



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL INFORMATION					LOCAL REPORT NUMBER*				
<input checked="" type="checkbox"/> PHOTOS TAKEN	<input type="checkbox"/> OH-2	<input type="checkbox"/> OH-3	REPORTING AGENCY NAME* NCIC* Fairfield Police Department 00901						
<input type="checkbox"/> SECONDARY CRASH	<input checked="" type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	HIT/SKIP 1-SOLVED 2-UNRESOLVED 02						
<input checked="" type="checkbox"/> PRIVATE PROPERTY		NUMBER OF UNITS 01					UNIT IN ERROR 98-ANIMAL 99-UNKNOWN		
COUNTY* 09	LOCALITY* 1-CITY 1 2-VILLAGE 3-TOWNSHIP	LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield					CRASH DATE / TIME* 06302022 1921		
ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME Clubhouse		ROAD TYPE L A	LATITUDE DECIMAL DEGREES 39.317852			
ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Chapel Hill		ROAD TYPE D R	LONGITUDE DECIMAL DEGREES -84.510370			
REFERENCE POINT 1-INTERSECTION 2-MILE POST 3-HOUSE # 1	DIRECTION FROM REFERENCE 1-NORTH 2-SOUTH 3-EAST 4-WEST 1	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 <input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA 3 NUMBER OF APPROACHES			
DISTANCE FROM REFERENCE 10	DISTANCE UNIT OF MEASURE 1-MILES 2-FEET 2	ROUTE TYPE	ROAD TYPE	RD - ROAD	TE - TERRACE	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 06 9-CROSSOVER 10-DRIVEWAY/ALLEY ACCESS 11-RAILWAY GRADE CROSSING 12-SHARED USE PATHS OR TRAILS 13-BIKE LANE 14-TOLL BOOTH 99-OTHER/ UNKNOWN			MANNER OF CRASH COLLISION/IMPACT 1-NOT COLLISION 2-BETWEEN 3-TWO MOTOR VEHICLES IN 4-TRANSPORT 5-REAR-END 6-HEAD-ON			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 2-ADVANCE WARNING AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA		CONTOUR 1	CONDITIONS 1	SURFACE 2	
<input type="checkbox"/> WORKERS PRESENT		<input type="checkbox"/> LAW ENFORCEMENT PRESENT				1-STRAIGHT LEVEL	1-DRY	1-CONCRETE	
<input type="checkbox"/> ACTIVE SCHOOL ZONE						2-STRAIGHT GRADE	2-WET	2-BLACKTOP, BITUMINOUS, ASPHALT	
						3-CURVE LEVEL	3-SNOW	3-BRICK/BLOCK	
						4-CURVE GRADE	4-ICE	4-SLAG, GRAVEL, STONE	
						9-OTHER/UNKNOWN	5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN	5-DIRT 9-OTHER/UNKNOWN	
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			See OH-2			
<p>NARRATIVE</p> <p>On 6/30/22 at 7:21 P.M. Unit 1 was attempting to make a left turn from Chapel Hill Drive to turn onto northbound Clubhouse Lane. Unit 2 was stopped at the stop sign on Clubhouse Lane facing southbound at Chapel Hill Drive. Unit 1 failed to clear unit 2 and caused damage to the driver's side front fender.</p>									
CRASH REPORTED DATE / TIME 06302022 1921			DISPATCH DATE / TIME 06302022 1934		ARRIVAL DATE / TIME 06302022 1938		SCENE CLEARED DATE / TIME 06302022 2024		REPORT TAKEN BY
TOTAL TIME ROADWAY CLOSED 00		OTHER INVESTIGATION TIME 20		TOTAL MINUTES 70		OFFICER'S NAME* N. Davis		<input checked="" type="checkbox"/> POLICE AGENCY	
						CHECKED BY OFFICER'S NAME* <i>St. Aaron Meyer</i>		<input type="checkbox"/> MOTORIST	
						OFFICER'S BADGE NUMBER* 169		<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OIPS)	
						CHECKED BY OFFICER'S BADGE NUMBER* 132			



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

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	U-Haul Company of Arizona	
OWNER ADDRESS: STREET, CITY, STATE, ZIP (<input type="checkbox"/> SAME AS DRIVER)		
2727 N. Central Ave., Phoenix AZ 85004		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
A Z	AD65284	1 G D G 5 C 1 G 8 8 F 9 0 3 9 2 1	2 0 0 8	GMC

<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
	U-HAUL SELF INS.		White	C5500
TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME	
<input checked="" type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE		

<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR	HAZARDOUS MATERIAL
		0 2	1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	<input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD

UNIT TYPE	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	2 - MOTORCYCLE 3-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED 11 - ALL TERRAIN VEHICLE (ATV / UTV)	3 - 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
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0	# OF TRAILING UNITS			
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WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN
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2	0	AUTONOMOUS MODE LEVEL	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN
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 10 - AMBULANCE	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL	21 - MAIL CARRIER 99 - OTHER / UNKNOWN

0 6	0 - NO CARGO BODY TYPE / NOT APPLICABLE 1 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN / ENCLOSED BOX 7 - GRAIN / CHIPS / GRAVEL	8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE / REFUSE 99 - OTHER / UNKNOWN
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0 6	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT	99 - OTHER / UNKNOWN
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0 6	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	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN
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3	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 0 6 4 - STRUCK PRE-CRASH 5 - BOTH STRIKING & STRUCK ACTIONS	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 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	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN
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0 6	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING / FALLING / SPILLING 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION
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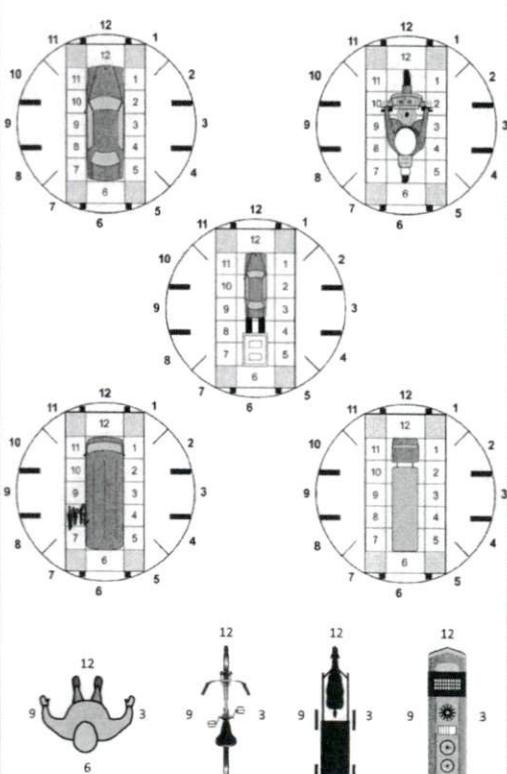
1 2 0	1 - OVERTURN / ROLLOVER 2 - FIRE / EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	11 - CROSS CENTERLINE - OPPOSITE DIRECTION 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	22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVEABLE OBJECT
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4 5 6	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 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	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN
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LOCAL REPORT NUMBER
2 2 0 4 6 5 2 8

DAMAGE
DAMAGE SCALE
1 - NONE
2 - MINOR DAMAGE
3 - FUNCTIONAL 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 15 - VEHICLE NOT AT SCENE
DIAGRAM 99 - UNKNOWN
13 - TOP

TRAFFIC
TRAFFIC WAY FLOW
1 - ONE-WAY
2 - TWO-WAY
4 -

OF THROUGH LANES ON ROAD
1
1 - NOT INVOLVED
1 - INVOLVED-ACTIVE 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 1
UNIT SPEED
1 0
1 - STATED / ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED

POSTED SPEED
1
1 -



UNIT

OWNER

UNIT # **012** OWNER NAME: LAST, FIRST, MIDDLE SAME AS DRIVER
Kennedy, Latoya M

OWNER ADDRESS: STREET, CITY, STATE, ZIP SAME AS DRIVER
40 Club House Lane Apt. F Fairfield, OH 45014

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE **O H** LICENSE PLATE # **GKR2080** VEHICLE IDENTIFICATION # **19UUB1F59JA003917** VEHICLE YEAR **2018** VEHICLE MAKE **Acura**

INSURANCE VERIFIED INSURANCE COMPANY **Progressive** INSURANCE POLICY # **916026520** COLOR **Black** VEHICLE MODEL **TLX**

TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE
US DOT #

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT #OCCUPANTS **0 1** VEHICLE WEIGHT GVWR/GCWR
1 - ≤10K LBS.
2 - 10,001 - 26K LBS.
3 - >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 (ANYTYPE)
3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNITTRUCK 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 11 - ALL TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN
6 - VAN (9-15 SEATS) 17 - MOTORHOME 23 - PEDESTRIAN / SKATER 99 - UNKNOWN OR HIT/SKIP

0 # OF TRAILING UNITS

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

1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER
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 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER
/ NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGO TANK 13 - AUTO TRANSPORTER
2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10 - FLAT BED 14 - GARBAGE/REFUSE
7 - GRAIN/CHIPS/GRAVEL 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 10 - DISABLED FROM PRIOR
3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE ACCIDENT

1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER
CROSSWALK 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS AT INCIDENT SCENE
2 - INTERSECTION - UNMARKED 8 - SIDEWALK 11 - SHARED USE PATHS OR 99 - OTHER / UNKNOWN
CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION TRAILS

1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING
2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 19 - STANDING
3 - STRIKING **1, 1** 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION 20 - OTHER NON-MOTORIST
4 - STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 10 - PARKED 15 - WALKING, RUNNING, 21 - STANDING OUTSIDE
5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 16 - WORKING
6 - MAKING LEFT TURN 12 - DRIVINGLESS 17 - PUSHING VEHICLE 22 - NOT DISCERNIBLE
9 - OTHER / UNKNOWN 18 - OPERATING DEFECTIVE EQUIPMENT
19 - SWERVING TO AVOID 20 - IMPROPER CROSSING
21 - SWERVING 22 - LYING IN ROADWAY
22 - SWERVING 23 - OPENING DOOR INTO ROADWAY
23 - SWERVING 24 - OTHER MOVABLE OBJECT
24 - SWERVING 25 - LOAD SHIFTING/FALLING/SPILLING
25 - SWERVING 26 - WORK ZONE MAINTENANCE EQUIPMENT
26 - SWERVING 27 - ANIMAL - FARM
27 - SWERVING 28 - ANIMAL - DEER
28 - SWERVING 29 - ANIMAL - OTHER
29 - SWERVING 30 - MOTOR VEHICLE IN TRANSPORT
30 - SWERVING 31 - PARKED MOTOR VEHICLE
31 - SWERVING 32 - WORK ZONE MAINTENANCE EQUIPMENT
32 - SWERVING 33 - ANIMAL - OTHER
33 - SWERVING 34 - ANIMAL - DEER
34 - SWERVING 35 - ANIMAL - FARM
35 - SWERVING 36 - ANIMAL - OTHER
36 - SWERVING 37 - CURB
37 - SWERVING 38 - DITCH
38 - SWERVING 39 - FENCE
39 - SWERVING 40 - MAILBOX
40 - SWERVING 41 - TREE
41 - SWERVING 42 - CULVERT
42 - SWERVING 43 - FIRE HYDRANT
43 - SWERVING 44 - TUNNEL
44 - SWERVING 45 - OTHER FIXED OBJECT
45 - SWERVING 46 - OTHER UNKNOWN

1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY
2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDAA 14 - STOPPED OR PARKED 18 - OPERATING DEFECTIVE
3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - SPECIFIED LOCATION
4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - SLOWING OR STOPPED
5 - UNSAFE SPEED 11 - DROVE OFF ROAD 17 - SWERVING 21 - WALKING, RUNNING, JOGGING, PLAYING
6 - IMPROPER TURN 12 - IMPROPER BACKING 18 - DRIVINGLESS 22 - NOT DISCERNIBLE
19 - SWERVING 23 - OPENING DOOR INTO ROADWAY
20 - SWERVING 24 - WORK ZONE MAINTENANCE EQUIPMENT
21 - SWERVING 25 - ANIMAL - FARM
22 - SWERVING 26 - ANIMAL - DEER
23 - SWERVING 27 - ANIMAL - OTHER
24 - SWERVING 28 - MOTOR VEHICLE IN TRANSPORT
25 - SWERVING 29 - PARKED MOTOR VEHICLE
26 - SWERVING 30 - WORK ZONE MAINTENANCE EQUIPMENT
27 - SWERVING 31 - ANIMAL - OTHER
28 - SWERVING 32 - ANIMAL - DEER
29 - SWERVING 33 - ANIMAL - FARM
30 - SWERVING 34 - CURB
31 - SWERVING 35 - DITCH
32 - SWERVING 36 - FENCE
33 - SWERVING 37 - MAILBOX
34 - SWERVING 38 - TREE
35 - SWERVING 39 - CULVERT
36 - SWERVING 40 - FIRE HYDRANT

SEQUENCE OF EVENTS

1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE
2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM EQUIPMENT
3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18 - ANIMAL - DEER
4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 19 - ANIMAL - OTHER
5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 20 - MOTOR VEHICLE IN
11 - CARGO / EQUIPMENT LOSS OR SHIFT 14 - PEDESTRIAN TRANSPORT
12 - CARGO / EQUIPMENT LOSS OR SHIFT 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE
13 - CARGO / EQUIPMENT LOSS OR SHIFT 16 - RAILWAY VEHICLE
14 - CARGO / EQUIPMENT LOSS OR SHIFT 17 - ANIMAL - FARM
15 - CARGO / EQUIPMENT LOSS OR SHIFT 18 - ANIMAL - DEER
16 - CARGO / EQUIPMENT LOSS OR SHIFT 19 - ANIMAL - OTHER
17 - CARGO / EQUIPMENT LOSS OR SHIFT 20 - MOTOR VEHICLE IN
18 - CARGO / EQUIPMENT LOSS OR SHIFT 21 - PARKED MOTOR VEHICLE
19 - CARGO / EQUIPMENT LOSS OR SHIFT 22 - WORK ZONE MAINTENANCE EQUIPMENT
20 - CARGO / EQUIPMENT LOSS OR SHIFT 23 - STRUCK BY FALLING,
21 - CARGO / EQUIPMENT LOSS OR SHIFT 24 - OTHER MOVABLE OBJECT
22 - CARGO / EQUIPMENT LOSS OR SHIFT 25 - ANIMAL - FARM
23 - CARGO / EQUIPMENT LOSS OR SHIFT 26 - ANIMAL - DEER
24 - CARGO / EQUIPMENT LOSS OR SHIFT 27 - ANIMAL - OTHER
25 - CARGO / EQUIPMENT LOSS OR SHIFT 28 - MOTOR VEHICLE IN
26 - CARGO / EQUIPMENT LOSS OR SHIFT 29 - PARKED MOTOR VEHICLE
27 - CARGO / EQUIPMENT LOSS OR SHIFT 30 - WORK ZONE MAINTENANCE EQUIPMENT
28 - CARGO / EQUIPMENT LOSS OR SHIFT 31 - ANIMAL - FARM
29 - CARGO / EQUIPMENT LOSS OR SHIFT 32 - ANIMAL - DEER
30 - CARGO / EQUIPMENT LOSS OR SHIFT 33 - ANIMAL - OTHER
31 - CARGO / EQUIPMENT LOSS OR SHIFT 34 - CURB
32 - CARGO / EQUIPMENT LOSS OR SHIFT 35 - DITCH
33 - CARGO / EQUIPMENT LOSS OR SHIFT 36 - FENCE
34 - CARGO / EQUIPMENT LOSS OR SHIFT 37 - MAILBOX
35 - CARGO / EQUIPMENT LOSS OR SHIFT 38 - TREE
36 - CARGO / EQUIPMENT LOSS OR SHIFT 39 - CULVERT
37 - CARGO / EQUIPMENT LOSS OR SHIFT 40 - FIRE HYDRANT
38 - CARGO / EQUIPMENT LOSS OR SHIFT 41 - TUNNEL
39 - CARGO / EQUIPMENT LOSS OR SHIFT 42 - OTHER FIXED OBJECT
40 - CARGO / EQUIPMENT LOSS OR SHIFT 43 - OTHER UNKNOWN
41 - CARGO / EQUIPMENT LOSS OR SHIFT 44 - OTHER UNKNOWN
42 - CARGO / EQUIPMENT LOSS OR SHIFT 45 - OTHER UNKNOWN
43 - CARGO / EQUIPMENT LOSS OR SHIFT 46 - OTHER UNKNOWN
44 - CARGO / EQUIPMENT LOSS OR SHIFT 47 - OTHER UNKNOWN
45 - CARGO / EQUIPMENT LOSS OR SHIFT 48 - OTHER UNKNOWN
46 - CARGO / EQUIPMENT LOSS OR SHIFT 49 - OTHER UNKNOWN
47 - CARGO / EQUIPMENT LOSS OR SHIFT 50 - OTHER UNKNOWN
48 - CARGO / EQUIPMENT LOSS OR SHIFT 51 - OTHER UNKNOWN
49 - CARGO / EQUIPMENT LOSS OR SHIFT 52 - OTHER UNKNOWN
50 - CARGO / EQUIPMENT LOSS OR SHIFT 53 - OTHER UNKNOWN
51 - CARGO / EQUIPMENT LOSS OR SHIFT 54 - OTHER UNKNOWN
52 - CARGO / EQUIPMENT LOSS OR SHIFT 55 - OTHER UNKNOWN
53 - CARGO / EQUIPMENT LOSS OR SHIFT 56 - OTHER UNKNOWN
54 - CARGO / EQUIPMENT LOSS OR SHIFT 57 - OTHER UNKNOWN
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292 - CARGO / EQUIPMENT LOSS OR SHIFT 385 - OTHER UNKNOWN
293 - CARGO / EQUIPMENT LOSS OR SHIFT 386 - OTHER UNKNOWN

MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER											
2 2 0 4 6 5 2 8											
MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH		AGE	GENDER
	0 1	Red, Melvin Shatell						0 1 1 8 2 0 0 0	2 2	M	
ADDRESS: STREET, CITY, STATE, ZIP 49 Tranquill Pl. Pooler, GA 31322											
INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED 0 4 <input type="checkbox"/> DOT-COMPLIANT MC HELMET SEATING POSITION 0 1 AIR BAG USAGE 1 EJECTION 1 TRAPPED 1											
OL STATE G A OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL CODE OFFENSE DESCRIPTION CITATION NUMBER											
OL CLASS ENDORSEMENT SELECT UP TO 2 RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY 1 ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG CONDITION ALCOHOL TEST DRUG TEST(S) STATUS TYPE VALUE STATUS TYPE RESULT SELECT UP TO 4 1 1 1 1 1 1											
UNIT # NAME: LAST, FIRST, MIDDLE 0 2 Bell, Tsharvan Cadeem DATE OF BIRTH 0 9 2 2 1 9 8 9 AGE 3 2 GENDER M											
ADDRESS: STREET, CITY, STATE, ZIP 40 Clubhouse Ln. Apt. F Fairfield, OH 45014 CONTACT PHONE - INCLUDE AREA CODE											
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OL 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 DRUG TEST(S) STATUS TYPE VALUE STATUS TYPE RESULT SELECT UP TO 4 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 4-POSSIBLE INJURY 4-SECOND - LEFT SIDE 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-TALKING ON HANDS-FREE COMMUNICATION DEVICE 5-TEST GIVEN, RESULTS UNKNOWN INJURED TAKEN BY 6-SECOND - RIGHT SIDE 6-SECOND - RIGHT SIDE 6-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) 7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 7-EXCEPT TRACTOR-TRAILER 7-INTERMEDIATE LICENSE RESTRICTIONS 7-OTHER ACTIVITY WITH AN ELECTRONIC DEVICE 1-NONE 2-EMS 8-THIRD - MIDDLE 8-THIRD - MIDDLE 8-PASSSENGER 8-LEARNER'S PERMIT RESTRICTIONS 8-PASSSENGER 2-BLOOD 3-POLICE 9-THIRD - RIGHT SIDE 9-THIRD - RIGHT SIDE 9-N-TANKER 9-LIMITED TO DAYLIGHT ONLY 9-OTHER DISTRACTION INSIDE THE VEHICLE 3-URINE 9-OTHER / UNKNOWN 10-SLEEPER SECTION OF TRUCK CAB 10-SLEEPER SECTION OF TRUCK CAB 10-Q-MOTOR SCOOTER 10-LIMITED TO EMPLOYMENT 8-OTHER DISTRACTION OUTSIDE THE VEHICLE 4-BREATH SAFETY EQUIPMENT 11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 11-R-THREE-WHEEL MOTORCYCLE 11-2-LIMITED - OTHER 9-OTHER / UNKNOWN 5-OTHER 1-NONE USED 12-PASSENGER IN UNENCLOSED CARGO AREA 12-S-SCHOOL BUS 12-13-MECHNICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 13-MECHNICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 5-OTHER 2-SHOULDER BELT ONLY USED 13-TRAILING UNIT 13-T-DOUBLE & TRIPLE TRAILERS 13-X-TANKER / HAZMAT 14-15-MILITARY VEHICLES ONLY 14-15-MOTOR VEHICLES WITHOUT AIR BRAKES 14-15-MOTOR VEHICLES WITHOUT AIR BRAKES 1-APPARENTLY NORMAL 3-LAP BELT ONLY USED 14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 14-F-FEMALE 16-OUTSIDE MIRROR 16-OUTSIDE MIRROR 2-PHYSICAL IMPAIRMENT 4-SHOULDER & LAP BELT USED 15-NON-MOTORIST 15-M-MALE 17-PROSTHETIC AID 17-PROSTHETIC AID 3-EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED) 5-CHILD RESTRAINT SYSTEM - FORWARD FACING 15-NON-MOTORIST 15-U-OTHER / UNKNOWN 18-OTHER 18-OTHER 4-ILLNESS 6-CHILD RESTRAINT SYSTEM - REAR FACING 16-REFLECTIVE CLOTHING 16-REFLECTIVE CLOTHING 16-F-EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED) 5-FELL ASLEEP, FAINTED, FATIGUED, ETC. 7-BOOSTER SEAT 17-LIGHTING - PEDESTRIAN / BICYCLE ONLY 17-REFLECTIVE CLOTHING 17-PROSTHETIC AID 6-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL 8-HELMET USED 18-OTHER / UNKNOWN 18-OTHER 18-OTHER 7-OTHER 9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) 19-OTHER / UNKNOWN 19-OTHER / UNKNOWN 19-OTHER / UNKNOWN 8-NEGATIVE RESULTS 10-REFLECTIVE CLOTHING 11-LIGHTING - PEDESTRIAN / BICYCLE ONLY 12-REFLECTIVE CLOTHING 13-REFLECTIVE CLOTHING 14-REFLECTIVE CLOTHING 15-REFLECTIVE CLOTHING 16-REFLECTIVE CLOTHING 17-REFLECTIVE CLOTHING 18-REFLECTIVE CLOTHING 19-REFLECTIVE CLOTHING TEST STATUS ALCOHOL TEST TYPE DRUG TEST TYPE DRUG TEST RESULT(S)											



OCCUPANT / WITNESS ADDENDUM

OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER		
	1	Wysinger, Kamaunie				1 0 2 4 2 0 1 1	10	M		
	ADDRESS: STREET, CITY, STATE, ZIP 49 Tranquil Pl. Pooler, GA 31322				CONTACT PHONE - INCLUDE AREA CODE					
	INJURIES 5	INJURED TAKEN BY 	EMS AGENCY (NAME) 	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) 	SAFETY EQUIPMENT USED 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET 	SEATING POSITION 0 3	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
OCCUPANT	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
OCCUPANT	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
OCCUPANT	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
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER		
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE					
	INJURIES		SAFETY EQUIPMENT USED		SEATING POSITION		AIR BAG USAGE			
	1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY		1 - NONE USED - VEHICLE OCCUPANT 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN		1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN			
	INJURED TAKEN BY						EJECTION			
	1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN						1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE			
	GENDER						TRAPPED			
	F - FEMALE M - MALE U - OTHER / UNKNOWN						1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS			
WITNESS	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER			
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE					
WITNESS	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER			
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE					
WITNESS	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH	AGE	GENDER			
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE					