



TRAFFIC CRASH REPORT

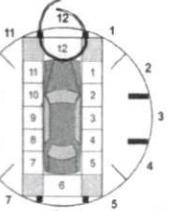
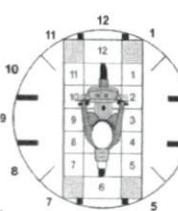
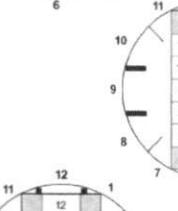
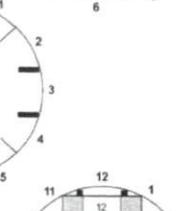
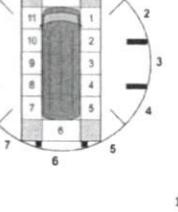
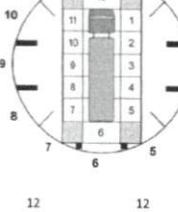
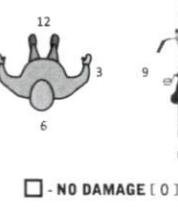
*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION		LOCAL REPORT NUMBER*				
		REPORTING AGENCY NAME* Fairfield Police Department		NCIC*	2 2 0 2 1 4 8 7			
				HIT/SKIP 1 - SOLVED 2 - UNSOLVED	NUMBER OF UNITS 0 1			
COUNTY* 0 9		LOCALITY* 1 - CITY 1 - VILLAGE 3 - TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield				
LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME Union Center	ROAD TYPE B L 3 9 3 4 2 6 3 5			
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 5855	ROAD TYPE	LONGITUDE DECIMAL DEGREES -84.482933		
REFERENCE	ROUTE POINT	DIRECTION FROM REFERENCE 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	ROUTE TYPE IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE	ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS	ROUTE TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE			
	DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS	ROUTE TYPE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY	INTERSECTION RELATED			
LOCATION OF FIRST HARMFUL EVENT			MANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL	MEDIAN TYPE		
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 6			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 - BETWEEN 3 - TWO MOTOR VEHICLES IN TRANSPORT 4 - REAR-END 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - HEAD-ON 10 - 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 2 - STRAIGHT LEVEL 3 - STRAIGHT GRADE 4 - CURVE LEVEL 5 - CURVE GRADE 9 - OTHER/UNKNOWN	1 - 1 2 - DRY 3 - WET 4 - SNOW 5 - ICE 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
LIGHT CONDITION			WEATHER					
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN 4			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>On 03/25/22 at 2:49 A.M. Unit 1 was traveling Southeast bound on Union Center Blvd. At 5855 Union Center Blvd., Unit 1 ran off the roadway left into a ditch and struck a concrete pipe, causing the vehicle to roll on its top. The driver of Unit 1 left the scene and returned later on.</p> <p>The driver of Unit 1 was charged with OVI 333.01 a1A.</p> <p>The pipe is owned by the City of Fairfield. 5350 Pleasant Ave. Fairfield, OH 45014</p> <p>See OH-2</p>								
CRASH REPORTED DATE / TIME 0 3 2 5 2 0 2 2 0 2 4 9		DISPATCH DATE / TIME 0 3 2 5 2 0 2 2 0 2 5 2		ARRIVAL DATE / TIME 0 3 2 5 2 0 2 2 0 2 5 8		SCENE CLEARED DATE / TIME 0 3 2 5 2 0 2 2 0 4 5 8		REPORT TAKEN BY
TOTAL TIME ROADWAY CLOSED 0 1 6 0		OTHER INVESTIGATION TIME TOTAL MINUTES 1 8 6		OFFICER'S NAME* D. Miller		CHECKED BY OFFICER'S NAME* D. Rohl		<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)
				OFFICER'S BADGE NUMBER* 1 6 7		CHECKED BY OFFICER'S BADGE NUMBER* 1 3 0		



Indicate the north direction with an "N" on the compass diagram.

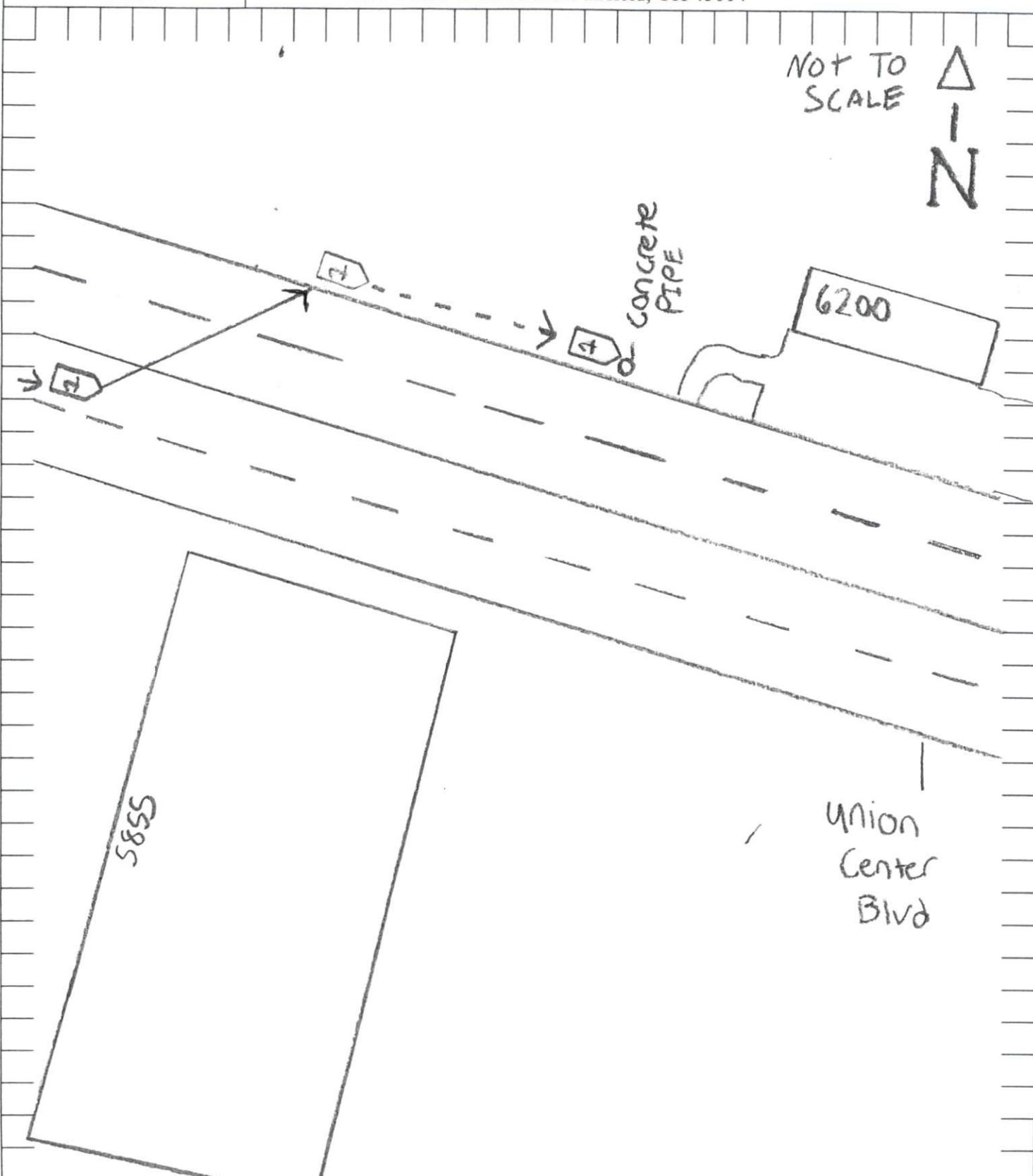
UNIT #	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER		OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER		
0 1	OWNER ADDRESS: STREET, CITY, STATE, ZIP <input checked="" type="checkbox"/> SAME AS DRIVER				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			
LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR		
O H	JDF6615	1F1P1W125194KB98471	2004		
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR		
	Liberty Mutual	AOV28190940540	Blue		
TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME		
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	Marcell's		
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS	HAZARDOUS MATERIAL		
0 1		0 1	<input type="checkbox"/> MATERIAL RELEASED	CLASS #	PLACARD ID #
			<input type="checkbox"/> PLACARD		
VEHICLE WEIGHT GVWR/GCWR					
1 - <10K LBS.		1 - <10,001 - 26K LBS.	2 - >26K LBS.		
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
# OF TRAILING UNITS					
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	
1 2	1 - YES	2 - NO	9 - OTHER / UNKNOWN	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION
				2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION
AUTONOMOUS MODE LEVEL					
SPECIAL FUNCTION					
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	
CARGO BODY TYPE					
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
VEHICLE DEFECTS					
1 1	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			
NON-MOTORIST LOCATION AT IMPACT					
1 1	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
ACTION					
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	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 - MAKING LEFT TURN	16 - WORKING	
	9 - OTHER / UNKNOWN		12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN
CONTRIBUTING CIRCUMSTANCES					
1 1	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			
	6 - IMPROPER TURN	12 - IMPROPER BACKING			
SEQUENCE OF EVENTS					
1 1 1	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	17 - ANIMAL - FARM	17 - ANIMAL - DEER	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION
	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWAY	19 - ANIMAL - OTHER	20 - MOTOR VEHICLE IN TRANSPORT
2 0 9	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	13 - OTHER NON-COLLISION	21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE OBJECT
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN		
3 1 4 4			15 - PEDALCYCLE		
4 5 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
5 0 1	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
6 1	29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX	54 - OTHER FIXED OBJECT
	30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	48 - TREE	99 - OTHER / UNKNOWN
COLLISION WITH FIXED OBJECT - STRUCK					

LOCAL REPORT NUMBER		
2 2 0 2 1 4 8 7		
DAMAGE		
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 checked="" type="checkbox"/> - ALL AREAS [15]		
<input type="checkbox"/> - UNIT NOT AT SCENE [16]		
INITIAL POINT OF CONTACT		
1 2	0 - NO DAMAGE	14 - UNDERCARRIAGE
	1-12 - REFER TO UNIT DIAGRAM	15 - VEHICLE NOT AT SCENE
	13 - TOP	99 - UNKNOWN
TRAFFIC		
TRAFFIC WAY FLOW	TRAFFIC CONTROL	
2	1 - ONE WAY	4 - STOP SIGN
	2 - TWO WAY	5 - YIELD SIGN
	6	3 - FLASHER
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING	
4	1 - NOT INVOLVED	2 - INVOLVED-ACTIVE CROSSING
	1	3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION		
FROM 6 TO 7	1 - NORTH	5 - NORTHEAST
	2 - SOUTH	6 - NORTHWEST
	3 - EAST	7 - SOUTHEAST
	4 - WEST	8 - SOUTHWEST
	9 - OTHER / UNKNOWN	
UNIT SPEED	DETECTED SPEED	
6 0	1 - STATED / ESTIMATED SPEED	
	1	2 - CALCULATED / EDR
		3 - UNDETERMINED
POSTED SPEED		
5 5		



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			
3	INJURED TAKEN BY	2	Fairfield						Mercy			0 4			<input type="checkbox"/> DOT-COMPLIANT MC HELMET			0 1		2		1		1	
OL STATE	OPERATOR LICENSE NUMBER					OFFENSE CHARGED			331.34 A			LOCAL CODE <input checked="" type="checkbox"/>			OFFENSE DESCRIPTION			Failure To Control			CITATION NUMBER			250041	
OL CLASS	ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY		ALCOHOL / DRUG SUSPECTED			6			ALCOHOL TEST			DRUG TEST(S)			STATUS TYPE RESULT			SELECT UP TO 4		
4						1		<input checked="" type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG						5 2			1 1								
INJURIES					INJURED TAKEN BY			EMS AGENCY (NAME)			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED			DATE OF BIRTH			AGE			GENDER		
OL STATE	OPERATOR LICENSE NUMBER					OFFENSE CHARGED			LOCAL CODE <input checked="" type="checkbox"/>			OFFENSE DESCRIPTION			CITATION NUMBER										
OL CLASS	ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY		ALCOHOL / DRUG SUSPECTED			CONDITION			ALCOHOL TEST			DRUG TEST(S)			STATUS TYPE RESULT			SELECT UP TO 4		
UNIT #	NAME: LAST, FIRST, MIDDLE														DATE OF BIRTH			AGE			GENDER				
ADDRESS: STREET, CITY, STATE, ZIP															CONTACT PHONE - INCLUDE AREA CODE										
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED			<input type="checkbox"/> DOT-COMPLIANT MC HELMET			SEATING POSITION			AIR BAG USAGE			EJECTION		TRAPPED			
OL STATE	OPERATOR LICENSE NUMBER					OFFENSE CHARGED			LOCAL CODE <input checked="" type="checkbox"/>			OFFENSE DESCRIPTION			CITATION NUMBER										
OL CLASS	ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY		ALCOHOL / DRUG SUSPECTED			CONDITION			ALCOHOL TEST			DRUG TEST(S)			STATUS TYPE RESULT			SELECT UP TO 4		
UNIT #	NAME: LAST, FIRST, MIDDLE														DATE OF BIRTH			AGE			GENDER				
ADDRESS: STREET, CITY, STATE, ZIP															CONTACT PHONE - INCLUDE AREA CODE										
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED			<input type="checkbox"/> DOT-COMPLIANT MC HELMET			SEATING POSITION			AIR BAG USAGE			EJECTION		TRAPPED			
OL STATE	OPERATOR LICENSE NUMBER					OFFENSE CHARGED			LOCAL CODE <input checked="" type="checkbox"/>			OFFENSE DESCRIPTION			CITATION NUMBER										
OL CLASS	ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY		ALCOHOL / DRUG SUSPECTED			CONDITION			ALCOHOL TEST			DRUG TEST(S)			STATUS TYPE RESULT			SELECT UP TO 4		
INJURIES	SEATING POSITION		AIR BAG		OL CLASS		OL RESTRICTION(S)			DRIVER DISTRACTION		TEST STATUS													
1-FATAL	1-FRONT- LEFT SIDE (MOTORCYCLE DRIVER)		1-NOT DEPLOYED		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- OTHER ACTIVITY WITH AN ELECTRONIC DEVICE													
6-SECOND- RIGHT SIDE	6-SECOND- RIGHT SIDE		9-DEPLOYMENT UNKNOWN		6-NO VALID OL		6-EXCEPT CLASS A & CLASS B BUS			6-INTERMEDIATE LICENSE RESTRICTIONS		6- PASSENGER													
7-THIRD- LEFT SIDE (MOTORCYCLE SIDE CAR)	7-THIRD- MIDDLE		7-TOTALLY EJECTED		7-N-TANKER		7-EXCEPT TRACTOR-TRAILER			7- OTHER DISTRACTION INSIDE THE VEHICLE		7- OTHER /UNKNOWN													
8-THIRD- MIDDLE	8-THIRD- RIGHT SIDE		8-MOTOR SCOOTER		8-P-PASSENGER		8-LEARNER'S PERMIT RESTRICTIONS			8- OTHER DISTRACTION OUTSIDE THE VEHICLE		8- OTHER /UNKNOWN													
9-OTHER/ UNKNOWN	10-SLEEPER SECTION OF TRUCK CAB		9-SCHOOL BUS		9-Q-MOTOR SCOOTER		9- OTHER /UNKNOWN			9- OTHER /UNKNOWN		9- OTHER /UNKNOWN													
SAFETY EQUIPMENT	TRAPPED		T-THREE-WHEEL MOTORCYCLE		T-T-DOUBLE & TRIPLE TRAILERS		10- LIMITED TO DAYLIGHT ONLY			10- LIMITED TO DAYLIGHT ONLY		10- LIMITED TO DAYLIGHT ONLY													
1-NONE USED	11-PASSenger IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11-PASSenger IN UNENCLOSED CARGO AREA		11-R-THREE-WHEEL MOTORCYCLE		11- LIMITED TO DAYLIGHT ONLY			11- LIMITED TO DAYLIGHT ONLY		11- LIMITED TO DAYLIGHT ONLY													
2-SHOULDER BELT ONLY USED	12-PASSenger IN UNENCLOSED CARGO AREA		12-PASSenger IN UNENCLOSED CARGO AREA		12-S-SCHOOL BUS		12- LIMITED - OTHER			12- LIMITED - OTHER		12- LIMITED - OTHER													
3-LAP BELT ONLY USED	13-TRAILING UNIT		13-F-TANKER / HAZMAT		13-T-T-DOUBLE & TRIPLE TRAILERS		13- MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)			13- MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		13- MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)													
4-SHOULDER & LAP BELT USED	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14-F-F-TANKER / HAZMAT		14-T-T-DOUBLE & TRIPLE TRAILERS		14- MILITARY VEHICLES ONLY			14- MILITARY VEHICLES ONLY		14- MILITARY VEHICLES ONLY													
5-CHILD RESTRAINT SYSTEM- FORWARD FACING	15-NON-MOTORIST		15-H-HAZMAT		15-S-SCHOOL BUS		15- MOTOR VEHICLES WITHOUT AIR BRAKES			15- MOTOR VEHICLES WITHOUT AIR BRAKES		15- MOTOR VEHICLES WITHOUT AIR BRAKES													
6-CHILD RESTRAINT SYSTEM- REAR FACING	16- OTHER / UNKNOWN		16-M-MOTOR SCOOTER		16-T-T-DOUBLE & TRIPLE TRAILERS		16- OUTSIDE MIRROR			16- OUTSIDE MIRROR		16- OUTSIDE MIRROR													
7-BOOSTER SEAT	17- OTHER / UNKNOWN		17-R-R-THREE-WHEEL MOTORCYCLE		17-S-SCHOOL BUS		17- PROSTHETIC AID			17- PROSTHETIC AID		17- PROSTHETIC AID													
8-Helmet USED	18- OTHER / UNKNOWN		18-T-T-DOUBLE & TRIPLE TRAILERS		18-X-X-TANKER / HAZMAT		18- OTHER			18- OTHER		18- OTHER													
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	19- OTHER / UNKNOWN		19-F-F-TANKER / HAZMAT		19-S-SCHOOL BUS		19- OTHER			19- OTHER		19- OTHER													
10-REFLECTIVE CLOTHING	20- OTHER / UNKNOWN		20-M-MOTOR SCOOTER		20-T-T-DOUBLE & TRIPLE TRAILERS		20- OTHER			20- OTHER		20- OTHER													
11-LIGHTING- PEDESTRIAN / BICYCLE ONLY	21- OTHER / UNKNOWN		21-S-SCHOOL BUS		21-X-X-TANKER / HAZMAT		21- OTHER			21- OTHER		21- OTHER													
99- OTHER / UNKNOWN	22- OTHER / UNKNOWN		22-F-F-TANKER / HAZMAT		22-S-SCHOOL BUS		22- OTHER			22- OTHER		22- OTHER													
EJECTION												OL ENDORSEMENT													
TRAPPED												GENDER													
F-FEMALE												M-M-MALE													
U-U-OTHER / UNKNOWN												U-U-OTHER / UNKNOWN													
CONDITION												TEST STATUS													
1- APPARENTLY NORMAL												1- NONE GIVEN													
2- PHYSICAL IMPAIRMENT												2- TEST REFUSED													
3- EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)												3- TEST GIVEN, CONTAMINATED SAMPLE /UNUSABLE													
4- ILLNESS												4- TEST GIVEN, RESULTS KNOWN													
5- FELL ASLEEP, FAINTED, FATIGUED, ETC.												5- TEST GIVEN, RESULTS UNKNOWN													
6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL												6- DRUG TEST TYPE													
7- OTHER												7- DRUG TEST TYPE													
8- NEGATIVE RESULTS												8- DRUG TEST TYPE													
9- OTHER / UNKNOWN												9- DRUG TEST RESULT(S)													

LOCAL REPORT NUMBER	PD-22-021487	REPORTING AGENCY	Fairfield Police Department	DATE OF ACCIDENT	3/25/22
IN COUNTY OF	Butler	ACCIDENT LOCATION	5855 Union Center Blvd. Fairfield, OH 45014		
					
OFFICER'S SIGNATURE			D. Miller		BADGE NO 167