



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN <input checked="" 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		LOCAL INFORMATION		LOCAL REPORT NUMBER* 2 2 0 0 7 5 6 4					
		REPORTING AGENCY NAME* Fairfield Police Department		NCIC* 0 0 9 0 1					
COUNTY* 0 9		LOCALITY* 1-CITY 2-VILLAGE 3-TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield					
LOCATION REFERENCE	ROUTE TYPE U S	ROUTE NUMBER 1,2,7	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME MAGIE	ROAD TYPE A V	LATITUDE DECIMAL DEGREES 39 3 4 6 0 8 2			
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES -84 5 5 9 3 3 3			
REFERENCE POINT 1-INTERSECTION 2-MILE POST 3-HOUSE # 0 1		DIRECTION FROM REFERENCE 1-NORTH 2-SOUTH 3-EAST 4-WEST 5 0		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	ROAD TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE	INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA		
DISTANCE FROM REFERENCE UNIT OF MEASURE 1-MILES 2-FEET 2 3-YARDS							NUMBER OF APPROACHES ROADWAY <input type="checkbox"/> 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				MANNER OF CRASH COLLISION/IMPACT 1-NOT COLLISION 2-BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 3-SIDESWIPE, SAME DIRECTION 4-REAR-END 5-BACKING 6-ANGLE 7-SIDESWIPE, OPPOSITE DIRECTION 8-HEAD-ON 9-OTHER / UNKNOWN		DIRECTION OF TRAVEL 1-NORTH 2-SOUTH 3-EAST 4-WEST		MEDIAN TYPE 1-DIVIDED FLUSH MEDIAN (<4 FEET) 2-DIVIDED FLUSH MEDIAN (>4 FEET) 3-DIVIDED, DEPRESSED MEDIAN 4-DIVIDED, RAISED MEDIAN (ANY TYPE) 9-OTHER/UNKNOWN	
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE		WORK ZONE TYPE 1-LANE CLOSURE 2-LANE SHIFT/CROSSOVER 3-WORK ON SHOULDER OR MEDIAN 4-INTERMITTENT OR MOVING WORK 5-OTHER		LOCATION OF CRASH IN WORK ZONE 1-BEFORE THE 1ST WORK ZONE 2-ADVANCE WARNING 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		WEATHER 1-CLEAR 2-CLOUDY 3-FOG, SMOG, SMOKE 4-RAIN 5-SLEET, HAIL 0 1		1-SNOW 2-SEVERE CROSSWINDS 3-BLOWING SAND, SOIL, DIRT, SNOW 4-FREEZING RAIN OR FREEZING DRIZZLE 5-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 February 1, 2022 at approximately 4:16PM, Units 1 and 2 were traveling northbound on U.S. 127 north of Magie Ave. Unit 2 came to a stop for an ambulance approaching in the opposite direction. Unit 1 then rear-ended Unit 2.									
Indicate the north direction with an "N" on the compass diagram. 									
SEE OH-2									
CRASH REPORTED DATE / TIME 0 2 0 1 2 0 2 2 1 6 1 6		DISPATCH DATE / TIME 0 2 0 1 2 0 2 2 1 6 1 7		ARRIVAL DATE / TIME 0 2 0 1 2 0 2 2 1 6 3 0		SCENE CLEARED DATE / TIME 0 2 0 1 2 0 2 2 1 6 4 7		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 ODS)	
TOTAL TIME ROADWAY CLOSED 0 0		OTHER INVESTIGATION TIME 3 0		TOTAL MINUTES 6 0		OFFICER'S NAME* A. ROUSH OFFICER'S BADGE NUMBER* 1 7 0		CHECKED BY OFFICER'S NAME* Sgt. Aaron Meyer CHECKED BY OFFICER'S BADGE NUMBER* 1 3 2	

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (<input checked="" type="checkbox"/> SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE (<input checked="" type="checkbox"/> SAME AS DRIVER)
0 1		

OWNER ADDRESS: STREET, CITY, STATE, ZIP (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
0 H	JCC7129	1 F A H P 3 F N 5 A W 2 3 9 2 9 2	2 0 1 0	FORD
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
	CINCINNATI INSURAN	AO20212565	RED	FOCUS
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 1	1 - <10K LBS.	MATERIAL
			2 - 10,001 - 26K LBS.	CLASS #
			3 - >26K LBS.	PLACARD ID #
			<input type="checkbox"/> RELEASED	<input type="checkbox"/> PLACARD

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

0 0 # OF TRAILING UNITS

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

1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16 - FARM	21 - MAIL CARRIER
0 1 2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - MOWING	99 - OTHER / UNKNOWN
3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE	18 - SNOW REMOVAL	
4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19 - TOWING	
5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL	

0 1 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
			7 - GRAIN/CHIPS/GRAVEL	10 - FLAT BED	14 - GARBAGE/REFUSE
				11 - DUMP	99 - OTHER / UNKNOWN

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	
3 - TAIL LAMPS	6 - TIRE BLOWOUT			

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	
	5 - TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN

0 3 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	9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19 - STANDING
3 - STRIKING	0 1 3 - CHANGING LANES	10 - PARKED	15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST	
4 - STRUCK	4 - OVERTAKING/PASING	11 - SLOWING OR STOPPED IN TRAFFIC	16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	
5 - BOTH STRIKING & STRUCK	5 - MAKING RIGHT TURN	6 - MAKING LEFT TURN	12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN
9 - OTHER / UNKNOWN					

0 8 CONTRIBUTING CIRCUMSTANCES	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	23 - OPENING DOOR INTO ROADWAY
3 - RAN RED LIGHT	9 - IMPROPER LANE CHANGE	15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLING/SPILLING	24 - OTHER IMPROPER ACTION	99 - OTHER / UNKNOWN
4 - RAN STOP SIGN	10 - IMPROPER PASSING	16 - WRONG WAY			
5 - UNSAFE SPEED	11 - DROVE OFF ROAD	12 - IMPROPER BACKING			
6 - IMPROPER TURN					

SEQUENCE OF EVENTS	NON-COLLISION	COLLISION WITH FIXED OBJECT - STRUCK			
1 2 0	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
	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION	18 - ANIMAL - DEER	24 - BY A MOTOR VEHICLE
2 1 1	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	19 - ANIMAL - OTHER	25 - ANYTHING SET IN MOTION
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	15 - PEDALCYCLE	20 - MOTOR VEHICLE IN TRANSPORT	26 - BY A MOTOR VEHICLE
3 1 1				21 - PARKED MOTOR VEHICLE	27 - ANYTHING SET IN MOTION

4 1 1	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
5 1 1	27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	39 - LIGHT / LUMINARIES	45 - EMBANKMENT	52 - BUILDING
	28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL	40 - SUPPORT	46 - FENCE	53 - TUNNEL
6 1 1	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

1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER
2 2 0 0 7 5 6 4

DAMAGE
DAMAGE SCALE
2 - NONE 3 - FUNCTIONAL DAMAGE
2 - MINOR DAMAGE 4 - DISABLING DAMAGE
9 - UNKNOWN

DAMAGED AREA(S)
INDICATE ALL THAT APPLY

NO DAMAGE [0] UNDERCARRIAGE [14]
 TOP [13] ALL AREAS [15]
 UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT
0 - NO DAMAGE 14 - UNDERCARRIAGE
1 2 1 - 12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
13 - TOP 99 - UNKNOWN

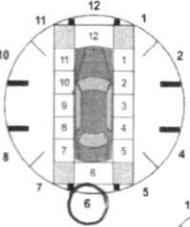
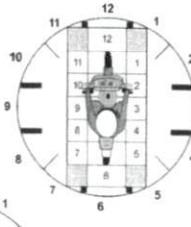
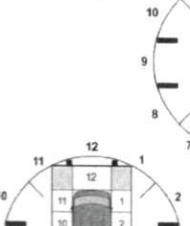
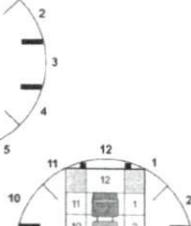
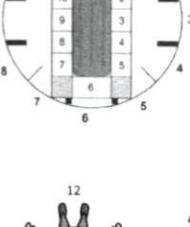
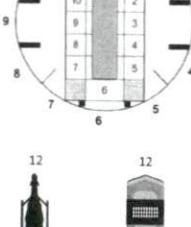
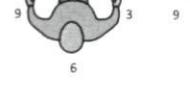
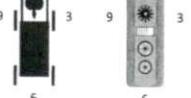
TRAFFIC
TRAFFIC FLOW
1 - ONE-WAY 2 - TWO-WAY
OF THROUGH LANES ON ROAD
2

RAIL GRADE CROSSING
1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING
3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION
FROM 2 TO 1
1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN

UNIT SPEED
2 0
POSTED SPEED
3 5
DETECTED SPEED
1 - STATED / ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED

OWNER	UNIT #	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER		OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER		
	012					
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	LICENSE PLATE #	VEHICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	
O H	P129460	1N14AL21E17N427336		2007	NISSAN	
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY		INSURANCE POLICY #	COLOR	VEHICLE MODEL	
TYPE OF USE		IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPANY NAME		
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS	HAZARDOUS MATERIAL		
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED			02	<input type="checkbox"/> MATERIAL RELEASED	CLASS #	PLACARD ID #
		VEHICLE WEIGHT GVWR/GCWR		<input type="checkbox"/> PLACARD		
		1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		1		
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 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		
01	00	# OF TRAILING UNITS				
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?			0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN	
02	1 - YES 2 - NO 9 - OTHER / UNKNOWN	AUTONOMOUS MODE LEVEL				
SPECIAL FUNCTION	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	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	
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	
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	
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	
SEQUENCE OF EVENTS						
120	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 31	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 31	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE 31	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM EQUIPMENT 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	
41	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 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	
1	1 - FIRST HARMFUL EVENT	1 - MOST HARMFUL EVENT				

LOCAL REPORT NUMBER		2 2 0 0 7 5 6 4
DAMAGE		DAMAGE SCALE
2	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		
06	0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP	14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
TRAFFIC		
TRAFFIC WAY FLOW	TRAFFIC CONTROL	
2	1 - ONE-WAY 2 - TWO-WAY 6	1 - ROUNDABOUT 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING	
2	1	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 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
UNIT SPEED		
0	1	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED		
3	5	



MOTORIST / Non-MOTORIST

										LOCAL REPORT NUMBER					
										2 2 0 0 7 5 6 4				DATE OF BIRTH	
MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE 0 1 MORGAN, ABBY RAYNE JEAN									0 6 1 8 2 0 0 3		1 8	F	
	ADDRESS: STREET, CITY, STATE, ZIP 1078 NOYES AVE, HAMILTON, OH 45015									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	AIR BAG USAGE	EJECTION	TRAPPED			
5									0 1	1	1	1			
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	<input checked="" type="checkbox"/>	OFFENSE DESCRIPTION			CITATION NUMBER				
O H				333.03a				ACDA			250309				
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	1	ALCOHOL TEST	DRUG TEST(S)				
4		0 3						STATUS	1	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4	
UNIT #	NAME: LAST, FIRST, MIDDLE 0 2 JACKSON, DESTINY LASHAE									DATE OF BIRTH		AGE	GENDER		
MOTORIST / NON-MOTORIST	ADDRESS: STREET, CITY, STATE, ZIP 4 S TIMBERHOLLOW DR APT 418, FAIRFIELD, OH 45014									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	AIR BAG USAGE	EJECTION	TRAPPED			
5									0 1	1	1	1			
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	<input type="checkbox"/>	OFFENSE DESCRIPTION			CITATION NUMBER				
O H															
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	1	ALCOHOL TEST	DRUG TEST(S)				
4								STATUS	1	TYPE	VALUE	STATUS	TYPE	RESULT SELECT UP TO 4	
UNIT #	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH		AGE	GENDER		
MOTORIST / NON-MOTORIST	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	1	ALCOHOL TEST	DRUG TEST(S)				
								STATUS	1	TYPE	VALUE	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 2- DEPLOYED FRONT		1- CLASS A 2- CLASS B 3- CLASS C 4- DEPLOYED BOTH FRONT / SIDE 5- NOT APPLICABLE 9- DEPLOYMENT UNKNOWN	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								
2- SUSPECTED SERIOUS INJURY	2- FRONT - MIDDLE	2- DEPLOYED SIDE		10- SLEEPER SECTION OF TRUCK CAB	11- PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	12- PASSENGER IN UNENCLOSED CARGO AREA	13- TRAILING UNIT	14- RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	15- NON-MOTORIST	16- OTHER / UNKNOWN	17- OTHER / UNKNOWN	18- OTHER	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
3- SUSPECTED MINOR INJURY	3- FRONT - RIGHT SIDE	3- DEPLOYED SIDE			17- OTHER / UNKNOWN	18- OTHER	19- OTHER / UNKNOWN	20- OTHER / UNKNOWN	21- OTHER / UNKNOWN	22- OTHER / UNKNOWN	23- OTHER / UNKNOWN	24- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
4- POSSIBLE INJURY	4- SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4- DEPLOYED BOTH FRONT / SIDE			25- OTHER / UNKNOWN	26- OTHER / UNKNOWN	27- OTHER / UNKNOWN	28- OTHER / UNKNOWN	29- OTHER / UNKNOWN	30- OTHER / UNKNOWN	31- OTHER / UNKNOWN	32- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
5- NO APPARENT INJURY	5- SECOND - MIDDLE	5- NOT APPLICABLE			33- OTHER / UNKNOWN	34- OTHER / UNKNOWN	35- OTHER / UNKNOWN	36- OTHER / UNKNOWN	37- OTHER / UNKNOWN	38- OTHER / UNKNOWN	39- OTHER / UNKNOWN	40- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
INJURED TAKEN BY	6- SECOND - RIGHT SIDE	6- DEPLOYED SIDE			41- OTHER / UNKNOWN	42- OTHER / UNKNOWN	43- OTHER / UNKNOWN	44- OTHER / UNKNOWN	45- OTHER / UNKNOWN	46- OTHER / UNKNOWN	47- OTHER / UNKNOWN	48- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
1- NOT TRANSPORTED / TREATED AT SCENE	7- THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	7- DEPLOYED SIDE			49- OTHER / UNKNOWN	50- OTHER / UNKNOWN	51- OTHER / UNKNOWN	52- OTHER / UNKNOWN	53- OTHER / UNKNOWN	54- OTHER / UNKNOWN	55- OTHER / UNKNOWN	56- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
2- EMS	8- THIRD - MIDDLE	8- DEPLOYED SIDE			57- OTHER / UNKNOWN	58- OTHER / UNKNOWN	59- OTHER / UNKNOWN	60- OTHER / UNKNOWN	61- OTHER / UNKNOWN	62- OTHER / UNKNOWN	63- OTHER / UNKNOWN	64- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
3- POLICE	9- THIRD - RIGHT SIDE	9- DEPLOYED SIDE			65- OTHER / UNKNOWN	66- OTHER / UNKNOWN	67- OTHER / UNKNOWN	68- OTHER / UNKNOWN	69- OTHER / UNKNOWN	70- OTHER / UNKNOWN	71- OTHER / UNKNOWN	72- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
9- OTHER / UNKNOWN	10- SLEEPER SECTION OF TRUCK CAB	10- DEPLOYED SIDE			73- OTHER / UNKNOWN	74- OTHER / UNKNOWN	75- OTHER / UNKNOWN	76- OTHER / UNKNOWN	77- OTHER / UNKNOWN	78- OTHER / UNKNOWN	79- OTHER / UNKNOWN	80- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
SAFETY EQUIPMENT	11- PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	11- DEPLOYED SIDE			81- OTHER / UNKNOWN	82- OTHER / UNKNOWN	83- OTHER / UNKNOWN	84- OTHER / UNKNOWN	85- OTHER / UNKNOWN	86- OTHER / UNKNOWN	87- OTHER / UNKNOWN	88- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
1- NONE USED	12- PASSENGER IN UNENCLOSED CARGO AREA	12- DEPLOYED SIDE			89- OTHER / UNKNOWN	90- OTHER / UNKNOWN	91- OTHER / UNKNOWN	92- OTHER / UNKNOWN	93- OTHER / UNKNOWN	94- OTHER / UNKNOWN	95- OTHER / UNKNOWN	96- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
2- SHOULDER BELT ONLY USED	13- TRAILING UNIT	13- DEPLOYED SIDE			97- OTHER / UNKNOWN	98- OTHER / UNKNOWN	99- OTHER / UNKNOWN	100- OTHER / UNKNOWN	101- OTHER / UNKNOWN	102- OTHER / UNKNOWN	103- OTHER / UNKNOWN	104- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
3- LAP BELT ONLY USED	14- RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	14- DEPLOYED SIDE			105- OTHER / UNKNOWN	106- OTHER / UNKNOWN	107- OTHER / UNKNOWN	108- OTHER / UNKNOWN	109- OTHER / UNKNOWN	110- OTHER / UNKNOWN	111- OTHER / UNKNOWN	112- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
4- SHOULDER & LAP BELT USED	15- NON-MOTORIST	15- DEPLOYED SIDE			113- OTHER / UNKNOWN	114- OTHER / UNKNOWN	115- OTHER / UNKNOWN	116- OTHER / UNKNOWN	117- OTHER / UNKNOWN	118- OTHER / UNKNOWN	119- OTHER / UNKNOWN	120- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
5- CHILD RESTRAINT SYSTEM - FORWARD FACING	99- OTHER / UNKNOWN	99- DEPLOYED SIDE			121- OTHER / UNKNOWN	122- OTHER / UNKNOWN	123- OTHER / UNKNOWN	124- OTHER / UNKNOWN	125- OTHER / UNKNOWN	126- OTHER / UNKNOWN	127- OTHER / UNKNOWN	128- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
6- CHILD RESTRAINT SYSTEM - REAR FACING					129- OTHER / UNKNOWN	130- OTHER / UNKNOWN	131- OTHER / UNKNOWN	132- OTHER / UNKNOWN	133- OTHER / UNKNOWN	134- OTHER / UNKNOWN	135- OTHER / UNKNOWN	136- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
7- BOOSTER SEAT					137- OTHER / UNKNOWN	138- OTHER / UNKNOWN	139- OTHER / UNKNOWN	140- OTHER / UNKNOWN	141- OTHER / UNKNOWN	142- OTHER / UNKNOWN	143- OTHER / UNKNOWN	144- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
8- HELMET USED					145- OTHER / UNKNOWN	146- OTHER / UNKNOWN	147- OTHER / UNKNOWN	148- OTHER / UNKNOWN	149- OTHER / UNKNOWN	150- OTHER / UNKNOWN	151- OTHER / UNKNOWN	152- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
9- PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)					153- OTHER / UNKNOWN	154- OTHER / UNKNOWN	155- OTHER / UNKNOWN	156- OTHER / UNKNOWN	157- OTHER / UNKNOWN	158- OTHER / UNKNOWN	159- OTHER / UNKNOWN	160- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
10- REFLECTIVE CLOTHING					161- OTHER / UNKNOWN	162- OTHER / UNKNOWN	163- OTHER / UNKNOWN	164- OTHER / UNKNOWN	165- OTHER / UNKNOWN	166- OTHER / UNKNOWN	167- OTHER / UNKNOWN	168- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
11- LIGHTING - PEDESTRIAN / BICYCLE ONLY					169- OTHER / UNKNOWN	170- OTHER / UNKNOWN	171- OTHER / UNKNOWN	172- OTHER / UNKNOWN	173- OTHER / UNKNOWN	174- OTHER / UNKNOWN	175- OTHER / UNKNOWN	176- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
99- OTHER / UNKNOWN					177- OTHER / UNKNOWN	178- OTHER / UNKNOWN	179- OTHER / UNKNOWN	180- OTHER / UNKNOWN	181- OTHER / UNKNOWN	182- OTHER / UNKNOWN	183- OTHER / UNKNOWN	184- OTHER / UNKNOWN	1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER		
EJECTION										OL ENDORSEMENT	TEST STATUS				
1- NOT EJECTED										H - HAZMAT	1- NONE GIVEN				
2- PARTIALLY EJECTED										M - MOTORCYCLE	2- TEST REFUSED				
3- TOTALLY EJECTED										P - PASSENGER	3- TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE				
4- NOT APPLICABLE										N - TANKER	4- TEST GIVEN, RESULTS KNOWN				
5- DEPLOYMENT UNKNOWN										Q - MOTOR SCOOTER	5- TEST GIVEN, RESULTS UNKNOWN				
6- DEPLOYMENT UNKNOWN										R - THREE-WHEEL MOTORCYCLE	6- OTHER				
7- DEPLOYMENT UNKNOWN										S - SCHOOL BUS	7- DRUG TEST TYPE				
8- DEPLOYMENT UNKNOWN										T - DOUBLE & TRIPLE TRAILERS	1- NONE				
9- DEPLOYMENT UNKNOWN										X - TANKER / HAZMAT	2- BLOOD				
10- DEPLOYMENT UNKNOWN											3- URINE				
11- DEPLOYMENT UNKNOWN											4- BREATH				
12- DEPLOYMENT UNKNOWN											5- OTHER				
13- DEPLOYMENT UNKNOWN											6- DRUG TEST TYPE				
14- DEPLOYMENT UNKNOWN											1- NONE				
15- DEPLOYMENT UNKNOWN											2- BLOOD				
16- DEPLOYMENT UNKNOWN											3- URINE				
17- DEPLOYMENT UNKNOWN											4- BREATH				
18- DEPLOYMENT UNKNOWN											5- OTHER				
TRAPPED										GENDER	TEST STATUS				
1- NOT TRAPPED										F - FEMALE	1- APPARENTLY NORMAL				
2- EXTRICATED BY MECHANICAL MEANS										M - MALE	2- PHYSICAL IMPAIRMENT				
3- FREED BY NON-MECHANICAL MEANS										U - OTHER / UNKNOWN	3- EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)				
4- NOT APPLICABLE											4- ILLNESS				
5- DEPLOYMENT UNKNOWN											5- FELL ASLEEP, FAINTED, FATIGUED, ETC.				
6- DEPLOYMENT UNKNOWN											6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL				
7- DEPLOYMENT UNKNOWN											9- OTHER / UNKNOWN				
8- DEPLOYMENT UNKNOWN											8- DRUG TEST RESULT(S)				
9- DEPLOYMENT UNKNOWN											1- AMPHETAMINES				
10- DEPLOYMENT UNKNOWN											2- BARBITURATES				
11- DEPLOYMENT UNKNOWN											3- BENZODIAZEPINES				
12- DEPLOYMENT UNKNOWN											4- CANNABINOID				
13- DEPLOYMENT UNKNOWN											5- COCAINE				
14- DEPLOYMENT UNKNOWN											6- OPIATES / OPIOIDS				
15- DEPLOYMENT UNKNOWN											7- OTHER				
16- DEPLOYMENT UNKNOWN											8- NEGATIVE RESULTS				
COND										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															



OCCUPANT / WITNESS ADDENDUM

OCCUPANT	LOCAL REPORT NUMBER 2 2 0 0 7 5 6 4										
	UNIT #	NAME: LAST, FIRST, MIDDLE JONES, MYKEL			DATE OF BIRTH 0 4 0 4 2 0 0 6			AGE 15	GENDER M		
ADDRESS: STREET, CITY, STATE, ZIP 4731 FAIRFIELD AVE, FAIRFIELD, OH 45014											
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 AIR BAG USAGE EJECTION TRAPPED 0 3 0 1 1 1											
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH			AGE 0	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP											
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 AIR BAG USAGE EJECTION TRAPPED 0 3 0 1 1 1											
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH			AGE 0	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP											
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 AIR BAG USAGE EJECTION TRAPPED 0 3 0 1 1 1											
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH			AGE 0	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP											
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 AIR BAG USAGE EJECTION TRAPPED 0 3 0 1 1 1											
INJURIES			SAFETY EQUIPMENT USED			SEATING POSITION			AIR BAG USAGE		
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY			1 - NONE USED - VEHICLE OCCUPANT 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 - 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 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN			1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN		
INJURED TAKEN BY									EJECTION		
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		
GENDER									TRAPPED		
F - FEMALE M - MALE U - OTHER / UNKNOWN									1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS		
WITNESS	NAME: LAST, FIRST, MIDDLE										
	DATE OF BIRTH 0										
	ADDRESS: STREET, CITY, STATE, ZIP										
	CONTACT PHONE - INCLUDE AREA CODE										
WITNESS	NAME: LAST, FIRST, MIDDLE										
	DATE OF BIRTH 0										
	ADDRESS: STREET, CITY, STATE, ZIP										
	CONTACT PHONE - INCLUDE AREA CODE										
WITNESS	NAME: LAST, FIRST, MIDDLE										
	DATE OF BIRTH 0										
	ADDRESS: STREET, CITY, STATE, ZIP										
	CONTACT PHONE - INCLUDE AREA CODE										

LOCAL
REPORT
NUMBER

22007564

AGENCY

FAIRFIELD P.D. 00901

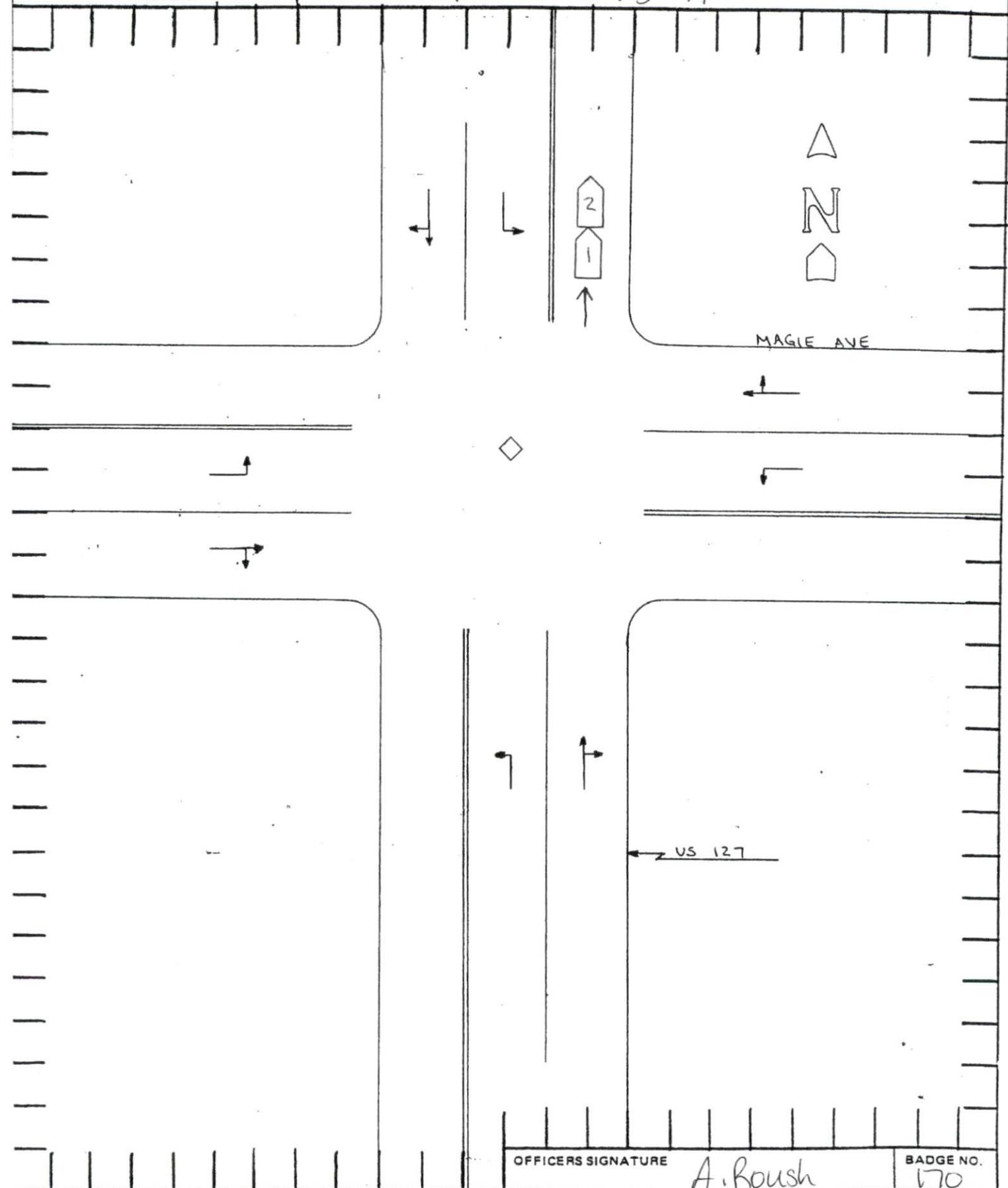
DATE OF ACCIDENT
M 02 10 01 2022

IN COUNTY OF

BUTLER

ACCIDENT
LOCATION

U.S. 127 at Magie Ave.



OFFICERS SIGNATURE

A. Roush

BADGE NO.
170