



## TRAFFIC CRASH REPORT

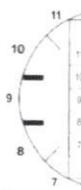
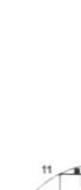
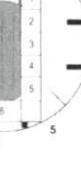
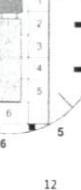
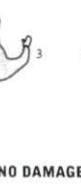
\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

				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 type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION		2 2 0 0 7 0 3 9		
		REPORTING AGENCY NAME* Fairfield Police Department		NCIC*	HIT/SKIP 2 1-SOLVED 2 2-UNRESOLVED	
COUNTY* 0 9		LOCALITY* 1-CITY 1 2-VILLAGE 3-TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield		
REFERENCE LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME Mack	ROAD TYPE R D	
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 3000	ROAD TYPE	
REFERENCE POINT 3	DIRECTION FROM REFERENCE 1-INTERSECTION 2-MILE POST 3-HOUSE #	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 PK - PARKWAY PI - PIKE PL - PLACE RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY	CRASH DATE / TIME* 01302022 1619		
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE 1-MILES 2-FEET 3-YARDS			CRASH SEVERITY 5		
LOCATION OF FIRST HARMFUL EVENT 9 9			MANNER OF CRASH COLLISION/IMPACT 9	DIRECTION OF TRAVEL 1-NORTH 2-SOUTH 3-EAST 4-WEST	MEDIAN TYPE 1-DIVIDED FLUSH MEDIAN (<4 FEET) 2-DIVIDED FLUSH MEDIAN (24 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 AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA	CONTOUR 1	CONDITIONS 1	SURFACE 2
LIGHT CONDITION 1		WEATHER 0 1	1-CLEAR 2-CLOUDY 3-FOG, SMOG, SMOKE 4-RAIN 5-SLEET, HAIL	1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 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 30, 2022 sometime between 10:00 A.M. and 4:00 P.M., Unit 1 struck Unit 2, in an unknown manner, in the parking lot of 3000 Mack Rd. Unit 1 then fled the scene without leaving any information or reporting the crash. There were no surveillance cameras in the lot.						
CRASH REPORTED DATE / TIME 0 1 3 0 2 0 2 2 1 6 1 9		DISPATCH DATE / TIME 0 1 3 0 2 0 2 2 1 6 3 6		ARRIVAL DATE / TIME 0 1 3 0 2 0 2 2 1 6 4 5		SCENE CLEARED DATE / TIME 0 1 3 0 2 0 2 2 1 6 5 3
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 ODP)		TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 0		TOTAL MINUTES 1 7
OFFICER'S NAME* B. Mossman		OFFICER'S BADGE NUMBER* 1 5 2		CHECKED BY OFFICER'S NAME Sgt. A. Dandell		CHECKED BY OFFICER'S BADGE NUMBER* 1 6 8



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		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
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 checked="" type="checkbox"/> HIT/SKIP UNIT		#OCCUPANTS	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)		1 - HIT/SKIP UNIT 2 - 10,001 - 26K LBS. 3 - >26K LBS.		HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD
# OF TRAILING UNITS <u>9 9</u>		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? <u>9</u>		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION <u>9</u>	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN
SPECIAL FUNCTION 1 - ELECTRONIC RIDE SHARING 2 - SCHOOL TRANSPORT 3 - BUS - TRANSIT/COMMUTER		6 - BUS - CHARTERTOUR 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 1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS		3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 5 - CARGO VAN/ENCLOSED BOX 6 - GRAIN/CHIPS/GRAVEL	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP
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	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
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
ACTION 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 6 - PRE-CRASH ACTIONS 7 - OVERTAKING/PASSING 8 - MAKING RIGHT TURN 9 - MAKING LEFT TURN 10 - 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 22 - LYING IN ROADWAY 23 - NOT DISCERNIBLE 24 - OTHER IMPROPER ACTION
CONTRIBUTING CIRCUMSTANCES 1 - FAILURE TO YIELD 2 - RAN RED LIGHT 3 - RAN STOP SIGN 4 - UNSAFE SPEED 5 - IMPROPER TURN		6 - LEFT OF CENTER 7 - FOLLOWING TOO CLOSE / ACDA 8 - IMPROPER LANE CHANGE 9 - IMPROPER PASSING 10 - DROVE OFF ROAD 11 - WRONG WAY 12 - IMPROPER BACKING	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 24 - OTHER IMPROPER ACTION
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 - BRIDGE OVERHEAD STRUCTURE 8 - BRIDGE PIER OR ABUTMENT 9 - BRIDGE PARAPET 10 - BRIDGE RAIL 11 - GUARDRAIL FACE		
		COLLISION WITH FIXED OBJECT - STRUCK 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 - GUARDRAIL END 26 - PORTABLE BARRIER 27 - MEDIAN CABLE BARRIER 28 - MEDIAN GUARDRAIL 29 - MEDIAN CONCRETE BARRIER 30 - MEDIAN OTHER BARRIER 31 - LIGHT / LUMINARIES SUPPORT 32 - SUPPORT 33 - UTILITY POLE 34 - MAILBOX 35 - TREE 36 - FIRE HYDRANT 37 - CULVERT 38 - OVERHEAD SIGN POST 39 - SUPPORT 40 - OTHER POST, POLE OR SUPPORT 41 - Curb 42 - Ditch 43 - Embankment 44 - Fence 45 - Building 46 - Tunnel 47 - Other Fixed Object 48 - Unknown		
FIRST HARMFUL EVENT <u>1</u>		MOST HARMFUL EVENT <u>1</u>		

LOCAL REPORT NUMBER 2 2 0 0 7 0 3 9	
DAMAGE 9	
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 - REFER TO UNIT DIAGRAM 12 - TOP	
TRAFFIC TRAFFIC WAY FLOW 1 - ONE-WAY 2 - TWO-WAY <u>2</u>	
TRAFFIC CONTROL 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER <u>6</u>	
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING <u>1</u>
UNIT / NON-MOTORIST DIRECTION 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN FROM <u>9</u> TO <u>9</u>	
UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED <u>3</u>
POSTED SPEED <u>1 0</u>	

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ( SAME AS DRIVER)
0 2	Carter, Brandi, M.	
OWNER ADDRESS: STREET, CITY, STATE, ZIP ( SAME AS DRIVER)		
5120 Lexington Ct., Mason, OH, 45040		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

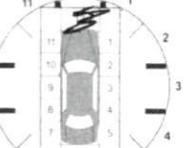
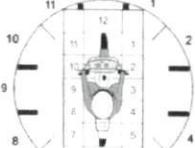
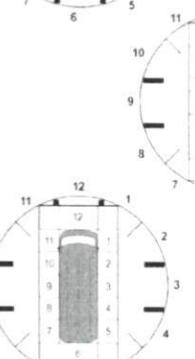
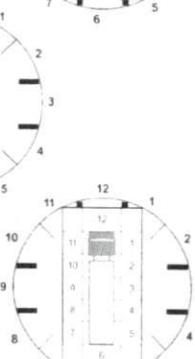
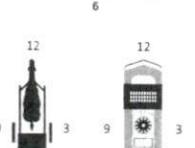
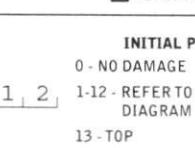
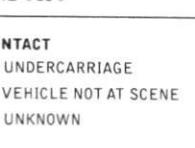
LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
0 H	JNZ8878	3 KPA24ABXJE0615436	2018	Kia
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
	Progressive	953070254	Black	Rio
TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME	
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE		
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR	
		0 0	1 - ≤10K LBS.	HAZARDOUS MATERIAL
			2 - 10,001 - 26K LBS.	MATERIAL CLASS # PLACARD ID #
			3 - >26K LBS.	PLACARD
1 - PASSENGER CAR		7 - MOTORCYCLE 2-WHEELED	12 - GO-KART	18 - LIMO (LIVERY VEHICLE)
2 - PASSENGER VAN (MINIVAN)		8 - MOTORCYCLE 3-WHEELED	13 - SNOWMOBILE	19 - BUS (16+ PASSENGERS)
3 - SPORT UTILITY VEHICLE		9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK	20 - OTHER VEHICLE
4 - PICK UP		10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR	21 - HEAVY EQUIPMENT
5 - CARGO VAN		11 - ALL-TERRAIN VEHICLE (ATV / UTV)	16 - FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE
6 - VAN (9-15 SEATS)			17 - MOTORHOME	23 - PEDESTRIAN / SKATER
				24 - WHEELCHAIR (ANY TYPE)
				25 - OTHER NON-MOTORIST
				26 - BICYCLE
				27 - TRAIN
				99 - UNKNOWN OR HIT/SKIP

VEHICLE # OF TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN
2		1 - YES	2 - NO	9 - OTHER / UNKNOWN
		AUTONOMOUS MODE LEVEL		
		1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE
0 1		2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY
		3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE
		4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY
		5 - BUS - TRANSIT / COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIPMENT
		1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	8 - POLE
0 1		2 - BUS	4 - LOGGING	9 - CARGO TANK
			6 - CARGO VAN / ENCLOSED BOX	10 - FLAT BED
			7 - GRAIN / CHIPS / GRAVEL	11 - DUMP
		1 - TURN SIGNALS	4 - BRAKES	12 - CONCRETE MIXER
		2 - HEAD LAMPS	5 - STEERING	13 - AUTO TRANSPORTER
VEHICLE DEFECTS		3 - TAIL LAMPS	6 - TIRE BLOWOUT	14 - GARBAGE / REFUSE
				15 - OTHER / UNKNOWN
		1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER CROSSWALK	6 - BICYCLE LANE
NON-MOTORIST LOCATION AT IMPACT		4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER / ROADSIDE	9 - MEDIAN / CROSSING ISLAND
		2 - INTERSECTION - UNMARKED CROSSWALK	8 - SIDEWALK	10 - DRIVEWAY ACCESS
		5 - TRAVEL LANE - OTHER LOCATION	5 - TRAVEL LANE - OTHER LOCATION	11 - SHARED USE PATHS OR TRAILS
		1 - NON-CONTACT	1 - STRAIGHT AHEAD	12 - FIRST RESPONDER AT INCIDENT SCENE
0 4		2 - NON-COLLISION	2 - BACKING	13 - NEGOTIATING A CURVE
		3 - STRIKING	3 - CHANGING LANES	14 - ENTERING OR CROSSING SPECIFIED LOCATION
ACTION		4 - STRUCK PRE-CRASH ACTIONS	4 - OVERTAKING / PASSING	15 - WALKING, RUNNING, JOGGING, PLAYING
		5 - BOTH STRIKING & STRUCK	5 - MAKING RIGHT TURN	16 - WORKING
		6 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	17 - PUSHING VEHICLE
		1 - NONE	7 - LEFT OF CENTER	18 - APPROACHING OR LEAVING VEHICLE
0 1		2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / ACDA	19 - STANDING
		3 - RAN RED LIGHT	9 - IMPROPER LANE CHANGE	20 - OTHER NON-MOTORIST
CONTRIBUTING CIRCUMSTANCES		4 - RAN STOP SIGN	10 - IMPROPER PASSING	21 - STANDING OUTSIDE DISABLED VEHICLE
		5 - UNSAFE SPEED	11 - DROVE OFF ROAD	22 - OTHER / UNKNOWN
		6 - IMPROPER TURN	12 - IMPROPER BACKING	23 - LYING IN ROADWAY

SEQUENCE OF EVENTS

1 2 0		NON-COLLISION		22 - WORK ZONE MAINTENANCE EQUIPMENT	
1		1 - OVERTURN / ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	17 - ANIMAL - FARM
2		2 - FIRE / EXPLOSION	7 - SEPARATION OF UNITS	12 - DOWNHILL RUNAWAY	18 - ANIMAL - DEER
3		3 - IMMERSION	8 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION	19 - ANIMAL - OTHER
4		4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT
5		5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	15 - PEDAL CYCLE	21 - PARKED MOTOR VEHICLE
6		25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB
7		26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH
8		27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	39 - LIGHT / LUMINARIES	45 - EMBANKMENT
9		28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL	40 - SUPPORT	46 - FENCE
10		29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX
11		30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	48 - TREE
12					49 - FIRE HYDRANT
13					99 - OTHER / UNKNOWN
14					
15					
16					
17					
18					
19					
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28					
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33					
34					
35					
36					

LOCAL REPORT NUMBER	
2 2 0 0 7 0 3 9	
DAMAGE	
DAMAGE SCALE	
3	1 - 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	
1 - 12 - REFER TO UNIT DIAGRAM	
15 - VEHICLE NOT AT SCENE	
99 - UNKNOWN	
13 - TOP	
TRAFFIC	
TRAFFIC FLOW	
1 - ONE-WAY	
2 - TWO-WAY	
6	
TRAFFIC CONTROL	
1 - ROUNDABOUT	
4 - STOP SIGN	
2 - SIGNAL	
5 - YIELD SIGN	
3 - FLASHER	
6 - NO CONTROL	
# OF THROUGH LANES ON ROAD	
1	
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 2 TO 1	
UNIT SPEED	
0	
1	
POSTED SPEED	
1	
0	
DETECTED SPEED	
1 - STATED / ESTIMATED SPEED	
2 - CALCULATED / EDR	
3 - UNDETERMINED	



# MOTORIST / Non-MOTORIST

MOTORIST / NON-MOTORIST	LOCAL REPORT NUMBER											
	UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH			AGE	GENDER
	0 1										0	U
	ADDRESS: STREET, CITY, STATE, ZIP											
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						9 9	<input type="checkbox"/>		0 1	9	1	1
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER		
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)		
				9	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		9	1	1	1	1	RESULT SELECT UP TO 4
UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH			AGE	GENDER	
										0		
ADDRESS: STREET, CITY, STATE, ZIP												
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
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER		
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)		
					<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG			1	1	1	1	RESULT SELECT UP TO 4
UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH			AGE	GENDER	
										0		
ADDRESS: STREET, CITY, STATE, ZIP												
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
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER		
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)		
					<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG			1	1	1	1	RESULT SELECT UP TO 4
<b>INJURIES</b>	<b>SEATING POSITION</b>	<b>AIR BAG</b>	<b>DL CLASS</b>	<b>DL RESTRICTION(S)</b>	<b>DRIVER DISTRACTION</b>	<b>TEST STATUS</b>						
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							
	6-SECOND - RIGHT SIDE	9-DEPLOYMENT UNKNOWN	6-NO VALID DL	6-EXCEPT CLASS A & CLASS B BUS								
	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7-EXCEPT TRACTOR-TRAILER								
	8-THIRD - MIDDLE			8-INTERMEDIATE LICENSE RESTRICTIONS								
	9-THIRD - RIGHT SIDE			9-LEARNER'S PERMIT RESTRICTIONS								
	10-SLEEPER SECTION OF TRUCK CAB			10-LIMITED TO DAYLIGHT ONLY								
	11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)			11-LIMITED TO EMPLOYMENT								
	12-PASSENGER IN UNENCLOSED CARGO AREA			12-LIMITED - OTHER								
	13-TRAILING UNIT			13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)								
	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			14-MILITARY VEHICLES ONLY								
	15-NON-MOTORIST			15-MOTOR VEHICLES WITHOUT AIR BRAKES								
	99-OTHER / UNKNOWN			16-OUTSIDE MIRROR								
				17-PROSTHETIC AID								
				18-OTHER								
<b>INJURED TAKEN BY</b>	<b>EJECTION</b>	<b>DL ENDORSEMENT</b>	<b>TRAPPED</b>	<b>CONDITION</b>	<b>DRUG TEST TYPE</b>							
1-NOT TRANSPORTED / TREATED AT SCENE	1-NOT EJECTED	H-HAZMAT		1-APPARENTLY NORMAL	1-NONE							
2-EMS	2-PARTIALLY EJECTED	M-MOTORCYCLE		2-PASSINGER	2-BLOOD							
3-POLICE	3-TOTALLY EJECTED	P-PASSENGER		7-OTHER DISTRACTION INSIDE THE VEHICLE	3-URINE							
9-OTHER / UNKNOWN	4-NOT APPLICABLE	N-TANKER		8-OTHER DISTRACTION OUTSIDE THE VEHICLE	4-BREATH							
		Q-MOTOR SCOOTER		9-OTHER / UNKNOWN	5-OTHER							
		R-THREE-WHEEL MOTORCYCLE										
		S-SCHOOL BUS										
		T-DOUBLE & TRIPLE TRAILERS										
		X-TANKER / HAZMAT										
<b>SAFETY EQUIPMENT</b>	<b>TRAPPED</b>	<b>GENDER</b>	<b>DRUG TEST TYPE</b>									
1-NONE USED	1-NOT TRAPPED	F-FEMALE	1-AMPHETAMINES									
2-SHOULDER BELT ONLY USED	2-EXTRICATED BY MECHANICAL MEANS	M-MALE	2-BARBITURATES									
3-LAP BELT ONLY USED	3-FREED BY NON-MECHANICAL MEANS	U-OTHER / UNKNOWN	3-BENZODIAZEPINES									
4-SHOULDER & LAP BELT USED			4-CANNABINOID									
5-CHILD RESTRAINT SYSTEM - FORWARD FACING			5-COCAIN									
6-CHILD RESTRAINT SYSTEM - REAR FACING			6-OPIATES / OPIOIDS									
7-BOOSTER SEAT			7-OTHER									
8-HELMET USED			8-Negative RESULTS									
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)												
10-REFLECTIVE CLOTHING												
11-LIGHTING - PEDESTRIAN / BICYCLE ONLY												
99-OTHER / UNKNOWN												