



# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER\*

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH	<input checked="" type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY	LOCAL INFORMATION REPORTING AGENCY NAME* Fairfield Police Department	NCIC* 0 0 9 0 1	HIT/SKIP 1 - SOLVED 2 - UNSOLVED	NUMBER OF UNITS 0 2	UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN
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COUNTY* 0 9	LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP 1	LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield	CRASH DATE / TIME* 0 4 1 0 2 0 2 2 1 2 3 0	CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY
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ROUTE TYPE S R	ROUTE NUMBER 4	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES 3 9 . 3 3 2 6 0 3
ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) SOUTH GILMORE	ROAD TYPE R D	LONGITUDE DECIMAL DEGREES - 8 4 . 5 2 1 8 1 0

REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 1	DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	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 NUMBER OF APPROACHES 4	ROADWAY <input type="checkbox"/> ROADWAY DIVIDED
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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 0 1	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 BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN 6	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 (ANY TYPE) 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER/UNKNOWN
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<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 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 WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	CONTOUR 1 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/UNKNOWN	CONDITIONS 1 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	SURFACE 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN
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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 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN 0 1
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NARRATIVE On April 10, 2022 Unit 1 was traveling southbound on Holden Blvd. and when at the intersection of Dixie Hwy. attempted to turn left and in so doing, failed to yield the right of way to oncoming traffic and collided with Unit 2 which was traveling northbound on S. Gilmore Rd.  Additionally, Unit 1 driver was issued a citation for No OL-Never Held 335.01a1 (UM)	SEE OH-2
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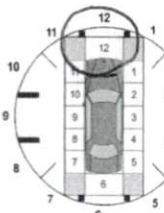
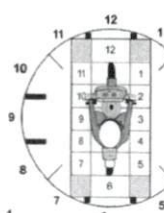
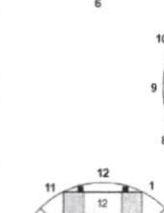
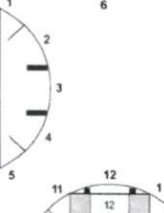
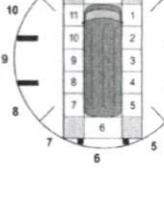
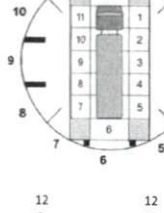

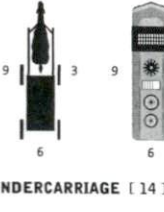


Indicate the north direction with an "N" on the compass diagram.

CRASH REPORTED DATE / TIME 0 4 1 0 2 0 2 2 1 2 3 0	DISPATCH DATE / TIME 0 4 1 0 2 0 2 2 1 2 3 2	ARRIVAL DATE / TIME 0 4 1 0 2 0 2 2 1 2 3 5	SCENE CLEARED DATE / TIME 0 4 1 0 2 0 2 2 1 3 1 8	REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OPS)
TOTAL TIME ROADWAY CLOSED 0	OTHER INVESTIGATION TIME 3 0	TOTAL MINUTES 7 6	OFFICER'S NAME* P.O. PORTALEOS OFFICER'S BADGE NUMBER* 1 3 5	CHECKED BY OFFICER'S NAME* P.O.C. more CHECKED BY OFFICER'S BADGE NUMBER* 1 3 6

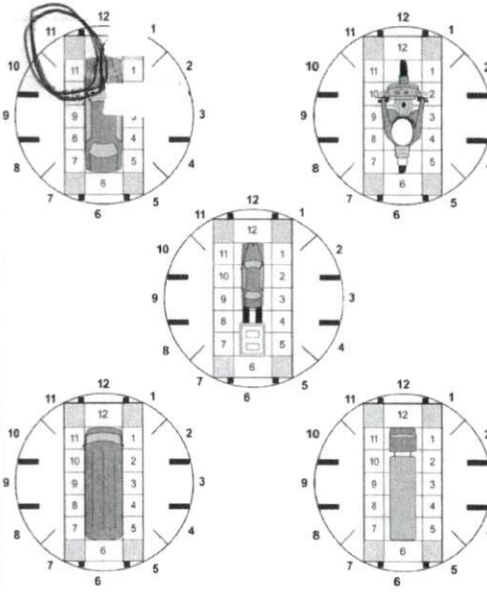


OWNER	UNIT #	OWNER NAME: LAST, FIRST, MIDDLE ( ) SAME AS DRIVER		OWNER PHONE: ( ) INCLUDE AREA CODE ( ) SAME AS DRIVER	
	01	GUTIERREZ-ALEGRIA, SAMUEL, E			
VEHICLE	OWNER ADDRESS: STREET, CITY, STATE, ZIP ( ) SAME AS DRIVER				
	190 WOODSTOCK DR. FAIRFIELD, OH 45014				
EVENT(S)	COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
VEHICLE	LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
	OH	JHK1202	JN8A208W66W501536	2006	NISSAN
VEHICLE	<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
		GEICO	4624764827	SILVER	MURANO
VEHICLE	TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME	
	<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE			WAYNES TOWING	
VEHICLE	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS	HAZARDOUS MATERIAL	
			02	<input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD CLASS # PLACARD ID #	
VEHICLE	VEHICLE WEIGHT GVWR/GCWR				
	1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.				
VEHICLE	UNIT TYPE				
	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS) 7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV) 12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME 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				
VEHICLE	# OF TRAILING UNITS				
	0				
VEHICLE	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?				
	1 - YES 2 - NO 9 - OTHER / UNKNOWN 0 AUTONOMOUS MODE LEVEL 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN				
VEHICLE	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				
VEHICLE	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				
VEHICLE	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				
VEHICLE	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				
VEHICLE	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				
VEHICLE	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				
VEHICLE	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				
VEHICLE	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				
VEHICLE	FIRST HARMFUL EVENT				
	1				
VEHICLE	MOST HARMFUL EVENT				
	1				

LOCAL REPORT NUMBER	
2 2 0 2 5 3 3 4	
DAMAGE	
DAMAGE SCALE	
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 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 99 - UNKNOWN 13 - TOP	
TRAFFIC	
TRAFFICWAY FLOW	TRAFFIC CONTROL
1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 6 - NORTHWEST 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
4	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION	
FROM 1 TO 3 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
UNIT SPEED	DETECTED SPEED
	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED	
3 5	



OWNER	UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)		OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER)	
	02	THOMAS, DELPHOUS, E			
VEHICLE	OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
	5356 SHADY MEADOWS DR. FAIRFIELD TWP. 45011				
VEHICLE	LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
	OH	HNK9428	1GNKVHKD2FJ335554	2015	CHEVROLET
VEHICLE	INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
	☑	STATE FARM	9095580D0635A	PURPLE	TRAVERSE
VEHICLE	TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME	
	☐ COMMERCIAL	☐ GOVERNMENT		FOX TOWING	
VEHICLE	INTERLOCK DEVICE EQUIPPED	HIT/SKIP UNIT	#OCCUPANTS	HAZARDOUS MATERIAL	
	☐	☐	02	☐ MATERIAL RELEASED	
VEHICLE	1 - PASSENGER CAR		7 - MOTORCYCLE 2-WHEELED	12 - GOLF CART	18 - LIMO (LIVERY VEHICLE)
	2 - PASSENGER VAN (MINIVAN)		8 - MOTORCYCLE 3-WHEELED	13 - SNOWMOBILE	19 - BUS (16+ PASSENGERS)
VEHICLE	3 - SPORT UTILITY VEHICLE		9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK	20 - OTHER VEHICLE
	4 - PICK UP		10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR	21 - HEAVY EQUIPMENT
VEHICLE	5 - CARGO VAN		11 - ALL TERRAIN VEHICLE (ATV / UTV)	16 - FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE
	6 - VAN (9-15 SEATS)			17 - MOTORHOME	23 - PEDESTRIAN / SKATER
VEHICLE	# OF TRAILING UNITS		24 - WHEELCHAIR (ANY TYPE)		
	0		25 - OTHER NON-MOTORIST		
VEHICLE	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		26 - BICYCLE		
	2		27 - TRAIN		
VEHICLE	1 - YES 2 - NO 9 - OTHER / UNKNOWN		99 - UNKNOWN OR HIT/SKIP		
	AUTONOMOUS MODE LEVEL				
VEHICLE	1 - NONE		0 - NO AUTOMATION		
	2 - TAXI		1 - DRIVER ASSISTANCE		
VEHICLE	3 - ELECTRONIC RIDE SHARING		2 - PARTIAL AUTOMATION		
	4 - SCHOOL TRANSPORT		3 - CONDITIONAL AUTOMATION		
VEHICLE	5 - BUS - TRANSIT/COMMUTER		4 - HIGH AUTOMATION		
			5 - FULL AUTOMATION		
VEHICLE	1 - NO CARGO BODY TYPE / NOT APPLICABLE		6 - BUS - CHARTER/TOUR		
	2 - BUS		7 - BUS - INTERCITY		
VEHICLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE		8 - BUS - SHUTTLE		
	4 - LOGGING		9 - BUS - OTHER		
VEHICLE	5 - INTERMODAL CONTAINER CHASSIS		10 - AMBULANCE		
	6 - CARGO VAN/ENCLOSED BOX		11 - FIRE		
VEHICLE	7 - GRAIN/CHIPS/GRAVEL		12 - MILITARY		
			13 - POLICE		
VEHICLE	1 - TURN SIGNALS		14 - PUBLIC UTILITY		
	2 - HEAD LAMPS		15 - CONSTRUCTION EQUIPMENT		
VEHICLE	3 - TAIL LAMPS		16 - FARM		
			17 - MOWING		
VEHICLE	4 - BRAKES		18 - SNOW REMOVAL		
	5 - STEERING		19 - TOWING		
VEHICLE	6 - TIRE BLOWOUT		20 - SAFETY SERVICE PATROL		
VEHICLE	1 - INTERSECTION - MARKED CROSSWALK		21 - MAIL CARRIER		
	2 - INTERSECTION - UNMARKED CROSSWALK		99 - OTHER / UNKNOWN		
VEHICLE	3 - INTERSECTION - OTHER				
	4 - MIDBLOCK - MARKED CROSSWALK				
VEHICLE	5 - TRAVEL LANE - OTHER LOCATION				
VEHICLE	1 - NON-CONTACT		6 - BICYCLE LANE		
	2 - NON-COLLISION		7 - SHOULDER / ROADSIDE		
VEHICLE	3 - STRIKING		8 - SIDEWALK		
	4 - STRUCK				
VEHICLE	5 - BOTH STRIKING & STRUCK				
	9 - OTHER / UNKNOWN				
VEHICLE	1 - STRAIGHT AHEAD				
	2 - BACKING				
VEHICLE	3 - CHANGING LANES				
	4 - OVERTAKING/PASSING				
VEHICLE	5 - MAKING RIGHT TURN				
	6 - MAKING LEFT TURN				
VEHICLE	7 - MAKING U-TURN				
	8 - ENTERING TRAFFIC LANE				
VEHICLE	9 - LEAVING TRAFFIC LANE				
	10 - PARKED				
VEHICLE	11 - SLOWING OR STOPPED IN TRAFFIC				
	12 - DRIVERLESS				
VEHICLE	13 - NEGOTIATING A CURVE				
	14 - ENTERING OR CROSSING SPECIFIED LOCATION				
VEHICLE	15 - WALKING, RUNNING, JOGGING, PLAYING				
	16 - WORKING				
VEHICLE	17 - PUSHING VEHICLE				
VEHICLE	1 - NONE				
	2 - FAILURE TO YIELD				
VEHICLE	3 - RAN RED LIGHT				
	4 - RAN STOP SIGN				
VEHICLE	5 - UNSAFE SPEED				
	6 - IMPROPER TURN				
VEHICLE	7 - LEFT OF CENTER				
	8 - FOLLOWING TOO CLOSE / ACDA				
VEHICLE	9 - IMPROPER LANE CHANGE				
	10 - IMPROPER PASSING				
VEHICLE	11 - DROVE OFF ROAD				
	12 - IMPROPER BACKING				
VEHICLE	13 - IMPROPER START FROM A PARKED POSITION				
	14 - STOPPED OR PARKED ILLEGALLY				
VEHICLE	15 - SWERVING TO AVOID				
	16 - WRONG WAY				
VEHICLE	17 - VISION OBSTRUCTION				
	18 - OPERATING DEFECTIVE EQUIPMENT				
VEHICLE	19 - LOAD SHIFTING/FALLING/ SPILLING				
	20 - IMPROPER CROSSING				
VEHICLE	21 - LYING IN ROADWAY				
	22 - NOT DISCERNIBLE				
VEHICLE	23 - OPENING DOOR INTO ROADWAY				
	99 - OTHER IMPROPER ACTION				
VEHICLE	1 - OVERTURN/ROLLOVER				
	2 - FIRE/EXPLOSION				
VEHICLE	3 - IMMERSION				
	4 - JACKKNIFE				
VEHICLE	5 - CARGO / EQUIPMENT LOSS OR SHIFT				
VEHICLE	6 - EQUIPMENT FAILURE				
	7 - SEPARATION OF UNITS				
VEHICLE	8 - RAN OFF ROAD RIGHT				
	9 - RAN OFF ROAD LEFT				
VEHICLE	10 - CROSS MEDIAN				
VEHICLE	25 - IMPACT ATTENUATOR / CRASH CUSHION				
	26 - BRIDGE OVERHEAD STRUCTURE				
VEHICLE	27 - BRIDGE PIER OR ABUTMENT				
	28 - BRIDGE PARAPET				
VEHICLE	29 - BRIDGE RAIL				
	30 - GUARDRAIL FACE				
VEHICLE	31 - GUARDRAIL END				
	32 - PORTABLE BARRIER				
VEHICLE	33 - MEDIAN CABLE BARRIER				
	34 - MEDIAN GUARDRAIL BARRIER				
VEHICLE	35 - MEDIAN CONCRETE BARRIER				
	36 - MEDIAN OTHER BARRIER				
VEHICLE	37 - TRAFFIC SIGN POST				
	38 - OVERHEAD SIGN POST				
VEHICLE	39 - LIGHT / LUMINARIES SUPPORT				
	40 - UTILITY POLE				
VEHICLE	41 - OTHER POST, POLE OR SUPPORT				
	42 - CULVERT				
VEHICLE	43 - CURB				
	44 - DITCH				
VEHICLE	45 - EMBANKMENT				
	46 - FENCE				
VEHICLE	47 - MAILBOX				
	48 - TREE				
VEHICLE	49 - FIRE HYDRANT				
VEHICLE	50 - WORK ZONE MAINTENANCE EQUIPMENT				
	51 - WALL				
VEHICLE	52 - BUILDING				
	53 - TUNNEL				
VEHICLE	54 - OTHER FIXED OBJECT				
	99 - OTHER / UNKNOWN				
VEHICLE	1 - FIRST HARMFUL EVENT				
	1 - MOST HARMFUL EVENT				

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

<b>UNIT #</b> 0 1		<b>NAME: LAST, FIRST, MIDDLE</b> MANUEL-ALFONSO, ALEGRIA, OLIVAS				<b>DATE OF BIRTH</b> 1 2 2 1 1 9 7 6		<b>AGE</b> 4 5	<b>GENDER</b> M	
<b>ADDRESS: STREET, CITY, STATE, ZIP</b> 190 WOODSTOCK DR. FAIRFIELD, OH 45014						<b>CONTACT PHONE - INCLUDE AREA CODE</b> 				
<b>INJURIES</b> 5	<b>INJURED TAKEN BY</b> 	<b>EMS AGENCY (NAME)</b> 	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> 		<b>SAFETY EQUIPMENT USED</b> 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	<b>SEATING POSITION</b> 0 1	<b>AIR BAG USAGE</b> 1	<b>EJECTION</b> 1	<b>TRAPPED</b> 1
<b>OL STATE</b> 	<b>OPERATOR LICENSE NUMBER</b> 		<b>OFFENSE CHARGED</b> RIGHT OF WAY		<b>LOCAL CODE</b> <input checked="" type="checkbox"/>	<b>OFFENSE DESCRIPTION</b> 331.17A		<b>CITATION NUMBER</b> 250249		
<b>OL CLASS</b> 6	<b>ENDORSEMENT SELECT UP TO 2</b> 	<b>RESTRICTION SELECT UP TO 3</b> 		<b>DRIVER DISTRACTED BY</b> 1	<b>ALCOHOL / DRUG SUSPECTED</b> <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b> 1	<b>ALCOHOL TEST</b> STATUS TYPE VALUE 1 1 .		<b>DRUG TEST(S)</b> STATUS TYPE RESULT SELECT UP TO 4 1 1

<b>UNIT #</b> 0 2		<b>NAME: LAST, FIRST, MIDDLE</b> SOUTHALL, CHARLOTTE				<b>DATE OF BIRTH</b> 0 9 2 0 1 9 5 4		<b>AGE</b> 6 7	<b>GENDER</b> F	
<b>ADDRESS: STREET, CITY, STATE, ZIP</b> 11631 MORROCCO CT. CINCINNATI, OH 45240						<b>CONTACT PHONE - INCLUDE AREA CODE</b> 				
<b>INJURIES</b> 4	<b>INJURED TAKEN BY</b> 2	<b>EMS AGENCY (NAME)</b> FAIRFIELD MEDICS	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> MERCY HOSPITAL		<b>SAFETY EQUIPMENT USED</b> 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	<b>SEATING POSITION</b> 0 1	<b>AIR BAG USAGE</b> 1	<b>EJECTION</b> 1	<b>TRAPPED</b> 1
<b>OL STATE</b> O H	<b>OPERATOR LICENSE NUMBER</b> 		<b>OFFENSE CHARGED</b> 		<b>LOCAL CODE</b> <input type="checkbox"/>	<b>OFFENSE DESCRIPTION</b> 		<b>CITATION NUMBER</b> 		
<b>OL CLASS</b> 4	<b>ENDORSEMENT SELECT UP TO 2</b> 	<b>RESTRICTION SELECT UP TO 3</b> 		<b>DRIVER DISTRACTED BY</b> 1	<b>ALCOHOL / DRUG SUSPECTED</b> <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b> 1	<b>ALCOHOL TEST</b> STATUS TYPE VALUE 1 1 .		<b>DRUG TEST(S)</b> STATUS TYPE RESULT SELECT UP TO 4 1 1

<b>UNIT #</b> 		<b>NAME: LAST, FIRST, MIDDLE</b> 				<b>DATE OF BIRTH</b> 		<b>AGE</b> 0	<b>GENDER</b> 	
<b>ADDRESS: STREET, CITY, STATE, ZIP</b> 						<b>CONTACT PHONE - INCLUDE AREA CODE</b> 				
<b>INJURIES</b> 	<b>INJURED TAKEN BY</b> 	<b>EMS AGENCY (NAME)</b> 	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> 		<b>SAFETY EQUIPMENT USED</b> 	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	<b>SEATING POSITION</b> 	<b>AIR BAG USAGE</b> 	<b>EJECTION</b> 	<b>TRAPPED</b> 
<b>OL STATE</b> 	<b>OPERATOR LICENSE NUMBER</b> 		<b>OFFENSE CHARGED</b> 		<b>LOCAL CODE</b> <input type="checkbox"/>	<b>OFFENSE DESCRIPTION</b> 		<b>CITATION NUMBER</b> 		
<b>OL CLASS</b> 	<b>ENDORSEMENT SELECT UP TO 2</b> 	<b>RESTRICTION SELECT UP TO 3</b> 		<b>DRIVER DISTRACTED BY</b> 	<b>ALCOHOL / DRUG SUSPECTED</b> <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b> 	<b>ALCOHOL TEST</b> STATUS TYPE VALUE 		<b>DRUG TEST(S)</b> 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 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	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	CONDITION		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 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS	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 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER
SAFETY EQUIPMENT	TRAPPED		GENDER	DRUG TEST TYPE		DRUG TEST RESULT(S)
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 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OP/IODS 7 - OTHER 8 - NEGATIVE RESULTS			

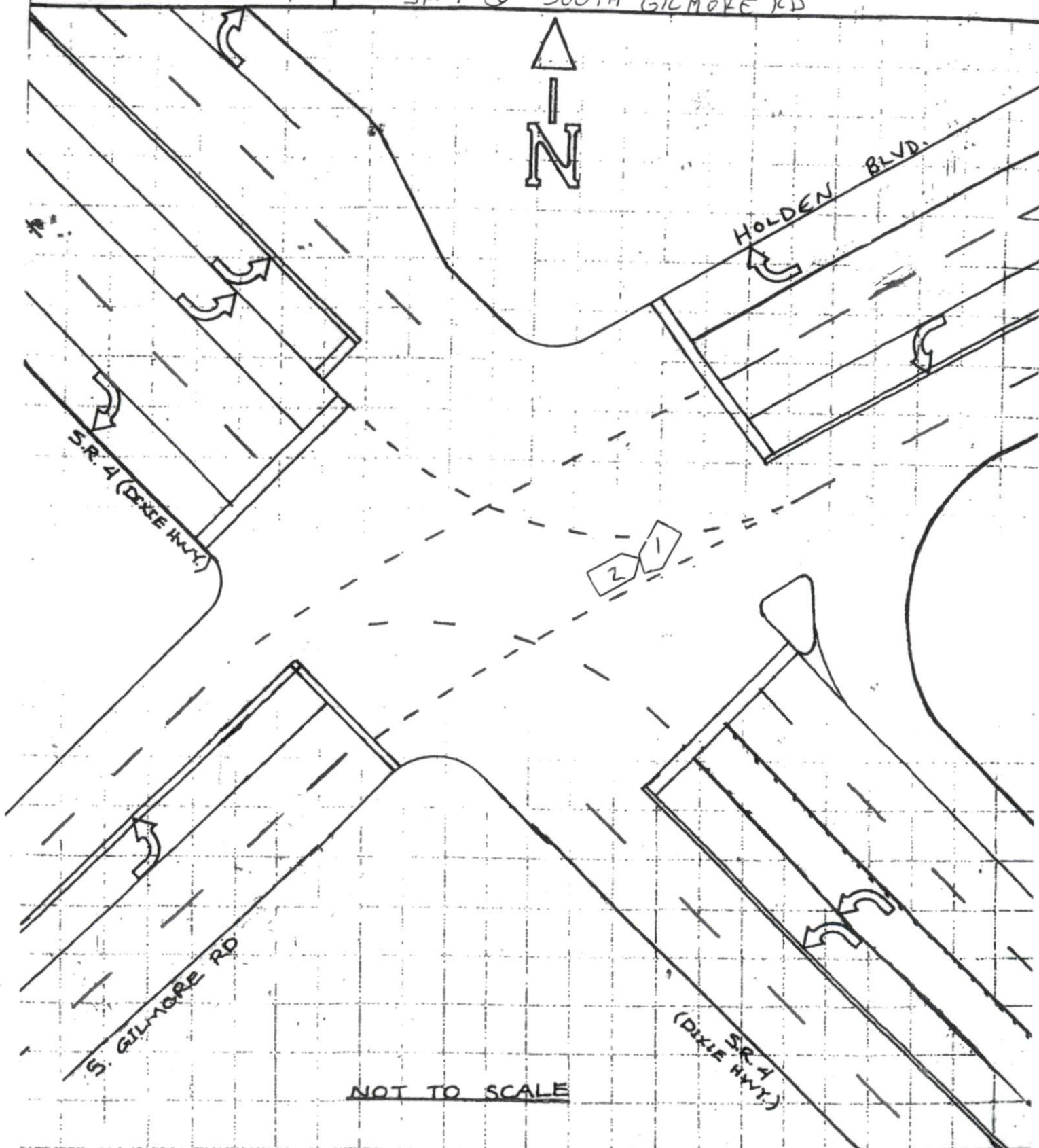




# OCCUPANT / WITNESS ADDENDUM

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	2	THOMAS, MARIA			0 8 0 5 1 9 7 0			5 1	F																																																																				
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE																																																																								
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LOCAL REPORT NUMBER 22-025334	REPORTING AGENCY FAIRFIELD P.D.	DATE OF CRASH M 4   D 10   Y 22
IN COUNTY OF BUTLER	CRASH LOCATION SR 4 @ SOUTH GILMORE RD	



OFFICER'S SIGNATURE X <i>[Signature]</i>	BADGE NUMBER 136
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