

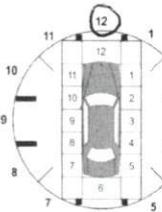
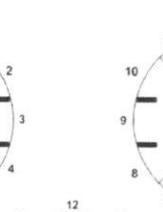
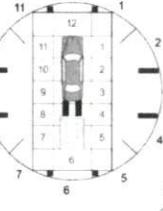
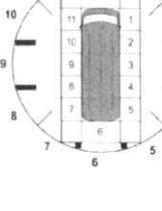
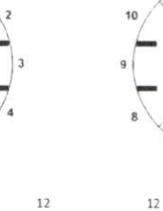
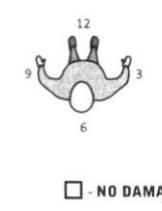


## TRAFFIC CRASH REPORT

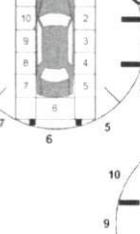
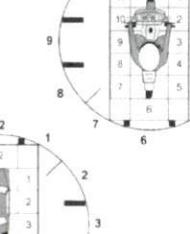
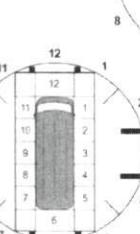
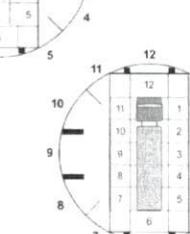
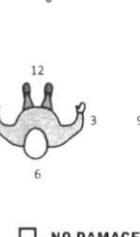
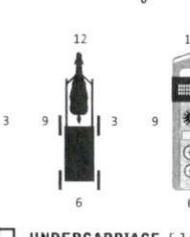
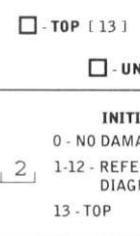
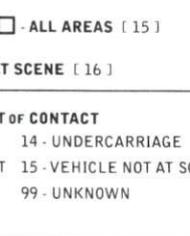
\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN		<input checked="" type="checkbox"/> OH-2	<input type="checkbox"/> OH-3	LOCAL INFORMATION				LOCAL REPORT NUMBER*		
		<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME* NCIC*				<input type="checkbox"/> HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
		<input type="checkbox"/> PRIVATE PROPERTY		Fairfield Police Department 0 0 9 0 1				1 - SOLVED	0 3	98 - ANIMAL
								2 - UNSOLVED		0 1
COUNTY* 0 9		LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP 1 1	LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield				CRASH DATE / TIME* 0 2 0 7 2 0 2 2 1 1 2 0			CRASH SEVERITY 5
REFERENCE LOCATION	ROUTE TYPE U S	ROUTE NUMBER 1 2 7	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME			ROAD TYPE	LATITUDE DECIMAL DEGREES 3 9 . 3 4 5 9 7 0		
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) MAGIE			ROAD TYPE A V	LONGITUDE DECIMAL DEGREES - 8 4 . 5 5 9 4 3 3		
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	ROUTE TYPE IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY				INTERSECTION RELATED			
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS						<input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH 0 4	<input type="checkbox"/> WITHIN INTERCHANGE AREA	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 0 1				MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION 2 - BETWEEN 3 - TWO MOTOR VEHICLES IN 4 - REAR-END 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - HEAD-ON 10 - CROSSOVER 11 - RAILWAY GRADE CROSSING 12 - SHARED USE PATHS OR TRAILS 13 - BIKE LANE 14 - TOLL BOOTH 99 - OTHER / UNKNOWN 6			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		WORK ZONE TYPE 1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER		LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA			CONTOUR 1	CONDITIONS 1	SURFACE 2	
<input type="checkbox"/> WORKERS PRESENT							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	
<input type="checkbox"/> LAW ENFORCEMENT PRESENT										
<input type="checkbox"/> ACTIVE SCHOOL ZONE										
LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN 1				WEATHER 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN 0 1			CONTOUR 1	CONDITIONS 1	SURFACE 2	
NARRATIVE ON 2/7/22 AT AROUND 11:20 AM, UNIT 1 WAS TRAVELING SOUTH BOUND ON PLEASANT AVE (US 127) TOWARDS THE INTERSECTION OF MAGIE AVE. UNIT 2 WAS SITTING AT THE RED LIGHT ON MAGIE AVE AT PLEASANT AVE, FACING WEST BOUND. UNIT 3 WAS ALSO ON MAGIE AVE AT PLEASANT AVE, FACING EAST BOUND AT THE RED LIGHT. UNIT 2 THEN GOT THE GREEN LIGHT AND AS HE PROCEEDED STRAIGHT THROUGH THE INTERSECTION, THE OPERATOR OF UNIT 1 RAN THE RED LIGHT AND STRUCK UNIT 2 WHICH PUSHED UNIT 2 INTO UNIT 3. UNIT 1 WAS ALSO CHARGED WITH DRIVING UNDER SUSPENSION 335.071(A)										Indicate the north direction with an "N" on the compass diagram. 
CRASH REPORTED DATE / TIME 0 2 0 7 2 0 2 2 1 1 2 0		DISPATCH DATE / TIME 0 2 0 7 2 0 2 2 1 1 2 1		ARRIVAL DATE / TIME 0 2 0 7 2 0 2 2 1 1 2 8		SCENE CLEARED DATE / TIME 0 2 0 7 2 0 2 2 1 2 0 5		REPORT TAKEN BY		
TOTAL TIME ROADWAY CLOSED		OTHER INVESTIGATION TIME		TOTAL MINUTES 0 4 4		OFFICER'S NAME* A. MCGUFFEY		<input checked="" type="checkbox"/> POLICE AGENCY		
						OFFICER'S BADGE NUMBER* 1 7 2		<input type="checkbox"/> MOTORIST		
								<input type="checkbox"/> SUPPLEMENT (CORRECTION or ADDITION TO AN EXISTING REPORT SENT TO OGPS)		

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)								
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								
O_H	JEC1592	2T1BU4EEXAC496232	2010								
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR								
	PROGRESSIVE	939720132	GRAY								
TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME								
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	WAYNES								
<input checked="" type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS	HAZARDOUS MATERIAL								
		0_1	<input type="checkbox"/> MATERIAL RELEASED	CLASS #	PLACARD ID #						
			<input type="checkbox"/> PLACARD								
UNIT TYPE	VEHICLE WEIGHT GVWR/GCWR										
	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 BICYCLE	15 - SEMI-TRACTOR	21 - HEAVY EQUIPMENT	26 - BICYCLE						
	5 - CARGO VAN	11 - ALL-TERRAIN VEHICLE (ATV / UTV)	16 - FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN						
	6 - VAN (9-15 SEATS)		17 - MOTORHOME		99 - UNKNOWN OR HIT/SKIP						
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								
		AUTONOMOUS MODE LEVEL	0	1 - DRIVER ASSISTANCE							
			2	2 - PARTIAL AUTOMATION							
			5	3 - FULL AUTOMATION							
0_1	1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16 - FARM	21 - MAIL CARRIER						
	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - MOWING	99 - OTHER / UNKNOWN						
	3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE	18 - SNOW REMOVAL							
	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19 - TOWING							
	5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL							
0_1	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						
0	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									
0	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	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE						
	2 - NON-COLLISION	2 - BACKING	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19 - STANDING						
	3 - STRIKING	0_1 3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	10 - PARKED	20 - OTHER NON-MOTORIST						
	4 - STRUCK PRE-CRASH ACTIONS	4 - OVERTAKING/PASSING	11 - SLOWING OR STOPPED IN TRAFFIC	15 - WALKING, RUNNING, JOGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE						
	5 - BOTH STRIKING & STRUCK	5 - MAKING RIGHT TURN	12 - DRIVERLESS	16 - WORKING	17 - PUSHING VEHICLE						
	9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN			99 - OTHER / UNKNOWN						
0_3	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 / ACCA	14 - STOPPED OR PARKED ILLEGALLY	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE						
	3 - RAN RED LIGHT	9 - IMPROPER LANE CHANGE	15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLING/SPILLING	23 - OPENING DOOR INTO ROADWAY						
	4 - RAN STOP SIGN	10 - IMPROPER PASSING	16 - WRONG WAY	20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION						
	5 - UNSAFE SPEED	11 - DROVE OFF ROAD									
	6 - IMPROPER TURN	12 - IMPROPER BACKING									
SEQUENCE OF EVENTS											
NON-COLLISION											
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	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	19 - ANIMAL - OTHER	25 - BY A MOVABLE OBJECT						
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	15 - PEDALCYCLE	20 - MOTOR VEHICLE IN TRANSPORT							
				21 - PARKED MOTOR VEHICLE							
4	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						
	27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	39 - LIGHT / LUMINARIES SUPPORT	45 - EMBANKMENT	52 - BUILDING						
	28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL	40 - UTILITY POLE	46 - FENCE	53 - TUNNEL						
	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	COLLISION WITH FIXED OBJECT - STRUCK										
1	FIRST HARMFUL EVENT					1	MOST HARMFUL EVENT				

LOCAL REPORT NUMBER					
2 2 0 0 8 8 7 4					
DAMAGE					
DAMAGE SCALE					
4	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_2	1-12 - REFER TO UNIT DIAGRAM	15 - VEHICLE NOT AT SCENE			
		99 - UNKNOWN			
13 - TOP					
TRAFFIC					
TRAFFIC FLOW			TRAFFIC CONTROL		
1 - ONE-WAY			2 - TWO-WAY		
2			2		
# OF THROUGH LANES ON ROAD			RAIL GRADE CROSSING		
2			1 - NOT INVOLVED		
			1		2 - INVOLVED-ACTIVE CROSSING
				1	3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION					
1 - NORTH    5 - NORTHEAST					
2 - SOUTH    6 - NORTHWEST					
3 - EAST    7 - SOUTHEAST					
4 - WEST    8 - SOUTHWEST					
9 - OTHER / UNKNOWN					
UNIT SPEED			DETECTED SPEED		
2_5			1 - STATED / ESTIMATED SPEED		
			2 - CALCULATED / EDR		
			3 - UNDETERMINED		
POSTED SPEED			3_5		

OWNER	UNIT # 0_2	OWNER NAME: LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER) CROUCH-BRUNE, JESSICA	OWNER PHONE: <input type="checkbox"/> SAME AS DRIVER L		
OWNER ADDRESS: STREET, CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER) 380 CREEKSIDER DR APT 205 FAIRFIELD, OH 45014					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
LP STATE O_H	LICENSE PLATE # JLK8256	VEHICLE IDENTIFICATION # 1G1JA6SH6F4184118	VEHICLE YEAR 2015		
INSURANCE VERIFIED <input checked="" type="checkbox"/>	INSURANCE COMPANY PROGRESSIVE	INSURANCE POLICY # 938655545	VEHICLE MAKE CHEVROLET		
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME FOX TOWING		
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/>	# OCCUPANTS 0_1	VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD		
UNIT TYPE 0_1	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL-TERRAIN VEHICLE (ATV / UTV)	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP
0	# OF TRAILING UNITS				
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0_2 1 - YES 2 - NO 9 - OTHER / UNKNOWN		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 0	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN	
AUTONOMOUS MODE LEVEL					
SPECIAL FUNCTION 0_1	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING	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 0_1	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	
VEHICLE DEFECTS 0_1	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	
NON-MOTORIST LOCATION AT IMPACT 0_1	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK	3 - INTERSECTION - OTHER CROSSWALK 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 0_5	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 0_1 3 - PRE-CRASH 4 - ACTIONS 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 9 - OTHER/UNKNOWN	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	
CONTRIBUTING CIRCUMSTANCES 0_1	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 / AHEAD 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	
SEQUENCE OF EVENTS					
NON-COLLISION					
1_2_0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE	
COLLISION WITH FIXED OBJECT - STRUCK					
4_1_1	25 - IMPACT ATTENUATOR / CRUSH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 5_1_1 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	
6_1_1	1 - FIRST HARMFUL EVENT 1	2 - MOST HARMFUL EVENT 2			

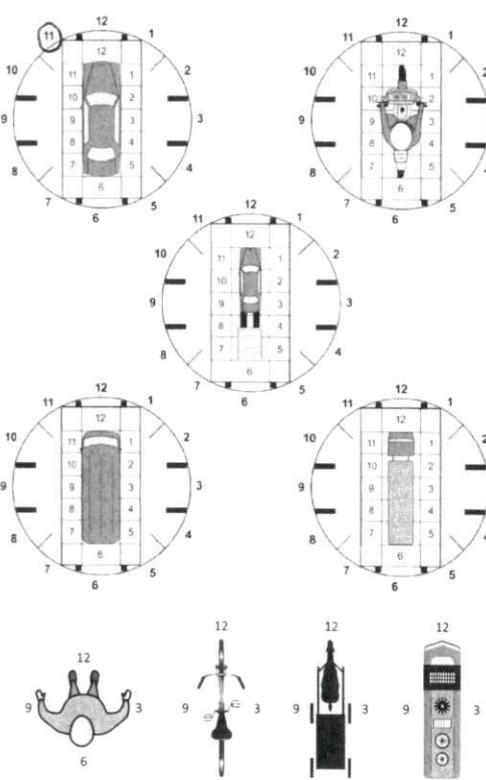
LOCAL REPORT NUMBER													
2	2	0	0	8	8	7	4						
DAMAGE													
DAMAGE SCALE													
4		1 - NONE		3 - FUNCTIONAL DAMAGE									
		2 - MINOR DAMAGE		4 - DISABLING DAMAGE									
				9 - UNKNOWN									
DAMAGED AREA(S) INDICATE ALL THAT APPLY													
													
													
													
													
<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							
0 2 1-12 - REFER TO UNIT DIAGRAM						15 - VEHICLE NOT AT SCENE							
13 - TOP						99 - UNKNOWN							
TRAFFIC													
TRAFFICWAY FLOW						TRAFFIC CONTROL							
1		2		1		2		3		4			
1 - ONE-WAY						1 - ROUNDABOUT							
2 - TWO-WAY						2 - SIGNAL							
2						3 - FLASHER							
# OF THROUGH LANES ON ROAD						RAIL GRADE CROSSING							
2						1 - NOT INVOLVED							
3						2 - INVOLVED-ACTIVE CROSSING							
4						3 - INVOLVED-PASSIVE CROSSING							
UNIT / NON-MOTORIST DIRECTION													
FROM 3 TO 4						1 - NORTH							
						5 - NORTHEAST							
						2 - SOUTH							
						6 - NORTHWEST							
						3 - EAST							
						7 - SOUTHEAST							
						4 - WEST							
						8 - SOUTHWEST							
						9 - OTHER / UNKNOWN							
UNIT SPEED						DETECTED SPEED							
1 0						1 - STATED / ESTIMATED SPEED							
POSTED SPEED						2 - CALCULATED / EDR							
3 5						3 - UNDETERMINED							

UNIT # <input type="text" value="0 3"/>	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 <input type="text" value="O H"/>	LICENSE PLATE # <input type="text" value="FGY7235"/>	VEHICLE IDENTIFICATION # <input type="text" value="3FAH1P0HA4CR3016365"/>	VEHICLE YEAR <input type="text" value="2012"/>	VEHICLE MAKE <input type="text" value="FORD"/>																																																							
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY <input type="text" value="GRANGE"/>	INSURANCE POLICY # <input type="text" value="4903415"/>	COLOR <input type="text" value="SILVER"/>	VEHICLE MODEL <input type="text" value="FUSION"/>																																																							
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT # <input type="text"/>	TOWED BY: COMPANY NAME <input type="text" value="MARCELLS"/>																																																								
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT		#OCCUPANTS <input type="text" value="0 1"/>	VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.																																																								
UNIT TYPE 0 1 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		10 - MOPED OR MOTORIZED BICYCLE 11 - ALL-TERRAIN VEHICLE (ATV / UTV)	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD																																																								
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																																																								
# OF TRAILING UNITS <input type="text" value="0"/>																																																											
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 2 1 - YES 2 - NO 9 - OTHER / UNKNOWN																																																											
AUTONOMOUS MODE LEVEL 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION																																																											
1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL																																																											
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 11 - DUMP 14 - GARBAGE/REFUSE 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 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS AT INCIDENT SCENE CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS 99 - OTHER / UNKNOWN																																																											
1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - STANDING 3 - STRIKING 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 10 - PARKED 20 - OTHER NON-MOTORIST 4 - STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 11 - SLOWING OR STOPPED 15 - WALKING, RUNNING, JOGGING, PLAYING 21 - STANDING OUTSIDE DISABLED VEHICLE 5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 12 - MAKING LEFT TURN 16 - WORKING 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN																																																											
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 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - LOAD SHIFTING/FALLING/SPILLING 23 - OPENING DOOR INTO ROADWAY 4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION 5 - UNSAFE SPEED 11 - DROVE OFF ROAD 12 - IMPROPER BACKING																																																											
SEQUENCE OF EVENTS																																																											
<table border="1"> <tr> <td>1 - OVERTURN/ROLLOVER</td> <td>6 - EQUIPMENT FAILURE</td> <td>11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL</td> <td>16 - RAILWAY VEHICLE</td> <td>22 - WORK ZONE MAINTENANCE EQUIPMENT</td> </tr> <tr> <td>2 - FIRE/EXPLOSION</td> <td>7 - SEPARATION OF UNITS</td> <td>12 - DOWNHILL RUNAWAY</td> <td>17 - ANIMAL - FARM</td> <td>23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE</td> </tr> <tr> <td>3 - IMMERSION</td> <td>8 - RAN OFF ROAD RIGHT</td> <td>13 - OTHER NON-COLLISION</td> <td>18 - ANIMAL - OTHER</td> <td>24 - OTHER MOVABLE OBJECT</td> </tr> <tr> <td>4 - JACKKNIFE</td> <td>9 - RAN OFF ROAD LEFT</td> <td>14 - PEDESTRIAN</td> <td>19 - ANIMAL - OTHER</td> <td></td> </tr> <tr> <td>5 - CARGO / EQUIPMENT LOSS OR SHIFT</td> <td>10 - CROSS MEDIAN</td> <td>15 - PEDALCYCLE</td> <td>20 - MOTOR VEHICLE IN TRANSPORT</td> <td></td> </tr> <tr> <td>6 - IMPACT ATTENUATOR / CRASH CUSHION</td> <td>31 - GUARDRAIL END</td> <td>37 - TRAFFIC SIGN POST</td> <td>43 - CURB</td> <td>50 - WORK ZONE MAINTENANCE EQUIPMENT</td> </tr> <tr> <td>7 - BRIDGE OVERHEAD STRUCTURE</td> <td>32 - PORTABLE BARRIER</td> <td>38 - OVERHEAD SIGN POST</td> <td>44 - DITCH</td> <td>51 - WALL</td> </tr> <tr> <td>8 - BRIDGE PIER OR ABUTMENT</td> <td>33 - MEDIAN CABLE BARRIER</td> <td>39 - LIGHT / LUMINARIES SUPPORT</td> <td>45 - EMBANKMENT</td> <td>52 - BUILDING</td> </tr> <tr> <td>9 - BRIDGE PARAPET</td> <td>34 - MEDIAN GUARDRAIL</td> <td>40 - UTILITY POLE</td> <td>46 - FENCE</td> <td>53 - TUNNEL</td> </tr> <tr> <td>10 - BRIDGE RAIL</td> <td>35 - MEDIAN CONCRETE BARRIER</td> <td>41 - OTHER POST, POLE OR SUPPORT</td> <td>47 - MAILBOX</td> <td>54 - OTHER FIXED OBJECT</td> </tr> <tr> <td>11 - GUARDRAIL FACE</td> <td>36 - MEDIAN OTHER BARRIER</td> <td>42 - CULVERT</td> <td>48 - TREE</td> <td>49 - FIRE HYDRANT</td> </tr> </table>					1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	12 - DOWNHILL RUNAWAY	17 - ANIMAL - FARM	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION	18 - ANIMAL - OTHER	24 - OTHER MOVABLE OBJECT	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	19 - ANIMAL - OTHER		5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	15 - PEDALCYCLE	20 - MOTOR VEHICLE IN TRANSPORT		6 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT	7 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	51 - WALL	8 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	39 - LIGHT / LUMINARIES SUPPORT	45 - EMBANKMENT	52 - BUILDING	9 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL	40 - UTILITY POLE	46 - FENCE	53 - TUNNEL	10 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX	54 - OTHER FIXED OBJECT	11 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	48 - TREE	49 - FIRE HYDRANT
1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT																																																							
2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	12 - DOWNHILL RUNAWAY	17 - ANIMAL - FARM	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE																																																							
3 - IMMERSION	8 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION	18 - ANIMAL - OTHER	24 - OTHER MOVABLE OBJECT																																																							
4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	19 - ANIMAL - OTHER																																																								
5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	15 - PEDALCYCLE	20 - MOTOR VEHICLE IN TRANSPORT																																																								
6 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT																																																							
7 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	51 - WALL																																																							
8 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	39 - LIGHT / LUMINARIES SUPPORT	45 - EMBANKMENT	52 - BUILDING																																																							
9 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL	40 - UTILITY POLE	46 - FENCE	53 - TUNNEL																																																							
10 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX	54 - OTHER FIXED OBJECT																																																							
11 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	48 - TREE	49 - FIRE HYDRANT																																																							
COLLISION WITH FIXED OBJECT - STRUCK																																																											
1 - FIRST HARMFUL EVENT 1 - MOST HARMFUL EVENT																																																											

LOCAL REPORT NUMBER  
2 2 0 0 8 8 7 4

DAMAGE  
4  
1 - 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 - 12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
99 - UNKNOWN  
13 - TOP

TRAFFIC WAY FLOW 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# 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 4 TO 3	UNIT / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
UNIT SPEED 0	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED 2 5	



# MOTORIST / Non-MOTORIST

MOTORIST / NON-MOTORIST	LOCAL REPORT NUMBER														
	UNIT #	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH				AGE			GENDER			
	0 1	LAMICHHANEY, DILLI, RAM			0 1 2 4 1 9 9 1				3 1			M			
	ADDRESS: STREET, CITY, STATE, ZIP 7440 POLO SPRINGS CT FAIRFIELD, OH 45014														
	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						0 4	<input type="checkbox"/>		0 1	1	1	1		
	OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER					
	O H				313.01 (A)		<input checked="" type="checkbox"/>	TRAFFIC CONTROL DEVICE		250404					
	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)				
	6		0 1		1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	1	1	1	1	1	1			
UNIT #	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH				AGE	GENDER		
0 2	COLLINS, SPENCER, DAVIS							1 1 1 7 1 9 9 9				2 2	M		
ADDRESS: STREET, CITY, STATE, ZIP 380 CREEKSIDE DR APT 205 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	DOT-COMPLIANT MC HELMET		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
5						0 4	<input type="checkbox"/>		0 1	1	1	1			
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER						
O H						<input type="checkbox"/>									
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)					
4				1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	1	1	1	1	1	1				
UNIT #	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH				AGE	GENDER		
0 3	WEYMER, RICHARD, A							0 9 0 8 1 9 7 0				5 1	M		
ADDRESS: STREET, CITY, STATE, ZIP 4318 E 4TH ST DAYTON, OH 45431												CONTACT PHONE - INCLUDE AREA CODE			
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
5						0 4	<input type="checkbox"/>		0 1	1	1	1			
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER						
O H						<input type="checkbox"/>									
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)					
4		0 3		1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	1	1	1	1	1	1				
INJURIES	SEATING POSITION		AIR BAG		OL CLASS	OL RESTRICTION(S)		DRIVER DISTRACTION		TEST STATUS					
1-FATAL	1-FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		1-NOT DEPLOYED		1-CLASS A	1-ALCOHOL INTERLOCK DEVICE		1-NOT DISTRACTED		1-NONE GIVEN					
2-SUSPECTED SERIOUS INJURY	2-FRONT - MIDDLE		2-DEPLOYED FRONT		2-CLASS B	2-CDL INTRASTATE ONLY		2-MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		2-TEST REFUSED					
3-SUSPECTED MINOR INJURY	3-FRONT - RIGHT SIDE		3-DEPLOYED SIDE		3-CLASS C	3-CORRECTIVE LENSES		3-TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		3-TEST GIVEN, RESULTS KNOWN					
4-POSSIBLE INJURY	4-SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		4-DEPLOYED BOTH FRONT / SIDE		4-REGULAR CLASS (OHIO = D)	4-FARM WAIVER		4-EXCEPT CLASS A BUS		4-TEST GIVEN, RESULTS UNKNOWN					
5-NO APPARENT INJURY	5-SECOND - MIDDLE		5-NOT APPLICABLE		5-M/C MOPED ONLY	5-EXCEPT CLASS A & CLASS B BUS		5-EXCEPT TRACTOR-TRAILER		5-TEST GIVEN, RESULTS UNKNOWN					
INJURED TAKEN BY		6-SECOND - RIGHT SIDE		9-DEPLOYMENT UNKNOWN		6-NO VALID OL	6-EXCEPT TRACTOR-TRAILER		6-INTERMEDIATE LICENSE RESTRICTIONS		6-OTHER ACTIVITY WITH AN ELECTRONIC DEVICE				
1-NOT TRANSPORTED / TREATED AT SCENE	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		7-NOT EJECTED		H-HAZMAT	7-LEARNER'S PERMIT RESTRICTIONS		7-PASSINGER		1-NONE					
2-EMS	8-THIRD - MIDDLE		8-PARTIALLY EJECTED		M-MOTORCYCLE	8-OTHER DISTRACTION INSIDE THE VEHICLE		8-OTHER DISTRACTION OUTSIDE THE VEHICLE		2-BLOOD					
3-POLICE	9-THIRD - RIGHT SIDE		9-TOTALLY EJECTED		P-PASSENGER	9-OTHER / UNKNOWN		9-OTHER / UNKNOWN		3-URINE					
9-OTHER / UNKNOWN	10-SLEEPER SECTION OF TRUCK CAB		10-NOT APPLICABLE		N-TANKER	10-LIMITED TO DAYLIGHT ONLY		10-LIMITED TO EMPLOYMENT		4-BREATH					
SAFETY EQUIPMENT		11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11-NOT TRAPPED		Q-MOTOR SCOOTER	11-LIMITED - OTHER		11-LIMITED - OTHER		5-OTHER				
1-NONE USED	12-PASSENGER IN UNENCLOSED CARGO AREA		12-EXTRICATED BY MECHANICAL MEANS		R-THREE-WHEEL MOTORCYCLE	12-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		12-MILITARY VEHICLES ONLY		1-NONE					
2-SHOULDER BELT ONLY USED	13-TRAILING UNIT		13-FREED BY NON-MECHANICAL MEANS		S-SCHOOL BUS	13-MOTOR VEHICLES WITHOUT AIR BRAKES		13-MOTOR VEHICLES WITHOUT AIR BRAKES		2-BLOOD					
3-LAP BELT ONLY USED	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14-OUTSIDE MIRROR		T-DOUBLE & TRIPLE TRAILERS	14-OUTSIDE MIRROR		14-OUTSIDE MIRROR		3-URINE					
4-SHOULDER & LAP BELT USED	15-NON-MOTORIST		15-PROSTHETIC AID		X-TANKER / HAZMAT	15-PROSTHETIC AID		15-PROSTHETIC AID		4-OTHER					
5-CHILD RESTRAINT SYSTEM - FORWARD FACING	99-OTHER / UNKNOWN		16-OTHER			16-OTHER		16-OTHER		4-CANNABINOID					
6-CHILD RESTRAINT SYSTEM - REAR FACING						17-OTHER		17-OTHER		5-COCAIN					
7-BOOSTER SEAT						18-OTHER		18-OTHER		6-OPIATES / OPIOIDS					
8-HELMET USED										7-OTHER					
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)										8-NEGATIVE RESULTS					
10-REFLECTIVE CLOTHING															
11-LIGHTING - PEDESTRIAN / BICYCLE ONLY															
99-OTHER / UNKNOWN															

LOCAL REPORT NUMBER 22-008874

IN COUNTY OF

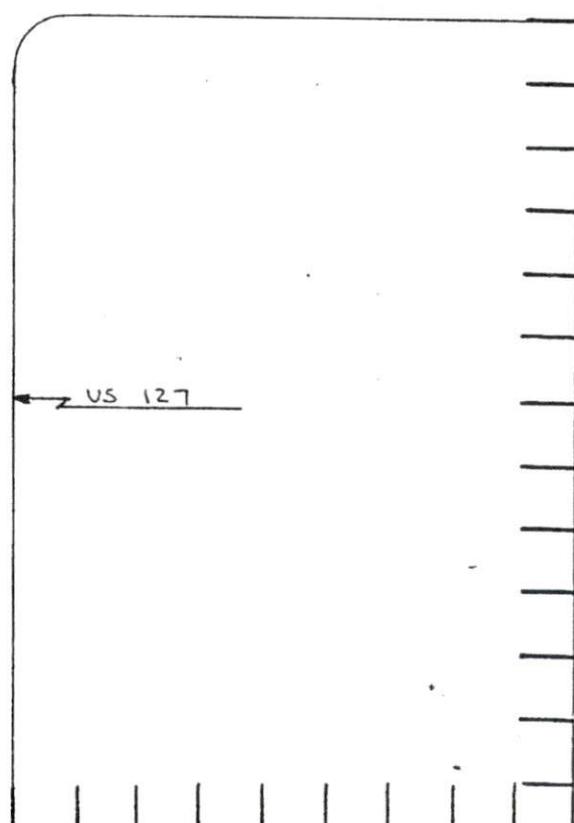
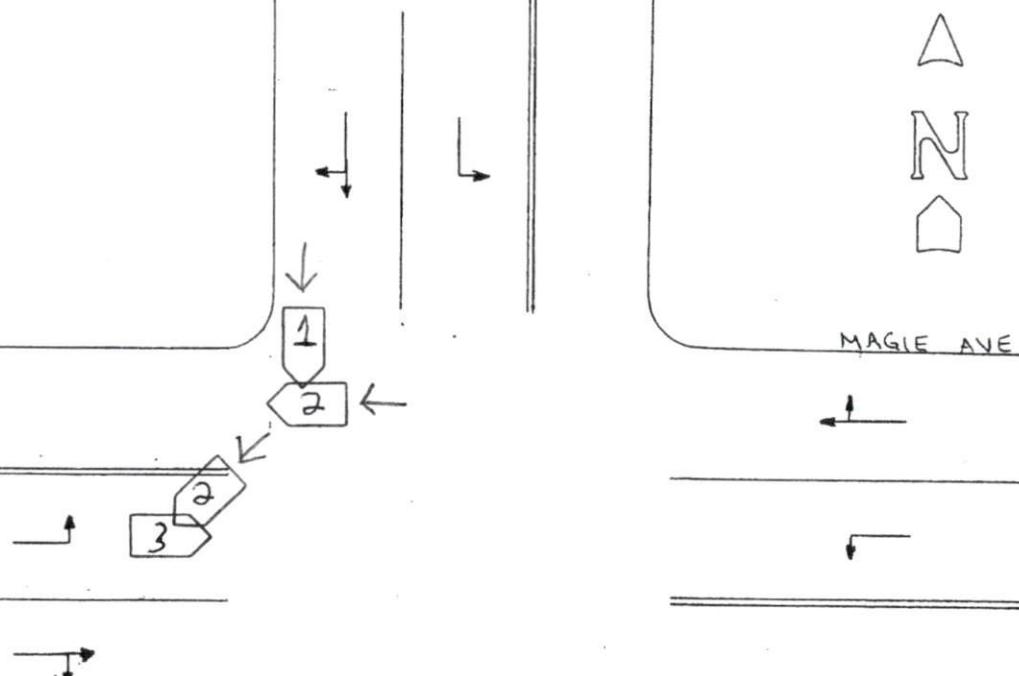
BUTLER

AGENCY

FAIRFIELD P.D. 00901

ACCIDENT LOCATION

PLEASANT AVE / MAGIE AVE

DATE OF ACCIDENT  
M 2 10 7 1922

OFFICER'S SIGNATURE

Andy MacCaffrey

BADGE NO.  
172

FBI 0002

D-2

60FG