 2 1 7 4 6			SCENE CLEARED DATE / TIME 0 1 2 9 2 0 2 2 1 8 3 1		
TOTAL TIME ROADWAY CLOSED 0 0		OTHER INVESTIGATION TIME 2 0		TOTAL MINUTES 7 0		OFFICER'S NAME* N. Davis		CHECKED BY OFFICER'S NAME* Sgt. Aaron Meyer		REPORT TAKEN BY	
						OFFICER'S BADGE NUMBER* 1 6 9		CHECKED BY OFFICER'S BADGE NUMBER* 1 3 2		<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOS)	



Indicate the north direction with an "N" on the compass diagram.

UNIT # <u>0 1</u>	OWNER NAME: LAST, FIRST, MIDDLE <input type="checkbox"/> SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE <input type="checkbox"/> SAME AS DRIVER)		
OWNER ADDRESS: STREET, CITY, STATE, ZIP <input type="checkbox"/> SAME AS DRIVER)				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP Zozimo's Home Cleaning 3545 Ibsen Ave. Apt. 19 Cincinnati, OH 45209		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
LP STATE <u>O H</u>	LICENSE PLATE # <u>N738985</u>	VEHICLE IDENTIFICATION # <u>1 9 X F B 2 F 5 4 F E 1 1 6 1 3</u>	VEHICLE YEAR <u>2 0 1 5</u>	VEHICLE MAKE <u>Honda</u>
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR <u>Gray</u>	VEHICLE MODEL <u>Civic</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 <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 <u>0 1</u> 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD		
4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		CLASS # <input type="checkbox"/> PLACARD ID #		
1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - ALL-TERRAIN VEHICLE (ATV/UTV)		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		
# 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		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION		
SPECIAL FUNCTION <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		
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 15 - CONSTRUCTION EQUIPMENT 16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL		
VEHICLE DEFECTS <u>0 1</u> 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		
NON-MOTORIST LOCATION AT IMPACT <u>0 1</u> 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 13 - STANDING 14 - WALKING, RUNNING, JOGGING, PLAYING 15 - WORKING 16 - PUSHING VEHICLE 17 - APPROACHING OR LEAVING VEHICLE 18 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - LYING IN ROADWAY 23 - NOT DISCERNIBLE 24 - OPENING DOOR INTO ROADWAY 25 - SWERVING TO AVOID SPILLING 26 - DRIVING ON ROADWAY 27 - WORKING 28 - WORKING 29 - WORKING 30 - WORKING 31 - WORKING 32 - WORKING 33 - WORKING 34 - WORKING 35 - WORKING 36 - WORKING 37 - WORKING 38 - WORKING 39 - WORKING 40 - WORKING 41 - WORKING 42 - WORKING 43 - WORKING 44 - WORKING 45 - WORKING 46 - WORKING 47 - WORKING 48 - WORKING 49 - WORKING		
ACTION <u>3</u> 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 - ENTERING TRAFFIC LANE 8 - LEAVING TRAFFIC LANE 9 - PARKED 10 - SLOWING OR STOPPED IN TRAFFIC 11 - MAKING U-TURN 12 - DRIVING ON ROADWAY 13 - LEAVING TRAFFIC LANE 14 - SWERVING TO AVOID SPILLING 15 - DRIVING ON ROADWAY 16 - WORKING 17 - WORKING 18 - WORKING 19 - WORKING 20 - WORKING 21 - WORKING 22 - WORKING 23 - WORKING 24 - WORKING 25 - WORKING 26 - WORKING 27 - WORKING 28 - WORKING 29 - WORKING 30 - WORKING 31 - WORKING 32 - WORKING 33 - WORKING 34 - WORKING 35 - WORKING 36 - WORKING 37 - WORKING 38 - WORKING 39 - WORKING 40 - WORKING 41 - WORKING 42 - WORKING 43 - WORKING 44 - WORKING 45 - WORKING 46 - WORKING 47 - WORKING 48 - WORKING 49 - WORKING		
CONTRIBUTING CIRCUMSTANCES <u>0 9</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 SPILLING 16 - WRONG WAY 17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/SPILLING 20 - IMPROPER CROSSING 21 - NEGOTIATING A CURVE 22 - ENTERING OR CROSSING SPECIFIED LOCATION 23 - WALKING, RUNNING, JOGGING, PLAYING 24 - WORKING 25 - DRIVING ON ROADWAY 26 - SWERVING TO AVOID SPILLING 27 - WORKING 28 - WORKING 29 - WORKING 30 - WORKING 31 - WORKING 32 - WORKING 33 - WORKING 34 - WORKING 35 - WORKING 36 - WORKING 37 - WORKING 38 - WORKING 39 - WORKING 40 - WORKING 41 - WORKING 42 - WORKING 43 - WORKING 44 - WORKING 45 - WORKING 46 - WORKING 47 - WORKING 48 - WORKING 49 - WORKING		
SEQUENCE OF EVENTS		NON-COLLISION 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 6 - IMPACT ATTENUATOR / CRASH CUSHION 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 25 - WORK ZONE MAINTENANCE EQUIPMENT 26 - WALL 27 - BUILDING 28 - TUNNEL 29 - MAILBOX 30 - TREE 31 - OTHER FIXED OBJECT 32 - FIRE HYDRANT 33 - CURB 34 - DITCH 35 - FENCE 36 - TUNNEL 37 - MAILBOX 38 - TREE 39 - OTHER FIXED OBJECT 40 - FIRE HYDRANT 41 - CULVERT 42 - CULVERT 43 - CULVERT 44 - CULVERT 45 - CULVERT 46 - CULVERT 47 - 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CULVERT 628 - CULVERT 629 - CULVERT 630 - CULVERT 631 - CULVERT 632 - CULVERT 633 - CULVERT 634 - CULVERT 635 - CULVERT 636 - CULVERT 637 - CULVERT 638 - CULVERT 639 - CULVERT 640 - CULVERT 641 - CULVERT 642 - CULVERT 643 - CULVERT 644 - CULVERT 645 - CULVERT 646 - CULVERT 647 - CULVERT 648 - CULVERT 649 - CULVERT 650 - CULVERT 651 - CULVERT 652 - CULVERT 653 - CULVERT 654 - CULVERT 655 - CULVERT 656 - CULVERT 657 - CULVERT 658 - CULVERT 659 - CULVERT 660 - CULVERT 661 - CULVERT 662 - CULVERT 663 - CULVERT 664 - CULVERT 665 - CULVERT 666 - CULVERT 667 - CULVERT 668 - CULVERT 669 - CULVERT 670 - CULVERT 671 - CULVERT 672 - CULVERT 673 - CULVERT 674 - CULVERT 675 - CULVERT 676 - CULVERT 677 - CULVERT 678 - CULVERT 679 - CULVERT 680 - CULVERT 681 - CULVERT 682 - CULVERT 683 - CULVERT 684 - CULVERT 685 - CULVERT 686 - CULVERT 687 - CULVERT 688 - CULVERT 689 - CULVERT 690 - CULVERT 691 - CULVERT 692 - CULVERT 693 - CULVERT 694 - CULVERT 695 - CULVERT 696 - CULVERT 697 - CULVERT 698 - CULVERT 699 - CULVERT 700 - CULVERT 701 - CULVERT 702 - CULVERT 703 - CULVERT 704 - CULVERT 705 - CULVERT 706 - CULVERT 707 - CULVERT 708 - CULVERT 709 - CULVERT 710 - CULVERT 711 - CULVERT 712 - CULVERT 713 - CULVERT 714 - CULVERT 715 - CULVERT 716 - CULVERT 717 - CULVERT 718 - CULVERT 719 - CULVERT 720 - CULVERT 721 - CULVERT 722 - CULVERT 723 - CULVERT 724 - CULVERT 725 - CULVERT 726 - CULVERT 727 - CULVERT 728 - CULVERT 729 - CULVERT 730 - CULVERT 731 - CULVERT 732 - CULVERT 733 - CULVERT 734 - CULVERT 735 - CULVERT 736 - CULVERT 737 - CULVERT 738 - CULVERT 739 - CULVERT 740 - CULVERT 741 - CULVERT 742 - CULVERT 743 - CULVERT 744 - CULVERT 745 - CULVERT 746 - CULVERT 747 - CULVERT 748 - CULVERT 749 - CULVERT 750 - CULVERT 751 - CULVERT 752 - CULVERT 753 - CULVERT 754 - CULVERT 755 - CULVERT 756 - CULVERT 757 - CULVERT 758 - CULVERT 759 - CULVERT 760 - CULVERT 761 - CULVERT 762 - CULVERT 763 - CULVERT 764 - CULVERT 765 - CULVERT 766 - CULVERT 767 - CULVERT 768 - CULVERT 769 - CULVERT 770 - CULVERT 771 - CULVERT 772 - CULVERT 773 - CULVERT 774 - CULVERT 775 - CULVERT 776 - CULVERT 777 - CULVERT 778 - CULVERT 779 - CULVERT 780 - CULVERT 781 - CULVERT 782 - CULVERT 783 - CULVERT 784 - CULVERT 785 - CULVERT 786 - CULVERT 787 - CULVERT 788 - CULVERT 789 - CULVERT 790 - CULVERT 791 - CULVERT 792 - CULVERT 793 - CULVERT 794 - CULVERT 795 - CULVERT 796 - CULVERT 797 - CULVERT 798 - CULVERT 799 - CULVERT 800 - CULVERT 801 - CULVERT 802 - CULVERT 803 - CULVERT 804 - CULVERT 805 - CULVERT 806 - CULVERT 807 - CULVERT 808 - CULVERT 809 - CULVERT 810 - CULVERT 811 - CULVERT 812 - CULVERT 813 - CULVERT 814 - CULVERT 815 - CULVERT 816 - CULVERT 817 - CULVERT 818 - CULVERT 819 - CULVERT 820 - CULVERT 821 - CULVERT 822 - CULVERT 823 - CULVERT 824 - CULVERT 825 - CULVERT 826 - CULVERT 827 - CULVERT 828 - CULVERT 829 - CULVERT 830 - CULVERT 831 - CULVERT 832 - CULVERT 833 - CULVERT 834 - CULVERT 835 - CULVERT 836 - CULVERT 837 - CULVERT 838 - CULVERT 839 - CULVERT 840 - CULVERT 841 - CULVERT 842 - CULVERT 843 - CULVERT 844 - CULVERT 845 - CULVERT 846 - CULVERT 847 - CULVERT 848 - CULVERT 849 - CULVERT 850 - CULVERT 851 - CULVERT 852 - CULVERT 853 - CULVERT 854 - CULVERT 855 - CULVERT 856 - CULVERT 857 - CULVERT 858 - CULVERT 859 - CULVERT 860 - CULVERT 861 - CULVERT 862 - CULVERT 863 - CULVERT 864 - CULVERT 865 - CULVERT 866 - CULVERT 867 - CULVERT 868 - CULVERT 869 - CULVERT 870 - CULVERT 871 - CULVERT 872 - CULVERT 873 - CULVERT 874 - CULVERT 875 - CULVERT 876 - CULVERT 877 - CULVERT 878 - CULVERT 879 - CULVERT 880 - CULVERT 881 - CULVERT 882 - CULVERT 883 - CULVERT 884 - CULVERT 885 - CULVERT 886 - CULVERT 887 - CULVERT 888 - CULVERT 889 - CULVERT 890 - CULVERT 891 - CULVERT 892 - CULVERT 893 - CULVERT 894 - CULVERT 895 - CULVERT 896 - CULVERT 897 - CULVERT 898 - CULVERT 899 - CULVERT 900 - CULVERT 901 - CULVERT 902 - CULVERT 903 - CULVERT 904 - CULVERT 905 - CULVERT 906 - CULVERT 907 - CULVERT 908 - CULVERT 909 - CULVERT 910 - CULVERT 911 - CULVERT 912 - CULVERT 913 - CULVERT 914 - CULVERT 915 - CULVERT 916 - CULVERT 917 - CULVERT 918 - CULVERT 919 - CULVERT 920 - CULVERT 921 - CULVERT 922 - CULVERT 923 - CULVERT 924		

OWNER	UNIT # <u>0 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>HDX7034</u>	VEHICLE IDENTIFICATION # <u>5FNYF4H55EB044318</u>	VEHICLE YEAR <u>2014</u> VEHICLE MAKE <u>Honda</u>
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY <u>All State</u>	INSURANCE POLICY # <u>992681330</u>	COLOR <u>Gray</u> VEHICLE MODEL <u>Pilot</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 EQUIPPED		# OCCUPANTS <u>0 4</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	
1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		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 99 - UNKNOWN OR HIT/SKIP		23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN	
# 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	
SPECIAL FUNCTION <u>0 1</u> 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		1 - NONE 2 - TAXI 3 - BUS - SHUTTLE 4 - BUS - OTHER 5 - BUS - TRANSIT/COMMUTER	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	
1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		21 - MAIL CARRIER 99 - OTHER/UNKNOWN	
1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		22 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		23 - FIRST RESPONDER AT INCIDENT SCENE 24 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		25 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		26 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		27 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		28 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		29 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		30 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		31 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		32 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		33 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		34 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		35 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		36 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		37 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		38 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		39 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		40 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		41 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		42 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		43 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		44 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		45 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		46 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		47 - OTHER/UNKNOWN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/UNKNOWN		48 - OTHER/UNKNOWN	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		49 - OTHER/UNKNOWN	
1 - FIRST HARMFUL EVENT		1 - MOST HARMFUL EVENT	

LOCAL REPORT NUMBER <u>2 2 0 0 6 7 8 9</u>	
DAMAGE DAMAGE SCALE 2 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR 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 1</u> 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 13 - TOP 99 - UNKNOWN	
TRAFFIC TRAFFIC WAY FLOW 1 - ONE-WAY <u>2</u> 2 - TWO-WAY <u>6</u> TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL	
# OF THROUGH LANES ON ROAD <u>6</u>	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 1 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION FROM <u>2</u> TO <u>1</u> 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER/UNKNOWN	
UNIT SPEED <u>3 5</u> DETECTED SPEED 1 - STATED/ESTIMATED SPEED <u>1</u> 2 - CALCULATED/EDR 3 - UNDETERMINED	
POSTED SPEED <u>3 5</u>	



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER									
2 2 0 0 6 7 8 9									

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH			AGE	GENDER					
	0 1	Moreno Fuentes, Douglas Maudiel					0 9 1 4 1 9 9 4			2 7	M					
	ADDRESS: STREET, CITY, STATE, ZIP 3545 Ibsen Ave. Apt. 19 Cincinnati, OH 45209					CONTACT PHONE - INCLUDE AREA CODE										
INJURIES	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	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	<input checked="" type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER						
OL CLASS	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	ALCOHOL TEST	STATUS	TYPE	VALUE	DRUG TEST(S)	STATUS	TYPE	RESULT SELECT UP TO 4
UNIT #	NAME: LAST, FIRST, MIDDLE					0 2 Vespie-Nguyen, Ashley Lauren			DATE OF BIRTH			1 0 3 0 1 9 8 8	AGE	GENDER	3 3	F
ADDRESS: STREET, CITY, STATE, ZIP 5405 Heatherdowns Blvd. Toledo, OH 43614					CONTACT PHONE - INCLUDE AREA CODE											
INJURIES	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	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	1	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
UNIT #	NAME: LAST, FIRST, MIDDLE					0 3			DATE OF BIRTH			0	AGE	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	1	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	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											
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											
5-NO APPARENT INJURY	5-SECOND - MIDDLE	5-NOT APPLICABLE	5-M/C MOPED ONLY	5-EXCEPT CLASS A BUS	5-TEST GIVEN, RESULTS UNKNOWN											
INJURED TAKEN BY		6-SECOND - RIGHT SIDE	9-DEPLOYMENT UNKNOWN	6-EXCEPT CLASS A & CLASS B BUS												
1-NOT TRANSPORTED /TREATED AT SCENE	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	6-NO VALID OL	7-EXCEPT TRACTOR-TRAILER	7-EXTRA ACTIVITY WITH AN ELECTRONIC DEVICE												
2-EMS	8-THIRD - MIDDLE	8-INTERMEDIATE LICENSE RESTRICTIONS	8-INTERMEDIATE LICENSE RESTRICTIONS	8-NONE												
3-POLICE	9-THIRD - RIGHT SIDE	9-TOTALLY EJECTED	9-LEARNER'S PERMIT RESTRICTIONS	9-BLOOD												
9. OTHER / UNKNOWN	10-SLEEPER SECTION OF TRUCK CAB	4-NOT APPLICABLE	10-LIMITED TO DAYLIGHT ONLY	9-URINE												
SAFETY EQUIPMENT		11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	H-HAZMAT	11-LIMITED TO EMPLOYMENT	4-BREATH											
1-NONE USED	12-PASSENGER IN UNENCLOSED CARGO AREA	2-PARTIALLY EJECTED	M-MOTORCYCLE	12-LIMITED - OTHER	5-OTHER											
2-SHOULDER BELT ONLY USED	13-TRAILING UNIT	3-TOTALLY EJECTED	P-PASSENGER	13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)												
3-LAP BELT ONLY USED	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	4-NOT APPLICABLE	N-TANKER	14-MILITARY VEHICLES ONLY												
4-SHOULDER & LAP BELT USED	15-NON-MOTORIST	1-NOT TRAPPED	Q-MOTOR SCOOTER	15-MOTOR VEHICLES WITHOUT AIR BRAKES												
5-CHILD RESTRAINT SYSTEM - FORWARD FACING	99-OTHER / UNKNOWN	2-EXTRICATED BY MECHANICAL MEANS	R-THREE-WHEEL MOTORCYCLE	16-OUTSIDE MIRROR												
6-CHILD RESTRAINT SYSTEM - REAR FACING		3-FREED BY NON-MECHANICAL MEANS	S-SCHOOL BUS	17-PROSTHETIC AID												
7-BOOSTER SEAT			T-DOUBLE & TRIPLE TRAILERS	18-OTHER												
8-HELMET USED			X-TANKER / HAZMAT													
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)																
10-REFLECTIVE CLOTHING																
11-LIGHTING - PEDESTRIAN / BICYCLE ONLY																
99-OTHER / UNKNOWN																
EJECTION		OL ENDORSEMENT		TEST STATUS												
TRAPPED		DRUG TEST TYPE														
GENDER		CONDITION														
F-FEMALE		1-APPARENTLY NORMAL														
M-MALE		2-PHYSICAL IMPAIRMENT														
U-OTHER / UNKNOWN		3-EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)														
DRUG TEST RESULT(S)		4-ILLNESS														
1-AMPHETAMINES		5-FELL ASLEEP, FAINTED, FATIGUED, ETC.														
2-BARBITURATES		6-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL														
3-BENZODIAZEPINES		7-OTHER														
4-CANNABINOID		8-NON-NEGATIVE RESULTS														
5-COCAIN																
6-OPIATES / OPIOIDS																
7-OTHER																
8-NON-NEGATIVE RESULTS																



OCCUPANT / WITNESS ADDENDUM

OCCUPANT	LOCAL REPORT NUMBER															
	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH			AGE	GENDER							
2	Nguyen, Victoria			1	2	2	2	1	9	9	8	23	F			
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE					
5405 Heatherdowns Blvd. Toledo, OH 43614																
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	0 4		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	0 3	0 1	1	1	
5							<input type="checkbox"/>	0 3	0 1	1	1					
UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH			AGE	GENDER								
2	Nguyen, Peter			1	2	2	4	1	9	8	8	33	M			
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE					
5405 Heatherdowns Blvd. Toledo, OH 43614																
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	0 4		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	0 6	0 1	1	1	
5							<input type="checkbox"/>	0 6	0 1	1	1					
UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH			AGE	GENDER								
2	Nguyen, Oliver			0	1	3	0	2	0	2	1	1	1	M		
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE					
5405 Heatherdowns Blvd. Toledo, OH 43614																
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	0 6		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	0 4	0 1	1	1	
5							<input type="checkbox"/>	0 4	0 1	1	1					
UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH			AGE	GENDER								
							0									
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE					
5405 Heatherdowns Blvd. Toledo, OH 43614																
INJURIES			SAFETY EQUIPMENT USED			SEATING POSITION			AIR BAG USAGE							
1 - FATAL			1 - NONE USED - VEHICLE OCCUPANT			1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)			1 - NOT DEPLOYED							
2 - SUSPECTED SERIOUS INJURY			2 - SHOULDER BELT ONLY USED			2 - FRONT - MIDDLE			2 - DEPLOYED FRONT							
3 - SUSPECTED MINOR INJURY			3 - LAP BELT ONLY USED			3 - FRONT - RIGHT SIDE			3 - DEPLOYED SIDE							
4 - POSSIBLE INJURY			4 - SHOULDER & LAP BELT USED			4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)			4 - DEPLOYED BOTH FRONT/SIDE							
5 - NO APPARENT INJURY			5 - CHILD RESTRAINT SYSTEM - FORWARD FACING			5 - SECOND - MIDDLE			5 - NOT APPLICABLE							
INJURED TAKEN BY			6 - CHILD RESTRAINT SYSTEM - REAR FACING			6 - SECOND - RIGHT SIDE			9 - DEPLOYMENT UNKNOWN							
1 - NOT TRANSPORTED /TREATED AT SCENE			7 - BOOSTER SEAT			7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			EJECTION							
2 - EMS			8 - HELMET USED			8 - THIRD - MIDDLE			1 - NOT EJECTED							
3 - POLICE			9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)			9 - THIRD - RIGHT SIDE			2 - PARTIALLY EJECTED							
9 - OTHER / UNKNOWN			10 - REFLECTIVE CLOTHING			10 - SLEEPER SECTION OF TRUCK CAB			3 - TOTALLY EJECTED							
GENDER			11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY			11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)			4 - NOT APPLICABLE							
F - FEMALE			99 - OTHER / UNKNOWN			12 - PASSENGER IN UNENCLOSED CARGO AREA			TRAPPED							
M - MALE						13 - TRAILING UNIT			1 - NOT TRAPPED							
U - OTHER / UNKNOWN						14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			2 - EXTRICATED BY MECHANICAL MEANS							
						15 - NON-MOTORIST			3 - FREED BY NON-MECHANICAL MEANS							
						99 - OTHER / UNKNOWN										
WITNESS	NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH			AGE	GENDER	
											0					
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE					
WITNESS	NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH			AGE	GENDER	
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											0					
ADDRESS: STREET, CITY, STATE, ZIP											CONTACT PHONE - INCLUDE AREA CODE					

LOCAL REPORT NUMBER	22-006789	REPORTING AGENCY	Fairfield Police Department	DATE OF ACCIDENT
IN COUNTY OF	Butler	ACCIDENT LOCATION	6305 S. Gilmore Rd.	1/29/22
<p>Not to Scale</p> <p>6305</p> <p>S. Gilmore Road</p>				
OFFICER'S SIGNATURE			BADGE NO 169	