



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN		<input type="checkbox"/> OH-2	<input type="checkbox"/> OH-3	LOCAL INFORMATION				LOCAL REPORT NUMBER*				
<input type="checkbox"/> SECONDARY CRASH		<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME*				NCIC*	2 2 0 1 8 7 8 6			
		Fairfield Police Department				0 0 9 0 1	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR			
						1 - SOLVED	0 2	0 1	98 - ANIMAL			
						2 - UNSOLVED		0 1	99 - UNKNOWN			
COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*						CRASH DATE / TIME*		CRASH SEVERITY		
0 9	1 - CITY 2 - VILLAGE 3 - TOWNSHIP	City of Fairfield						0 3 1 6 2 0 2 2 0 8 2 4		1 - FATAL 5		
REFERENCE	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME			ROAD TYPE	LATITUDE DECIMAL DEGREES		2 - SERIOUS INJURY SUSPECTED		
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)			ROAD TYPE	LONGITUDE DECIMAL DEGREES		3 - MINOR INJURY SUSPECTED		
				3527						4 - INJURY POSSIBLE		
	REFERENCE POINT	DIRECTION FROM REFERENCE	1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	ROUTE TYPE	ROAD TYPE	INTERSECTION RELATED					5 - PROPERTY DAMAGE ONLY	
		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	RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY	<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH		<input type="checkbox"/> WITHIN INTERCHANGE AREA		NUMBER OF APPROACHES
	DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	1 - MILES 2 - FEET 3 - YARDS							<input type="checkbox"/> ROADWAY DIVIDED		ROADWAY
LOCATION OF FIRST HARMFUL EVENT				MANNER OF CRASH COLLISION/IMPACT				DIRECTION OF TRAVEL		MEDIAN TYPE		
0 1	1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP	9 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED USE PATHS OR TRAILS 13 - BIKE LANE 14 - TOLL BOOTH 99 - OTHER / UNKNOWN	1 - NOT COLLISION 2 - REAR-TO-REAR 3 - BACKING 4 - ANGLE 5 - SIDESWIPE, SAME DIRECTION 6 - REAR-END 7 - SIDESWIPE, OPPOSITE DIRECTION 8 - HEAD-ON 9 - OTHER / UNKNOWN	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (24 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER/UNKNOWN							
<input type="checkbox"/> WORK ZONE RELATED		WORK ZONE TYPE		LOCATION OF CRASH IN WORK ZONE		CONTOUR	CONDITIONS	SURFACE				
<input type="checkbox"/> WORKERS PRESENT		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 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	1 - BEFORE THE 1ST WORK ZONE 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	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 - 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		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								
NARRATIVE										<p>NOT TO SCALE  Indicate the north direction with an "N" on the compass diagram. </p> <p>Woodridge Blvd</p> <p>3527 Woodridge Blvd</p>		
CRASH REPORTED DATE / TIME		DISPATCH DATE / TIME		ARRIVAL DATE / TIME		SCENE CLEARED DATE / TIME		REPORT TAKEN BY				
0 3 1 6 2 0 2 2 0 8 2 4		0 3 1 6 2 0 2 2 0 8 2 5		0 3 1 6 2 0 2 2 0 8 3 5		0 3 1 6 2 0 2 2 0 9 0 7		<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODDS)				
TOTAL TIME ROADWAY CLOSED		OTHER INVESTIGATION TIME		TOTAL MINUTES		OFFICER'S NAME*		CHECKED BY OFFICER'S NAME*				
						P.O. Gregg Lamb		Sgt. S Sprague				
						OFFICER'S BADGE NUMBER*		CHECKED BY OFFICER'S BADGE NUMBER*				
						6 5		8 4				

UNIT # 0_1 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)

Mensah-Kumah, Anthony

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)

11813 Hanover Rd. Cincinnati, OH. 45240

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE O_H LICENSE PLATE # HMU9633 VEHICLE IDENTIFICATION # 5XVZU3LB6FG28815 VEHICLE YEAR 2015 VEHICLE MAKE Hyun

INSURANCE VERIFIED INSURANCE COMPANY Progressive INSURANCE POLICY # 955420488 COLOR Gray VEHICLE MODEL Santa Fe

TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE US DOT # 1 TOWED BY: COMPANY NAME

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS 0_1 VEHICLE WEIGHT GVWR/GCWR

1 - <10K LBS. MATERIAL RELEASED CLASS # 1 PLACARD ID # 1

2 - 10,001 - 26K LBS. PLACARD

3 - >26K LBS. MATERIAL RELEASED CLASS # 1 PLACARD ID # 1

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 28 - ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS

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

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

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 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 99 - OTHER / UNKNOWN
CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION

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 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST
4 - STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 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

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

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 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION
3 - IMMERSION 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 20 - MOTOR VEHICLE IN TRANSPORT 24 - OTHER MOVABLE OBJECT
4 - JACKKNIFE 10 - CROSS MEDIAN 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE

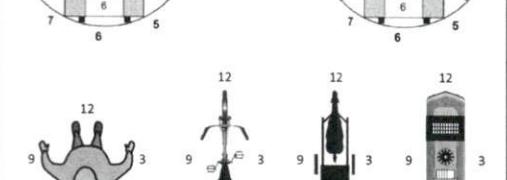
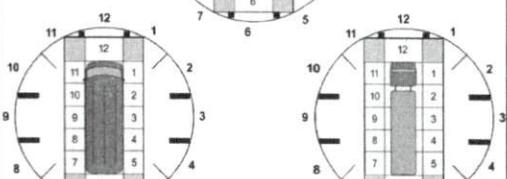
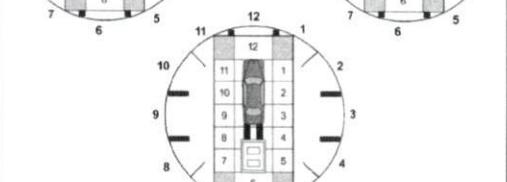
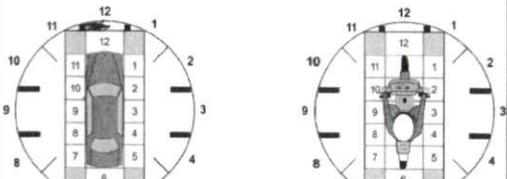
25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT
26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH 51 - WALL
33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES 45 - EMBANKMENT 52 - BUILDING
34 - MEDIAN GUARDRAIL SUPPORT 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL
27 - BRIDGE PIER OR ABUTMENT BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT
28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE BARRIER 48 - TREE 99 - OTHER / UNKNOWN
29 - BRIDGE RAIL 36 - MEDIAN OTHER BARRIER 42 - CULVERT

1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER
2 2 0 1 8 7 8 6

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 - 12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
99 - UNKNOWN

13 - TOP

TRAFFIC

TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY
2 6

TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN
2 - SIGNAL 5 - YIELD SIGN
3 - FLASHER 6 - NO CONTROL

OF THROUGH LANES ON ROAD 1 - NOT INVOLVED
2 - INVOLVED-ACTIVE CROSSING
2 1

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

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

FROM 4 TO 3

UNIT SPEED 1 - STATED/ESTIMATED SPEED
2 - CALCULATED/EDR
3 - UNDETERMINED
1 1

POSTED SPEED 3 - UNDETERMINED
3 5

OWNER
UNIT # **OWNER NAME:** LAST, FIRST, MIDDLE (SAME AS DRIVER)
Any, Linda N.
OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
3605 Woodridge Blvd #6 Fairfield, OH. 45014

OWNER PHONE: INCLUDE AREA CODE (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 **JNX6035** **1FMCUOG92DUC012385** **2013** **Ford**

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
Founders		ITOH210136	White	Escape
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 <input type="checkbox"/> HIT/SKIP UNIT 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 <input type="checkbox"/> 1 - PASSENGER CAR <input type="checkbox"/> 2 - PASSENGER VAN (MINIVAN) <input type="checkbox"/> 3 - SPORT UTILITY VEHICLE <input type="checkbox"/> 4 - PICK UP <input type="checkbox"/> 5 - CARGO VAN <input type="checkbox"/> 6 - VAN (9-15 SEATS)	7 - MOTORCYCLE 2-WHEELED <input type="checkbox"/> 8 - MOTORCYCLE 3-WHEELED <input type="checkbox"/> 9 - AUTOCYCLE <input type="checkbox"/> 10 - MOPED OR MOTORIZED <input type="checkbox"/> 11 - ALL-TERRAIN VEHICLE (ATV / UTV)	12 - GOLF CART <input type="checkbox"/> 13 - SNOWMOBILE <input type="checkbox"/> 14 - SINGLE UNIT TRUCK <input type="checkbox"/> 15 - SEMI-TRACTOR <input type="checkbox"/> 16 - FARM EQUIPMENT <input type="checkbox"/> 17 - MOTORHOME	18 - LIMO (LIVERY VEHICLE) <input type="checkbox"/> 19 - BUS (16+ PASSENGERS) <input type="checkbox"/> 20 - OTHER VEHICLE <input type="checkbox"/> 21 - HEAVY EQUIPMENT <input type="checkbox"/> 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE <input type="checkbox"/> 23 - PEDESTRIAN / SKATER <input type="checkbox"/> 24 - WHEELCHAIR (ANY TYPE) <input type="checkbox"/> 25 - OTHER NON-MOTORIST <input type="checkbox"/> 26 - BICYCLE <input type="checkbox"/> 27 - TRAIN <input type="checkbox"/> 99 - UNKNOWN OR HIT/SKIP
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OF TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? <input type="checkbox"/> 1 - YES <input type="checkbox"/> 2 - NO <input type="checkbox"/> 9 - OTHER / UNKNOWN	0	AUTONOMOUS MODE LEVEL <input type="checkbox"/> 0 - NO AUTOMATION <input type="checkbox"/> 1 - DRIVER ASSISTANCE <input type="checkbox"/> 2 - PARTIAL AUTOMATION <input type="checkbox"/> 3 - CONDITIONAL AUTOMATION <input type="checkbox"/> 4 - HIGH AUTOMATION <input type="checkbox"/> 5 - FULL AUTOMATION
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1 - NONE <input type="checkbox"/> 2 - TAXI <input type="checkbox"/> 3 - ELECTRONIC RIDE SHARING <input type="checkbox"/> 4 - SCHOOL TRANSPORT <input type="checkbox"/> 5 - BUS - TRANSIT / COMMUTER	6 - BUS - CHARTER / TOUR <input type="checkbox"/> 7 - BUS - INTERCITY <input type="checkbox"/> 8 - BUS - SHUTTLE <input type="checkbox"/> 9 - BUS - OTHER <input type="checkbox"/> 10 - AMBULANCE	11 - FIRE <input type="checkbox"/> 12 - MILITARY <input type="checkbox"/> 13 - POLICE <input type="checkbox"/> 14 - PUBLIC UTILITY <input type="checkbox"/> 15 - CONSTRUCTION EQUIPMENT	16 - FARM <input type="checkbox"/> 17 - MOWING <input type="checkbox"/> 18 - SNOW REMOVAL <input type="checkbox"/> 19 - TOWING <input type="checkbox"/> 20 - SAFETY SERVICE PATROL	21 - MAIL CARRIER <input type="checkbox"/> 24 - WHEELCHAIR (ANY TYPE) <input type="checkbox"/> 25 - OTHER NON-MOTORIST
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1 - NO CARGO BODY TYPE / NOT APPLICABLE <input type="checkbox"/> 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE <input type="checkbox"/> 4 - LOGGING	5 - INTERMODAL CONTAINER CHASSIS <input type="checkbox"/> 6 - CARGO VAN / ENCLOSED BOX <input type="checkbox"/> 7 - GRAIN / CHIPS / GRAVEL	8 - POLE <input type="checkbox"/> 9 - CARGO TANK	12 - CONCRETE MIXER <input type="checkbox"/> 13 - AUTO TRANSPORTER <input type="checkbox"/> 14 - GARBAGE / REFUSE <input type="checkbox"/> 99 - OTHER / UNKNOWN
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1 - TURN SIGNALS <input type="checkbox"/> 2 - HEAD LAMPS <input type="checkbox"/> 3 - TAIL LAMPS	4 - BRAKES <input type="checkbox"/> 5 - STEERING <input type="checkbox"/> 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES <input type="checkbox"/> 8 - TRAILER EQUIPMENT <input type="checkbox"/> 9 - DEFECTIVE	9 - MOTOR TROUBLE <input type="checkbox"/> 10 - DISABLED FROM PRIOR ACCIDENT	99 - OTHER / UNKNOWN
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1 - INTERSECTION - MARKED CROSSWALK <input type="checkbox"/> 2 - INTERSECTION - UNMARKED CROSSWALK	3 - INTERSECTION - OTHER <input type="checkbox"/> 4 - MIDBLOCK - MARKED CROSSWALK	6 - BICYCLE LANE <input type="checkbox"/> 7 - SHOULDER / ROADSIDE <input type="checkbox"/> 8 - SIDEWALK	9 - MEDIAN / CROSSING ISLAND <input type="checkbox"/> 10 - DRIVEWAY ACCESS <input type="checkbox"/> 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE <input type="checkbox"/> 99 - OTHER / UNKNOWN
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1 - NON-CONTACT <input type="checkbox"/> 2 - NON-COLLISION <input type="checkbox"/> 3 - STRIKING <input type="checkbox"/> 4 - STRUCK <input type="checkbox"/> 5 - BOTH STRIKING & STRUCK <input type="checkbox"/> 9 - OTHER / UNKNOWN	0, 5	1 - STRAIGHT AHEAD <input type="checkbox"/> 2 - BACKING <input type="checkbox"/> 3 - CHANGING LANES <input type="checkbox"/> 4 - OVERTAKING / PASSING <input type="checkbox"/> 5 - MAKING RIGHT TURN <input type="checkbox"/> 6 - MAKING LEFT TURN	7 - MAKING U-TURN <input type="checkbox"/> 8 - ENTERING TRAFFIC LANE <input type="checkbox"/> 9 - LEAVING TRAFFIC LANE <input type="checkbox"/> 10 - PARKED <input type="checkbox"/> 11 - SLOWING OR STOPPED IN TRAFFIC <input type="checkbox"/> 12 - DRIVERLESS	13 - NEGOTIATING A CURVE <input type="checkbox"/> 14 - ENTERING OR CROSSING SPECIFIED LOCATION <input type="checkbox"/> 15 - WALKING, RUNNING, JOGGING, PLAYING <input type="checkbox"/> 16 - WORKING <input type="checkbox"/> 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE <input type="checkbox"/> 19 - STANDING <input type="checkbox"/> 20 - OTHER NON-MOTORIST <input type="checkbox"/> 21 - STANDING OUTSIDE DISABLED VEHICLE <input type="checkbox"/> 99 - OTHER / UNKNOWN
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1 - NONE <input type="checkbox"/> 2 - FAILURE TO YIELD <input type="checkbox"/> 3 - RAN RED LIGHT <input type="checkbox"/> 4 - RAN STOP SIGN <input type="checkbox"/> 5 - UNSAFE SPEED <input type="checkbox"/> 6 - IMPROPER TURN	7 - LEFT OF CENTER <input type="checkbox"/> 8 - FOLLOWING TOO CLOSE / ACDA <input type="checkbox"/> 9 - IMPROPER LANE CHANGE <input type="checkbox"/> 10 - IMPROPER PASSING <input type="checkbox"/> 11 - DROVE OFF ROAD <input type="checkbox"/> 12 - IMPROPER BACKING	13 - IMPROPER START FROM A PARKED POSITION <input type="checkbox"/> 14 - STOPPED OR PARKED ILLEGALLY <input type="checkbox"/> 15 - SWERVING TO AVOID <input type="checkbox"/> 16 - WRONG WAY	17 - VISION OBSTRUCTION <input type="checkbox"/> 18 - OPERATING DEFECTIVE EQUIPMENT <input type="checkbox"/> 19 - LOAD SHIFTING / FALLING / SPILLING <input type="checkbox"/> 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY <input type="checkbox"/> 22 - NOT DISCERNIBLE <input type="checkbox"/> 23 - OPENING DOOR INTO ROADWAY <input type="checkbox"/> 99 - OTHER IMPROPER ACTION
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SEQUENCE OF EVENTS

1, 2, 0	1 - OVERTURN / ROLLOVER <input type="checkbox"/> 2 - FIRE / EXPLOSION <input type="checkbox"/> 3 - IMMERSION <input type="checkbox"/> 4 - JACKKNIFE <input type="checkbox"/> 5 - CARGO / EQUIPMENT LOSS OR SHIFT	6 - EQUIPMENT FAILURE <input type="checkbox"/> 7 - SEPARATION OF UNITS <input type="checkbox"/> 8 - RAN OFF ROAD RIGHT <input type="checkbox"/> 9 - RAN OFF ROAD LEFT <input type="checkbox"/> 10 - CROSS MEDIAN	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL <input type="checkbox"/> 12 - DOWNSHILL RUNAWAY <input type="checkbox"/> 13 - OTHER NON-COLLISION <input type="checkbox"/> 14 - PEDESTRIAN <input type="checkbox"/> 15 - PEDALCYCLE	16 - RAILWAY VEHICLE <input type="checkbox"/> 17 - ANIMAL - FARM <input type="checkbox"/> 18 - ANIMAL - DEER <input type="checkbox"/> 19 - ANIMAL - OTHER <input type="checkbox"/> 20 - MOTOR VEHICLE IN TRANSPORT <input type="checkbox"/> 21 - PARKED MOTOR VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT <input type="checkbox"/> 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE <input type="checkbox"/> 24 - OTHER MOBILE OBJECT
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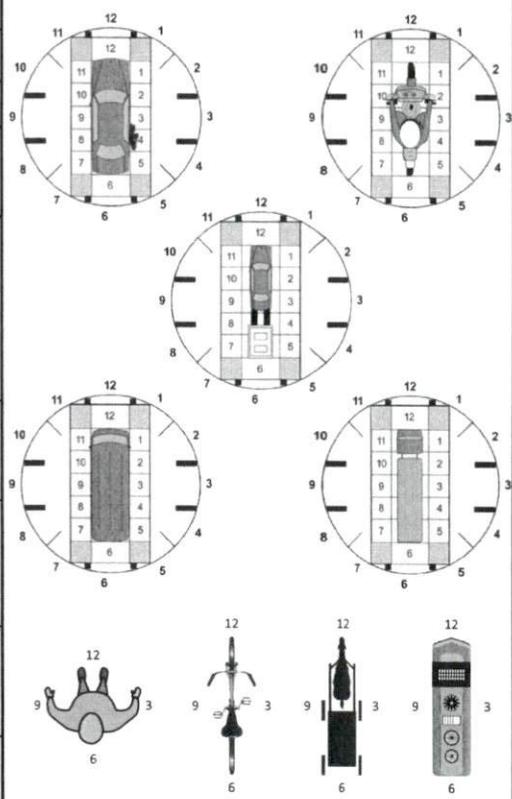
4, 5, 6	25 - IMPACT ATTENUATOR / CRASH CUSHION <input type="checkbox"/> 26 - BRIDGE OVERHEAD STRUCTURE <input type="checkbox"/> 27 - BRIDGE PIER OR ABUTMENT <input type="checkbox"/> 28 - BRIDGE PARAPET <input type="checkbox"/> 29 - BRIDGE RAIL <input type="checkbox"/> 30 - GUARDRAIL FACE	31 - GUARDRAIL END <input type="checkbox"/> 32 - PORTABLE BARRIER <input type="checkbox"/> 33 - MEDIAN CABLE BARRIER <input type="checkbox"/> 34 - MEDIAN GUARDRAIL <input type="checkbox"/> 35 - MEDIAN CONCRETE BARRIER <input type="checkbox"/> 36 - MEDIAN OTHER BARRIER	37 - TRAFFIC SIGN POST <input type="checkbox"/> 38 - OVERHEAD SIGN POST <input type="checkbox"/> 39 - LIGHT / LUMINARIES <input type="checkbox"/> 40 - UTILITY POLE <input type="checkbox"/> 41 - OTHER POST, POLE, OR SUPPORT <input type="checkbox"/> 42 - CULVERT	43 - CURB <input type="checkbox"/> 44 - DITCH <input type="checkbox"/> 45 - EMBANKMENT <input type="checkbox"/> 46 - FENCE <input type="checkbox"/> 47 - MAILBOX <input type="checkbox"/> 48 - TREE <input type="checkbox"/> 49 - FIRE HYDRANT	50 - WORK ZONE MAINTENANCE EQUIPMENT <input type="checkbox"/> 51 - WALL <input type="checkbox"/> 52 - BUILDING <input type="checkbox"/> 53 - TUNNEL <input type="checkbox"/> 54 - OTHER FIXED OBJECT <input type="checkbox"/> 99 - OTHER / UNKNOWN
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1 **FIRST HARMFUL EVENT** **1** **MOST HARMFUL EVENT**

LOCAL REPORT NUMBER
2 2 0 1 8 7 8 6

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

DAMAGED AREA(S)
INDICATE ALL THAT APPLY



INITIAL POINT OF CONTACT
 0 - **NO DAMAGE** **14** - **UNDERCARRIAGE**
 0, 4 - **1-12 - REFER TO UNIT DIAGRAM** **15** - **VEHICLE NOT AT SCENE**
 99 - **UNKNOWN**
 13 - **TOP**

TRAFFIC

TRAFFIC FLOW <input type="checkbox"/> 2 - ONE-WAY <input type="checkbox"/> 2 - TWO-WAY	TRAFFIC CONTROL <input type="checkbox"/> 1 - ROUNDABOUT <input type="checkbox"/> 2 - STOP SIGN <input type="checkbox"/> 2 - SIGNAL <input type="checkbox"/> 5 - YIELD SIGN <input type="checkbox"/> 3 - FLASHER <input type="checkbox"/> 6 - NO CONTROL
# OF THROUGH LANES ON ROAD <input type="checkbox"/> 2	RAIL GRADE CROSSING <input type="checkbox"/> 1 - NOT INVOLVED <input type="checkbox"/> 2 - INVOLVED-ACTIVE CROSSING <input type="checkbox"/> 3 - INVOLVED-PASSIVE CROSSING

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

UNIT SPEED <input type="checkbox"/> 5	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"/> 3 5	



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER

2 2 0 1 8 7 8 6

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH			AGE	GENDER	
	0 1	Mensah-Kumah, Issabella				0 9 1 9 1 9 9 0	3 1	F			
	ADDRESS: STREET, CITY, STATE, ZIP 11813 Hanover Rd. Cincinnati, OH. 45240										
	INJURIES 5	INJURED TAKEN BY []	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	SEATING POSITION 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1		
DL STATE O H	OPERATOR LICENSE NUMBER		OFFENSE CHARGED 333.03A	LOCAL CODE X	OFFENSE DESCRIPTION ACDA			CITATION NUMBER 250218			
DL CLASS 4	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 STATUS 1 TYPE 1 VALUE .	DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4				
UNIT # 0 2	NAME: LAST, FIRST, MIDDLE Nyamus, Ernest N.				DATE OF BIRTH 0 6 0 6 1 9 7 7			AGE 4 4	GENDER M		
ADDRESS: STREET, CITY, STATE, ZIP 3605 Woodridge Blvd #6 Fairfield, OH. 45014											
INJURIES 5	INJURED TAKEN BY []	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	SEATING POSITION 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1			
DL STATE O H	OPERATOR LICENSE NUMBER		OFFENSE CHARGED	LOCAL CODE []	OFFENSE DESCRIPTION			CITATION NUMBER			
DL CLASS 4	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 STATUS 1 TYPE 1 VALUE .	DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4				
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 []	SEATING POSITION []	AIR BAG USAGE []	EJECTION []	TRAPPED []			
DL STATE	OPERATOR LICENSE NUMBER		OFFENSE CHARGED	LOCAL CODE []	OFFENSE DESCRIPTION			CITATION NUMBER			
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY []	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION []	ALCOHOL TEST STATUS 1 TYPE 1 VALUE .	DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4				
INJURIES SEATING POSITION AIR BAG DL CLASS											
1-FATAL	1-FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1-NOT DEPLOYED	1-CLASS A	1-ALCOHOL INTERLOCK DEVICE	1-NOT DISTRACTED	1-NONE GIVEN					
2-SUSPECTED SERIOUS INJURY	2-FRONT - MIDDLE	2-DEPLOYED FRONT	2-CLASS B	2-CDL INTRASTATE ONLY	2-MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2-TEST REFUSED					
3-SUSPECTED MINOR INJURY	3-FRONT - RIGHT SIDE	3-DEPLOYED SIDE	3-CLASS C	3-CORRECTIVE LENSES	3-TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE						
4-POSSIBLE INJURY	4-SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4-DEPLOYED BOTH FRONT / SIDE	4-REGULAR CLASS (OHIO = D)	4-FARM WAIVER	4-TEST GIVEN, RESULTS KNOWN						
5-NO APPARENT INJURY	5-SECOND - MIDDLE	5-NOT APPLICABLE	5-M/C MOPED ONLY	5-EXCEPT CLASS A BUS	5-TEST GIVEN, RESULTS UNKNOWN						
INJURED TAKEN BY											
1-NOT TRANSPORTED / TREATED AT SCENE	6-SECOND - RIGHT SIDE	6-DEPLOYMENT UNKNOWN	6-NO VALID DL	6-EXCEPT CLASS A & CLASS B BUS	6-TALKING ON HAND-HELD COMMUNICATION DEVICE	6-ALCOHOL TEST TYPE					
2-EMS	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	7-THIRD - MIDDLE	7-THIRD - RIGHT SIDE	7-EXCEPT TRACTOR-TRAILER	7-INTERMEDIATE LICENSE RESTRICTIONS	7-1-NONE					
3-POLICE	8-THIRD - MIDDLE	9-THIRD - RIGHT SIDE	10-SLEEPER SECTION OF TRUCK CAB	8-LEARNER'S PERMIT RESTRICTIONS	8-OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	7-2-BLOOD					
9-OTHER / UNKNOWN	11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	12-PASSENGER IN UNENCLOSED CARGO AREA	13-TRAILING UNIT	9-PASSENGER	9-PASSINGER	7-3-URINE					
SAFETY EQUIPMENT											
1-NONE USED	11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	12-PASSENGER IN UNENCLOSED CARGO AREA	13-TRAILING UNIT	10-TANKER	10-LIMITED TO DAYLIGHT ONLY	7-4-BREATH					
2-SHOULDER BELT ONLY USED	12-PASSENGER IN UNENCLOSED CARGO AREA	13-TRAILING UNIT	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	11-MOTOR SCOOTER	11-LIMITED TO EMPLOYMENT	7-5-OTHER					
3-LAP BELT ONLY USED	13-TRAILING UNIT	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	15-NON-MOTORIST	12-THREE-WHEEL MOTORCYCLE	12-LIMITED - OTHER	8-ALCOHOL TEST TYPE					
4-SHOULDER & LAP BELT USED	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	15-NON-MOTORIST	99-OTHER / UNKNOWN	13-SCHOOL BUS	13-MECHNICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	8-1-NONE					
5-CHILD RESTRAINT SYSTEM - FORWARD FACING	15-NON-MOTORIST	99-OTHER / UNKNOWN		14-TOTALY EJECTED	14-MILITARY VEHICLES ONLY	8-2-BLOOD					
6-CHILD RESTRAINT SYSTEM - REAR FACING				15-FREED BY MECHANICAL MEANS	15-MOTOR VEHICLES WITHOUT AIR BRAKES	8-3-URINE					
7-BOOSTER SEAT				16-NON-MECHANICAL MEANS	16-OUTSIDE MIRROR	8-4-OTHER					
8-HELMET USED				17-FREED BY NON-MECHANICAL MEANS	17-PROSTHETIC AID	9-DRUG TEST TYPE					
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)				18-FREED BY NON-MECHANICAL MEANS	18-OTHER	9-1-AMPHETAMINES					
10-REFLECTIVE CLOTHING						9-2-BARBITURATES					
11-LIGHTING - PEDESTRIAN / BICYCLE ONLY						9-3-BENZODIAZEPINES					
12-OTHER / UNKNOWN						9-4-CANNABINOIDS					
INJURIES EJECTION DL ENDORSEMENT											
1-NOT EJECTED	H-HAZMAT	1-APPARENTLY NORMAL									
2-PARTIALLY EJECTED	M-MOTORCYCLE	2-PHYSICAL IMPAIRMENT									
3-TOTALLY EJECTED	P-PASSENGER	3-EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)									
4-NOT APPLICABLE	N-TANKER	4-ILLNESS									
INJURIES TRAPPED											
1-NOT TRAPPED	R-THREE-WHEEL MOTORCYCLE	5-FELL ASLEEP, FAINTED, FATIGUED, ETC.									
2-EXTRICATED BY MECHANICAL MEANS	S-SCHOOL BUS	6-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL									
3-FREED BY NON-MECHANICAL MEANS	T-DOUBLE & TRIPLE TRAILERS	7-OTHER / UNKNOWN									
INJURIES GENDER											
F-FEMALE	U-OTHER / UNKNOWN	8-NEGATIVE RESULTS									
M-MALE											
INJURIES CONDITION											
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											
7-OTHER / UNKNOWN											
8-NEGATIVE RESULTS											