



*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

PAGE 1 OF 4



UNIT #

OWNER NAME: LAST, FIRST, MIDDLE () SAME AS DRIVER)

OWNER PHONE: INCLUDE AREA CODE () SAME AS DRIVER)

01

LAKISHA D PERKINS

OWNER ADDRESS: STREET, CITY, STATE, ZIP () 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

0H

JJN3584

1N4AA6AP1GC435334

2016

NISSAN

INSURANCE VERIFIED

INSURANCE COMPANY

INSURANCE POLICY #

COLOR

VEHICLE MODEL

X

CLEARCOVER

16524

BLACK

MAXIMA

TYPE OF USE

US DOT #

TOWED BY: COMPANY NAME

COMMERCIAL

GOVERNMENT

IN EMERGENCY RESPONSE

1

MARCELLS TOWING

INTERLOCK DEVICE EQUIPPED

HIT/SKIP UNIT

#OCCUPANTS

VEHICLE WEIGHT GVWR/GCWR

HAZARDOUS MATERIAL

0

1

1

MATERIAL RELEASED

CLASS #

PLACARD ID #

PLACARD

UNIT TYPE

OF TRAILING UNITS

01

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 - CYCLOTRIC

10 - MOPED OR MOTORIZED BICYCLE

11 - ALL TERRAIN VEHICLE (ATV / UTV)

12 - GOLF CART

13 - SNOWMOBILE

14 - SINGLE UNIT TRUCK

15 - SEMI-TRACTOR

16 - FARM EQUIPMENT

17 - MOTORHOME

18 - LIMO (LIVERY VEHICLE)

19 - BUS (16+ PASSENGERS)

20 - OTHER VEHICLE

21 - HEAVY EQUIPMENT

22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE

23 - PEDESTRIAN / SKATER

24 - WHEELCHAIR (ANY TYPE)

25 - OTHER NON-MOTORIST

26 - BICYCLE

27 - TRAIN

99 - UNKNOWN OR HIT/SKIP

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?

0 - NO AUTOMATION

3 - CONDITIONAL AUTOMATION

9 - UNKNOWN

2

1 - YES 2 - NO 9 - OTHER / UNKNOWN

AUTONOMOUS MODE LEVEL

1 - DRIVER ASSISTANCE

2 - PARTIAL AUTOMATION

4 - HIGH AUTOMATION

5 - FULL AUTOMATION

SPECIAL FUNCTION

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

01

CARGO BODY TYPE

1 - NO CARGO BODY TYPE / NOT APPLICABLE

2 - BUS

3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE

4 - LOGGING

5 - INTERMODAL CONTAINER CHASSIS

6 - CARGO VAN/ENCLOSED BOX

7 - GRAIN/CHIPS/GRAVEL

8 - POLE

9 - CARGO TANK

10 - FLAT BED

11 - DUMP

12 - CONCRETE MIXER

13 - AUTO TRANSPORTER

14 - GARBAGE/REFUSE

99 - OTHER / UNKNOWN

01

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

9 - MOTOR TROUBLE

10 - DISABLED FROM PRIOR ACCIDENT

99 - OTHER / UNKNOWN

01

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

9 - MEDIAN/CROSSING ISLAND

10 - DRIVEWAY ACCESS

11 - SHARED USE PATHS OR TRAILS

12 - FIRST RESPONDER AT INCIDENT SCENE

99 - OTHER / UNKNOWN

01

ACTION

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

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

3

13

PRE-CRASH ACTIONS

CONTRIBUTING CIRCUMSTANCES

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

07

SEQUENCE OF EVENTS

1 - OVERTURN/ROLLOVER

2 - FIRE/EXPLOSION

3 - IMMERSION

4 - JACKKNIFE

5 - CARGO / EQUIPMENT LOSS OR SHIFT

6 - EQUIPMENT FAILURE

7 - SEPARATION OF UNITS

8 - RAN OFF ROAD RIGHT

9 - RAN OFF ROAD LEFT

10 - CROSS MEDIAN

11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL

12 - DOWNHILL RUNAWAY

13 - OTHER NON-COLLISION

14 - PEDESTRIAN

15 - PEDALCYCLE

16 - RAILWAY VEHICLE

17 - ANIMAL - FARM

18 - ANIMAL - DEER

19 - ANIMAL - OTHER

20 - MOTOR VEHICLE IN TRANSPORT

21 - PARKED MOTOR VEHICLE

22 - WORK ZONE MAINTENANCE EQUIPMENT

23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE

24 - OTHER MOVABLE OBJECT

11

09

43

COLLISION WITH FIXED OBJECT - STRUCK

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

30

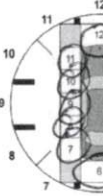
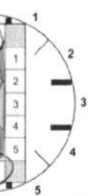
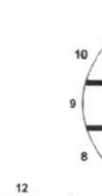
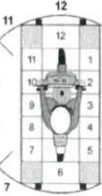
4

FIRST HARMFUL EVENT

MOST HARMFUL EVENT

3

4

LOCAL REPORT NUMBER	
2 2 0 2 5 0 3 9	
DAMAGE	
DAMAGE SCALE	
1 - NONE	3 - FUNCTIONAL DAMAGE
4 - MINOR DAMAGE	4 - DISABLING DAMAGE
9 - UNKNOWN	
DAMAGED AREA(S)	
INDICATE ALL THAT APPLY	
   	
<input type="checkbox"/> - NO DAMAGE [0] <input type="checkbox"/> - UNDERCARRIAGE [14]	
<input type="checkbox"/> - TOP [13] <input type="checkbox"/> - ALL AREAS [15]	
<input type="checkbox"/> - UNIT NOT AT SCENE [16]	
INITIAL POINT OF CONTACT	
0 - NO DAMAGE 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 13 - TOP 99 - UNKNOWN	
TRAFFIC	
TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - 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	
UNIT SPEED 3 5	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED 3 5	



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER									
2	2	0	2	5	0	3	9		

UNIT # 0 1	NAME: LAST, FIRST, MIDDLE PERKINS, DE'AVEON JACOBE					DATE OF BIRTH 0 2 0 1 2 0 0 5		AGE 1 7	GENDER M	
ADDRESS: STREET, CITY, STATE, ZIP 3215 ORANGEBURG CT. CINCINNATI, OHIO 45251					CONTACT PHONE - INCLUDE AREA CODE L					
INJURIES 3	INJURED TAKEN BY 2	EMS AGENCY (NAME) FFFD	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) MERCY FAIRFIELD		SAFETY EQUIPMENT USED 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 3	EJECTION 1	TRAPPED 1
OL STATE O H	OPERATOR LICENSE NUMBER		OFFENSE CHARGED 4511.202 (a)		LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION FAILURE TO CONTROL		CITATION NUMBER 250025		
OL CLASS 1	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 TYPE VALUE 1 1		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4 1 1

UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH		AGE 0	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 type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER		
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 STATUS TYPE VALUE		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4

UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH		AGE 0	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 type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER		
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 STATUS TYPE VALUE		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 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	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	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN	1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO = D) 5 - M/C MOPED ONLY 6 - NO VALID OL	1 - ALCOHOL INTERLOCK DEVICE 2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A & CLASS B BUS 7 - EXCEPT TRACTOR-TRAILER 8 - INTERMEDIATE LICENSE RESTRICTIONS 9 - LEARNER'S PERMIT RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER	1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING) 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD COMMUNICATION DEVICE 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE 6 - PASSENGER 7 - OTHER DISTRACTION INSIDE THE VEHICLE 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE 9 - OTHER / UNKNOWN	1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN
INJURED TAKEN BY	EJECTION		OL ENDORSEMENT	ALCOHOL TEST TYPE		
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	H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT	1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER			
SAFETY EQUIPMENT	TRAPPED		GENDER	DRUG TEST TYPE		
1 - NONE USED 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 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS	F - FEMALE M - MALE U - OTHER / UNKNOWN	1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER			
				CONDITION	DRUG TEST RESULT(S)	
				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 9 - OTHER / UNKNOWN	1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS	

LOCAL
REPORT
NUMBER 22-025039REPORTING
AGENCY

Fairfield Police Department

DATE OF ACCIDENT

4/9/22

IN COUNTY OF

Butler

ACCIDENT
LOCATION

856 NILLES RD. FAIRFIELD, OHIO 45014

856

NILLES RD.

MAY AVE.

GUARDRAIL

CURB

N

NOT TO SCALE

OFFICER'S SIGNATURE

P.O. S.FINLEY

BADGE NO.

163