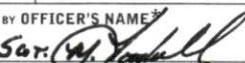


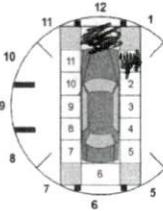
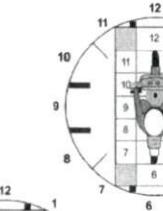
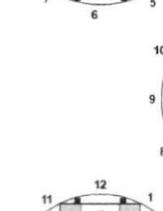
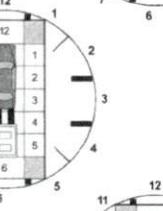
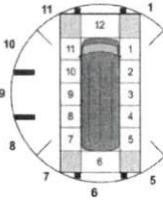
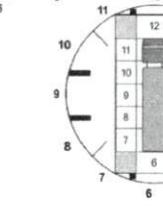
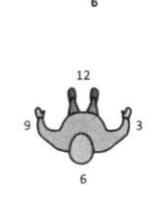
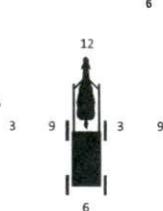


TRAFFIC CRASH REPORT

*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 checked="" type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION REPORTING AGENCY NAME* NCIC* Fairfield Police Department 00901				2 2 0 1 5 3 4 4 HIT/SKIP NUMBER OF UNITS UNIT IN ERROR 1 - SOLVED 2 - UNSOLVED 0 2 9 9 98 - ANIMAL 99 - UNKNOWN			
COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*				CRASH DATE / TIME*			
0 9	1 - CITY 2 - VILLAGE 3 - TOWNSHIP	City of Fairfield				0 3 0 3 2 0 2 2 1 6 2 6			
LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES			
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES			
REFERENCE	REFERENCE POINT	DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE	INTERSECTION RELATED				
	1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS	HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE	<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES			
ROADWAY				ROADWAY DIVIDED					
LOCATION OF FIRST HARMFUL EVENT				MANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL	MEDIAN TYPE		
0 1	1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP	9 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED USE PATHS OR TRAILS 13 - BIKE LANE 14 - TOLL BOOTH 99 - OTHER / UNKNOWN	7	1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (>4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER/UNKNOWN			
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE		WORK ZONE TYPE		LOCATION OF CRASH IN WORK ZONE		CONTOUR	CONDITIONS	SURFACE	
		1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER		1 - BEFORE THE 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		1 2 - STRAIGHT LEVEL 3 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/UNKNOWN	1 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN	
LIGHT CONDITION		WEATHER							
1	1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	0 1	1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL	6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN					
<p>NARRATIVE</p> <p>On 3/3/2022 at around 4:26 P.M. Unit 1 was traveling west on Lake Michigan Drive at approximately 25 M.P.H. and when at 5654 Lake Michigan Drive swerved to avoid a vehicle which was traveling east on Lake Michigan Drive and in so doing struck Unit 2 which was parked on Lake Michigan Drive.</p> <p>SEE OH-2</p>									
								 Indicate the north direction with an "N" on the compass diagram.	
CRASH REPORTED DATE / TIME		DISPATCH DATE / TIME		ARRIVAL DATE / TIME		SCENE CLEARED DATE / TIME		REPORT TAKEN BY	
0 3 0 3 2 0 2 2 1 6 2 6		0 3 0 3 2 0 2 2 1 6 2 9		0 3 0 3 2 0 2 2 1 6 3 7		0 3 0 3 2 0 2 2 1 7 0 1		<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OGPS)	
TOTAL TIME ROADWAY CLOSED		OTHER INVESTIGATION TIME		TOTAL MINUTES		OFFICER'S NAME* Connor Frazier OFFICER'S BADGE NUMBER* 1 5 8		CHECKED BY OFFICER'S NAME*  CHECKED BY OFFICER'S BADGE NUMBER* 1 1 8	

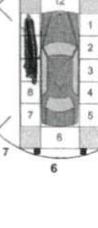
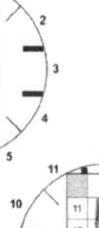
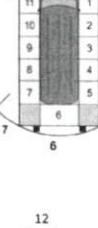
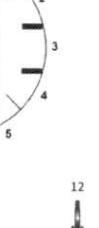
OWNER	UNIT # 0 1	OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER) POINDEXTER, LINDA, K	OWNER PHONE: INCLUDE AREA CODE (<input type="checkbox"/> SAME AS DRIVER)	
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER) 10698 PIPPIN ROAD, CINCINNATI, OHIO, 45231			
VEHICLE	COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP	COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
	LP STATE O H	LICENSE PLATE # HOH1283	VEHICLE IDENTIFICATION # 1N4A1L3AP7JCl2133187	VEHICLE YEAR 2018
INSURANCE VERIFIED	INSURANCE COMPANY ALLSTATE	INSURANCE POLICY # 826038542	COLOR BLACK	VEHICLE MODEL ALTIMA
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		#OCCUPANTS 0 2	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> CLASS # <input type="checkbox"/> PLACARD ID # <input type="checkbox"/> PLACARD	
UNIT TYPE 0 1		VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		
UNIT TYPE 0		# OF TRAILING UNITS		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2		AUTONOMOUS MODE LEVEL 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION
SPECIAL FUNCTION 0 1		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	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT
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
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
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
ACTION 0 3		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
CONTRIBUTING CIRCUMSTANCES 1 5		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 / ACD A 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
SEQUENCE OF EVENTS		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	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - GUARDRAIL END 12 - PORTABLE BARRIER 13 - MEDIAN CABLE BARRIER 14 - MEDIAN GUARDRAIL 15 - PEDESTRIAN 16 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - SWERVING TO AVOID 20 - IMPROPER CROSSING
COLLISION WITH FIXED OBJECT - STRUCK		22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOBILE OBJECT	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY	
FIRST HARMFUL EVENT 1		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 SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT
MOST HARMFUL EVENT 1		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	

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



UNIT

UNIT #		OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER)		OWNER PHONE: INCLUDE AREA CODE (<input type="checkbox"/> SAME AS DRIVER)	
0 1 2		GREGSTON, MICHAEL, B			
OWNER ADDRESS: STREET, CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER)					
5654 LAKE MICHIGAN DRIVE, FAIRFIELD, OHIO, 45014					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP				COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	
LP STATE		LICENSE PLATE #		VEHICLE IDENTIFICATION #	
O H		JBC9163		1D7H18P97J538821	
INSURANCE VERIFIED		INSURANCE COMPANY		INSURANCE POLICY #	
		TREXIS INSURANCE		1134007282432	
TYPE OF USE		US DOT #		VEHICLE YEAR	
<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE				2007	
INTERLOCK DEVICE EQUIPPED		# OCCUPANTS		VEHICLE MAKE	
		0		DODGE	
Hazardous Material				RAM 1500	
MATERIAL RELEASED		CLASS #		PLACARD ID #	
<input type="checkbox"/> PLACARD					
1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		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	
0 4		1 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP		23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN	
UNIT TYPE		# OF TRAILING UNITS			
1 - YES 2 - NO 9 - OTHER / UNKNOWN		0			
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		AUTONOMOUS MODE LEVEL		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN	
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	
1 - NO CARGO BODY TYPE / NOT APPLICABLE		3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE		21 - MAIL CARRIER 22 - OTHER / UNKNOWN	
2 - BUS		4 - LOGGING		9 - CARGO TANK 10 - FLAT BED 11 - DUMP	
3 - CARGO BODY TYPE		5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL		12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	
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	
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	
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 - PRE-CRASH 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	
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	
SEQUENCE OF EVENTS		NON-COLLISION		18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	
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	
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 SUPPORT 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	
1 - FIRST HARMFUL EVENT		1		43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	
1		1		50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	
1		1		50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	

LOCAL REPORT NUMBER													
2	2	0	1	5	3	4	4						
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							
9 - 9 - 9 - 9 - 1 - 1 - 2 - REFER TO UNIT DIAGRAM						15 - VEHICLE NOT AT SCENE							
13 - TOP						99 - UNKNOWN							
TRAFFIC													
TRAFFICWAY FLOW						TRAFFIC CONTROL							
1 - ONE-WAY			1 - ROUNDABOUT			4 - STOP SIGN							
2 - TWO-WAY			2 - SIGNAL			5 - YIELD SIGN							
2			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 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							
						<input type="checkbox"/> 1 - STATED / ESTIMATED SPEED							
						<input type="checkbox"/> 2 - CALCULATED / EDR							
						<input type="checkbox"/> 3 - UNDETERMINED							
POSTED SPEED													
<input type="checkbox"/> 2 5													

MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER											
2 2 0 1 5 3 4 4											
UNIT #	NAME: LAST, FIRST, MIDDLE										
0 1	TUCKER, JULIE, K										
ADDRESS: STREET, CITY, STATE, ZIP											
10698 PIPPIN ROAD, CINCINNATI, OHIO, 45231											
MOTORIST / NON-MOTORIST	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DATE OF BIRTH	AGE	GENDER	
	5						0 4	0 1 1 0 1 9 7 9	4 3	F	
	CONTACT PHONE - INCLUDE AREA CODE										
	OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER	
	O H										
	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	1	1 1	1 1	1 1	SELECT UP TO 4
	OTHER DRUG										
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ADDRESS: STREET, CITY, STATE, ZIP											
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OTHER DRUG											
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-TEST GIVEN, RESULTS UNKNOWN	4-TEST GIVEN, RESULTS UNKNOWN			
5-NO APPARENT INJURY	5-SECOND - MIDDLE		5-NOT APPLICABLE		5-M/C MOPED ONLY	5-EXCEPT CLASS A BUS	5-TALKING ON HAND-HELD COMMUNICATION DEVICE	5-TEST GIVEN, RESULTS UNKNOWN			
INJURED TAKEN BY		6-SECOND - RIGHT SIDE		9-DEPLOYMENT UNKNOWN		6-NO VALID OL	6-EXCEPT CLASS A & CLASS B BUS	6-TALKING ON HAND-HELD COMMUNICATION DEVICE	6-TEST GIVEN, RESULTS UNKNOWN		
1-NOT TRANSPORTED / TREATED AT SCENE	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		1-NOT EJECTED		H - HAZMAT	7-INTERMEDIATE LICENSE RESTRICTIONS	7-OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	7-NONE			
2-EMS	8-THIRD - MIDDLE		2-PARTIALLY EJECTED		M - MOTORCYCLE	8-LEARNER'S PERMIT RESTRICTIONS	8-PASSENGER	2-BLOOD			
3-POLICE	9-THIRD - RIGHT SIDE		3-TOTALLY EJECTED		P - PASSENGER	9-OTHER DISTRACTION INSIDE THE VEHICLE	9-OTHER DISTRACTION OUTSIDE THE VEHICLE	3-URINE			
9-OTHER / UNKNOWN	10-SLEEPER SECTION OF TRUCK CAB		4-NOT APPLICABLE		N - TANKER	10-LIMITED TO DAYLIGHT ONLY	10-OTHER / UNKNOWN	4-BREATH			
SAFETY EQUIPMENT		11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		1-NOT TRAPPED		Q - MOTOR SCOOTER	11-LIMITED TO EMPLOYMENT	11-OTHER	5-OTHER		
1-NONE USED	12-PASSENGER IN UNENCLOSED CARGO AREA		2-EXTRICATED BY MECHANICAL MEANS		R - THREE-WHEEL MOTORCYCLE	12-LIMITED - OTHER	12-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	DRUG TEST TYPE			
2-SHOULDER BELT ONLY USED	13-TRAILING UNIT		3-FREED BY NON-MECHANICAL MEANS		S - SCHOOL BUS	13-MILITARY VEHICLES ONLY	13-APPARENTLY NORMAL	1-NONE			
3-LAP BELT ONLY USED	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				T - DOUBLE & TRIPLE TRAILERS	15-MOTOR VEHICLES WITHOUT AIR BRAKES	15-PHYSICAL IMPAIRMENT	2-BLOOD			
4-SHOULDER & LAP BELT USED	15-NON-MOTORIST				X - TANKER / HAZMAT	16-OUTSIDE MIRROR	16-EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	3-URINE			
5-CHILD RESTRAINT SYSTEM - FORWARD FACING	99-OTHER / UNKNOWN					17-PROSTHETIC AID	17-ILLNESS	4-OTHER			
6-CHILD RESTRAINT SYSTEM - REAR FACING						18-OTHER	18-FELL ASLEEP, FAINTED, FATIGUED, ETC.	DRUG TEST RESULT(S)			
7-BOOSTER SEAT							19-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	1-AMPHETAMINES			
8-Helmet USED							20-OTHER / UNKNOWN	2-BARBITURATES			
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)								3-BENZODIAZEPINES			
10-REFLECTIVE CLOTHING								4-CANNABINOID			
11-LIGHTING - PEDESTRIAN / BICYCLE ONLY								5-COCAIN			
99-OTHER / UNKNOWN								6-OPIATES / OPIOIDS			
								7-OTHER			
								8-Negative RESULTS			

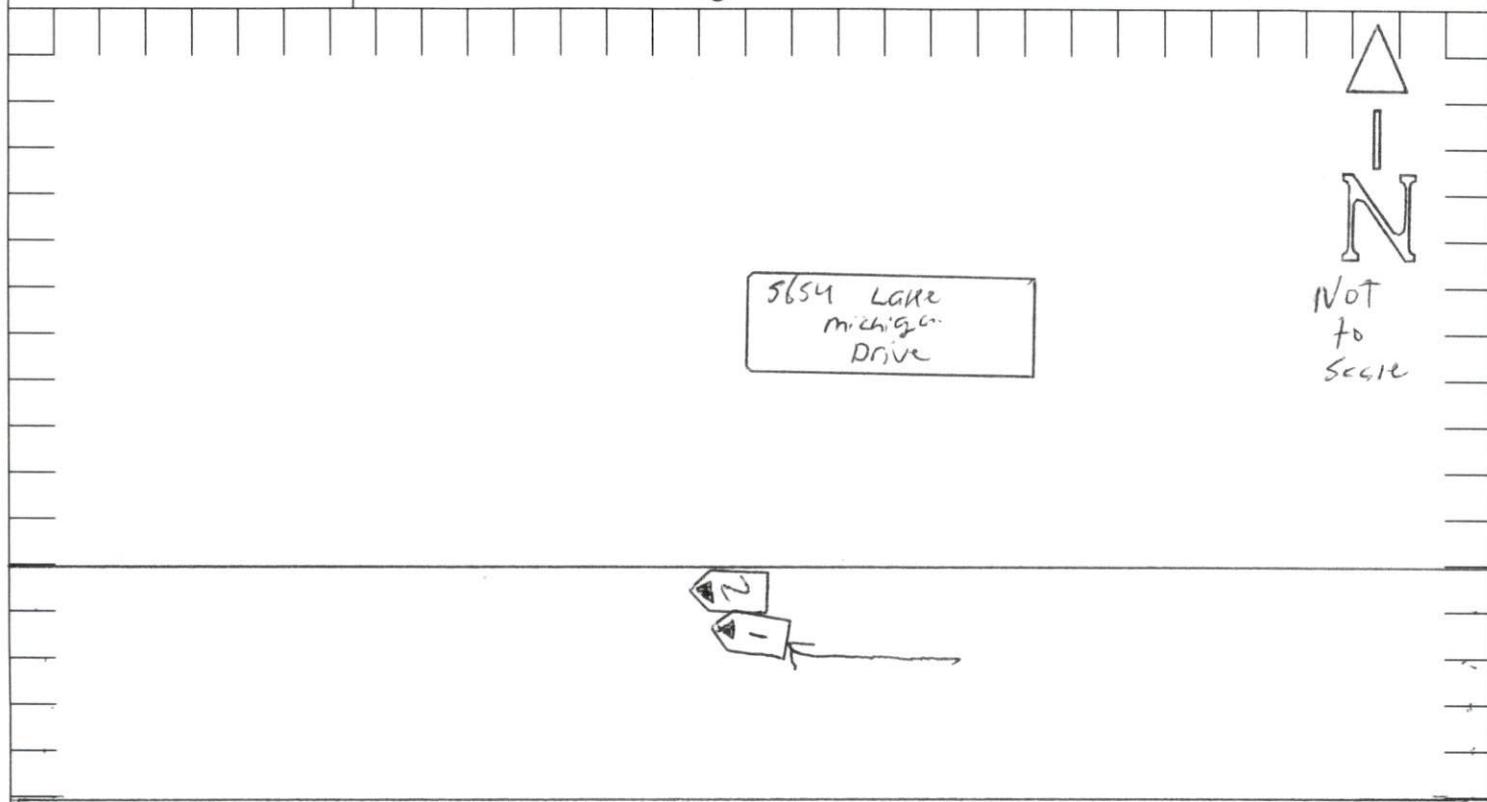


OCCUPANT / WITNESS ADDENDUM

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OHIO TRAFFIC ACCIDENT - DIAGRAM / NARRATIVE CONTINUATION

OH-2 (Rev. 1/82)

LOCAL REPORT NUMBER	PD22015344	REPORTING AGENCY	Fairfield Police Department	DATE OF ACCIDENT	3/3/22
IN COUNTY OF	Butler	ACCIDENT LOCATION	5654 Lake Michigan Drive		
 <p>5654 Lake Michigan Drive</p> <p>Not to Scale</p> <p>Lake Michigan Drive</p>					
			OFFICER'S SIGNATURE	C.Frazier	
					BADGE NO 158