



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*
2 2 0 2 6 6 9 9

| | | | | | | | | | | |
|--|--|--|--------------------------------|--|--|--|--|---|---|--|
| <input checked="" type="checkbox"/> PHOTOS TAKEN | | <input type="checkbox"/> OH-2 | <input type="checkbox"/> OH-3 | LOCAL INFORMATION | | | | | | |
| <input type="checkbox"/> SECONDARY CRASH | | <input type="checkbox"/> OH-1P | <input type="checkbox"/> OTHER | REPORTING AGENCY NAME* | | NCIC* | | | | |
| | | | | Fairfield Police Department | | 0 0 9 0 1 | | <input type="checkbox"/> HIT/SKIP | NUMBER OF UNITS | UNIT IN ERROR |
| | | | | | | | | <input type="checkbox"/> 1-SOLVED | 0 2 | 0 1 98-ANIMAL |
| | | | | | | | | <input type="checkbox"/> 2-UNRESOLVED | | 0 1 99-UNKNOWN |
| COUNTY* 0 9 | | LOCALITY* 1-CITY 1 2-VILLAGE 3-TOWNSHIP | | LOCATION: CITY, VILLAGE, TOWNSHIP* | | City of Fairfield | | CRASH DATE / TIME* | | CRASH SEVERITY |
| | | | | | | | | 0 4 1 6 2 0 2 2 0 2 5 4 | | 1- FATAL 5 |
| 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 5 4 1 2 | |
| ROUTE TYPE | | ROUTE NUMBER | | PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST | | REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) | | ROAD TYPE | LONGITUDE DECIMAL DEGREES -8 4 5 4 2 3 6 | |
| 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 type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA | | NUMBER OF APPROACHES |
| DISTANCE FROM REFERENCE 2 5 | | DISTANCE UNIT OF MEASURE 1-MILES 2-FEET 3-YARDS | | | | | | | | ROADWAY <input type="checkbox"/> ROADWAY DIVIDED |
| LOCATION OF FIRST HARMFUL EVENT 0 1 | | | | MANNER OF CRASH COLLISION/IMPACT 2 | | | | 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 <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 2-ADVANCE WARNING AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA | | CONTOUR 1 | CONDITIONS 2 | SURFACE 2 |
| LIGHT CONDITION 3 | | | | WEATHER 0 4 | | | | 9-OTHER/UNKNOWN | 1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN | 1-CONCRETE 2-BLACKTOP, BITUMINOUS, ASPHALT 3-BRICK/BLOCK 4-SLAG, GRAVEL, STONE 5-DIRT 9-OTHER/UNKNOWN |
| <p>NARRATIVE</p> <p>On 04/16/22 at around 2:54 a.m., Unit 1 was traveling northbound on Dixie Hw. at approximately 60 m.p.h. When at Schirmer Dr., Unit 1 failed to stop within the assured clear distance ahead and collided with Unit 2, who was also traveling northbound on Dixie Hw. near Schirmer Dr. Unit 2 was traveling at around 40 m.p.h.</p> <p>The driver of Unit 1, Jory Wilburn, was also cited for OVI (FCO 333.01a1A) - M1 and DUS Catch-all (FCO 335.07a) - M1.</p> <p><i>NOT TO SCALE</i></p> | | | | | | | | | | |
| CRASH REPORTED DATE / TIME 0 4 1 6 2 0 2 2 0 2 5 4 | | DISPATCH DATE / TIME 0 4 1 6 2 0 2 2 0 2 5 8 | | ARRIVAL DATE / TIME 0 4 1 6 2 0 2 2 0 3 0 1 | | SCENE CLEARED DATE / TIME 0 4 1 6 2 0 2 2 0 3 2 6 | | REPORT TAKEN BY | | |
| TOTAL TIME ROADWAY CLOSED 3 2 | | OTHER INVESTIGATION TIME 2 8 | | TOTAL MINUTES 2 8 | | OFFICER'S NAME* O. Eckstein | | <input type="checkbox"/> POLICE AGENCY | | |
| | | | | | | OFFICER'S BADGE NUMBER* 1 6 5 | | <input type="checkbox"/> MOTORIST | | |
| | | | | | | | | <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP) | | |
| HSY7001 OH1 1/19 [760-0820] | | | | | | | | | | |

UNIT # 0 1 OWNER NAME: LAST, FIRST, MIDDLE SAME AS DRIVER OWNER PHONE: INCLUDE AREA CODE SAME AS DRIVER

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

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

LP STATE O. H. LICENSE PLATE # JJA8598 VEHICLE IDENTIFICATION # W B A V D 1 3 5 X 6 K V 0 3 7 8 0 VEHICLE YEAR 2006 VEHICLE MAKE BMW

INSURANCE VERIFIED INSURANCE COMPANY Marcell's INSURANCE POLICY # 325XI COLOR BLACK VEHICLE MODEL

TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE US DOT # 1 TOWED BY: COMPANY NAME Marcell's
INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS 0 1 VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS.
2 - 10,001 - 26K LBS.
3 - >26K LBS. HAZARDOUS MATERIAL MATERIAL RELEASED CLASS # 1 PLACARD ID # 1
 PLACARD

UNIT TYPE 0 1 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER
2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)
3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST
4 - PICK UP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE
5 - CARGO VAN BICYCLE 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN
6 - VAN (9-15 SEATS) 11 - ALL-TERRAIN VEHICLE (ATV / UTV) 17 - MOTORHOME 28 - ANIMAL DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP

VEHICLE # OF TRAILING UNITS 0
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 1 - YES 2 - NO 9 - OTHER / UNKNOWN AUTONOMOUS MODE LEVEL
0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
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 7 - GRAIN / CHIPS / GRAVEL 9 - CARGO TANK 13 - AUTO TRANSPORTER
10 - FLAT BED 11 - DUMP 14 - GARBAGE / REFUSE 99 - OTHER / UNKNOWN

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

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 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST
4 - STRUCK PRE-CRASH ACTIONS 4 - OVERTAKING / PASSING 11 - SLOWING OR STOPPED IN TRAFFIC 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE
5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 12 - DRIVERLESS 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN
6 - MAKING LEFT TURN

CONTRIBUTING CIRCUMSTANCES 0 8 1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A PARKED POSITION 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY
2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 14 - STOPPED OR PARKED ILLEGALLY 18 - OPERATING DEFECTIVE EQUIPMENT 22 - NOT DISCERNIBLE
3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 15 - SWERVING TO AVOID 19 - LOAD SHIFTING / FALLING / SPILLING 23 - OPENING DOOR INTO ROADWAY
4 - RAN STOP SIGN 10 - IMPROPER PASSING 16 - WRONG WAY 20 - IMPROPER CROSSING 99 - OTHER IMPROPER ACTION
5 - UNSAFE SPEED 11 - DROVE OFF ROAD 12 - IMPROPER BACKING

SEQUENCE OF EVENTS

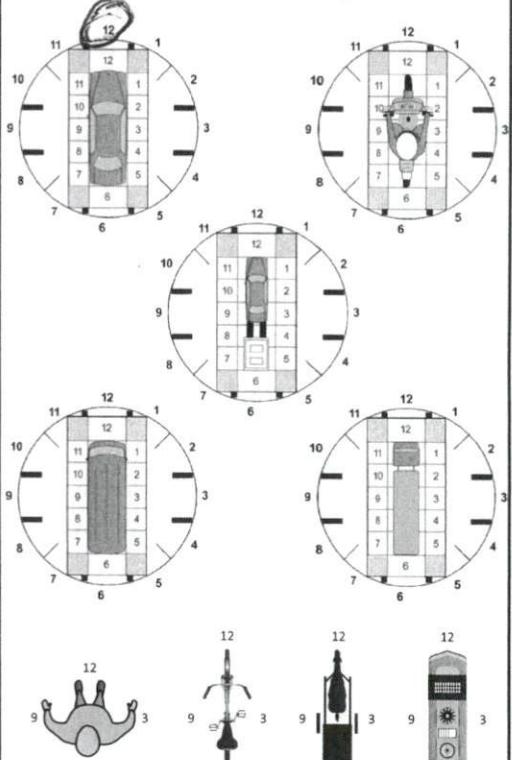
1 2 0 1 - OVERTURN / ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT
2 - FIRE / EXPLOSION 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 12 - DOWNSHILL RUNAWAY 17 - ANIMAL - FARM 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION
3 - IMMERSION 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION 18 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 24 - OTHER MOVEABLE OBJECT
4 - JACKKNIFE 10 - CROSS MEDIAN 14 - PEDESTRIAN 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE

4 5 6 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
27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER SUPPORT 39 - LIGHT / LUMINARIES 45 - EMBANKMENT 52 - BUILDING
28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL
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
1 - FIRST HARMFUL EVENT 1 - MOST HARMFUL EVENT

LOCAL REPORT NUMBER
2 2 0 2 6 6 9 9

DAMAGE
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]

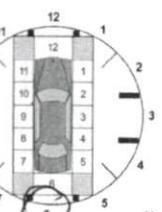
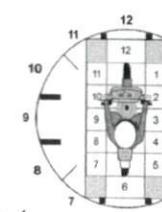
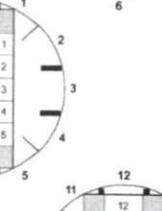
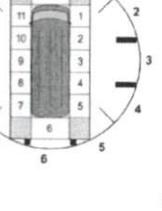
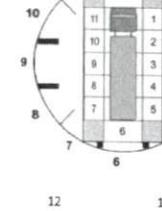
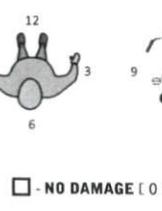
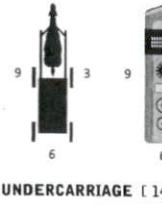
INITIAL POINT OF CONTACT
0 - NO DAMAGE 14 - UNDERCARRIAGE
1 - 12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE
DIAGRAM 99 - UNKNOWN
13 - TOP

TRAFFIC
TRAFFIC WAY FLOW 2 - ONE WAY - TWO WAY - 6 TRAFFIC CONTROL
1 - ROUNDABOUT 4 - STOP SIGN
2 - SIGNAL 5 - YIELD SIGN
3 - FLASHER 6 - NO CONTROL
OF THROUGH LANES ON ROAD 4 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
FROM 2 TO 1

UNIT SPEED 6 0 DETECTED SPEED
1 - STATED / ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED
POSTED SPEED 3 5

| | | | | | | | | | |
|---|---|---|--|---|---|---|--|--|--|
| OWNER UNIT # <u>012</u> | OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER | OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER | | | | | | | |
| 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 <u>O_H</u> | LICENSE PLATE # <u>HVS2138</u> | VEHICLE IDENTIFICATION # <u>1C16R17FG9KS543971</u> | VEHICLE YEAR <u>2019</u> | VEHICLE MAKE <u>Dodge</u> | | | | | |
| <input type="checkbox"/> INSURANCE VERIFIED | INSURANCE COMPANY | INSURANCE POLICY # | COLOR <u>Black</u> | VEHICLE MODEL <u>Ram</u> | | | | | |
| TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE | | US DOT # | TOWED BY: COMPANY NAME | | | | | | |
| INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT <input type="checkbox"/> #OCCUPANTS <u>0 1</u> | | VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS. | HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD | | | | | | |
| UNIT TYPE <u>04</u> | 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 <u>0</u> | | | | | | | | | |
| WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? <u>2</u> 1 - YES 2 - NO 9 - OTHER / UNKNOWN | | AUTONOMOUS MODE LEVEL | 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION | | | | | | |
| SPECIAL FUNCTION <u>01</u> 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER | | 1 - NONE 2 - TAXI 3 - BUS - SHUTTLE 4 - SCHOOL BUS 5 - AMBULANCE | 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 | | | |
| CARGO BODY TYPE <u>01</u> | 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 - CARGOTANK 10 - FLAT BED 11 - DUMP | 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN | | |
| 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 | | |
| 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 | | |
| ACTION <u>4</u> | 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING <u>01</u> 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 | | |
| CONTRIBUTING CIRCUMSTANCES | 1 - FAILURE TO YIELD 2 - RAN RED LIGHT 3 - RAN STOP SIGN 4 - RAN SPEED 5 - UNSAFE SPEED 6 - IMPROPER TURN | | | | 7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ADOA 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 | | |
| SEQUENCE OF EVENTS | | | | | 21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION | | | | |
| <u>120</u> | 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 MOBILE OBJECT | | |
| <u>411</u> | 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 | |
| <u>1</u> | 1 - FIRST HARMFUL EVENT | | | | 1 - MOST HARMFUL EVENT | | | | |

| | |
|---|---|
| LOCAL REPORT NUMBER <u>22026699</u> | |
| DAMAGE | |
| DAMAGE SCALE 3 - NONE 2 - MINOR DAMAGE 1 - UNKNOWN 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE | |
| 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 1 - REFER TO UNIT DIAGRAM 12 - TOP 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN | |
| TRAFFIC | |
| TRAFFICWAY FLOW <u>2</u> | TRAFFIC CONTROL <u>6</u> 1 - ONE-WAY 2 - TWO-WAY |
| # OF THROUGH LANES ON ROAD <u>4</u> | RAIL GRADE CROSSING <u>1</u> 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING |
| UNIT / NON-MOTORIST DIRECTION | |
| FROM <u>2</u> TO <u>1</u> | 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN |
| UNIT SPEED | |
| <u>40</u> | DETECTED SPEED <u>1</u> 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED |
| POSTED SPEED | |
| <u>35</u> | |



MOTORIST / Non-MOTORIST

MOTORIST / NON-MOTORIST

| LOCAL REPORT NUMBER | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| 2 2 0 2 6 6 9 9 | | | | | | | | | |
| DATE OF BIRTH | | | | | | | | | |
| 0 4 1 5 1 9 9 1 3 1 M | | | | | | | | | |
| CONTACT PHONE - INCLUDE AREA CODE | | | | | | | | | |
| | | | | | | | | | |
| INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED 5 0 1 Wilburn, Jory, Akeen Jyjuan 0 4 <input type="checkbox"/> DOT-COMPLIANT MC HELMET SEATING POSITION 0 1 AIR BAG USAGE 4 EJECTION 1 TRAPPED 1 | | | | | | | | | |
| DL STATE OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL CODE O H FCO 333.03a <input checked="" type="checkbox"/> 251131 | | | | | | | | | |
| DL CLASS ENDORSEMENT SELECT UP TO 2 RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY ALCOHOL / DRUG SUSPECTED CONDITION ALCOHOL TEST DRUG TEST(S) 6 1 <input checked="" type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG 6 2 4 1 1 RESULT SELECT UP TO 4 | | | | | | | | | |
| UNIT # NAME: LAST, FIRST, MIDDLE DATE OF BIRTH AGE GENDER 0 2 Starks, Terry, Lashun 0 8 0 3 1 9 7 4 4 7 M | | | | | | | | | |
| ADDRESS: STREET, CITY, STATE, ZIP | | | | | | | | | |
| 10513 Toulon Dr., Cincinnati, OH, 45240 | | | | | | | | | |
| INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED 5 0 1 Wilburn, Jory, Akeen Jyjuan 0 4 <input type="checkbox"/> DOT-COMPLIANT MC HELMET SEATING POSITION 0 1 AIR BAG USAGE 1 EJECTION 1 TRAPPED 1 | | | | | | | | | |
| DL STATE OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL CODE OFFENSE DESCRIPTION CITATION NUMBER O H FCO 333.03a <input type="checkbox"/> 251131 | | | | | | | | | |
| DL CLASS ENDORSEMENT SELECT UP TO 2 RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY ALCOHOL / DRUG SUSPECTED CONDITION ALCOHOL TEST DRUG TEST(S) 4 1 <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG 1 1 1 1 1 RESULT SELECT UP TO 4 | | | | | | | | | |
| UNIT # NAME: LAST, FIRST, MIDDLE DATE OF BIRTH AGE GENDER 0 2 Starks, Terry, Lashun 0 8 0 3 1 9 7 4 4 7 M | | | | | | | | | |
| ADDRESS: STREET, CITY, STATE, ZIP | | | | | | | | | |
| | | | | | | | | | |
| INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED 0 1 Wilburn, Jory, Akeen Jyjuan 0 4 <input type="checkbox"/> DOT-COMPLIANT MC HELMET SEATING POSITION 0 1 AIR BAG USAGE 1 EJECTION 1 TRAPPED 1 | | | | | | | | | |
| DL STATE OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL CODE OFFENSE DESCRIPTION CITATION NUMBER O H FCO 333.03a <input type="checkbox"/> 251131 | | | | | | | | | |
| DL CLASS ENDORSEMENT SELECT UP TO 2 RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY ALCOHOL / DRUG SUSPECTED CONDITION ALCOHOL TEST DRUG TEST(S) 4 1 <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG 1 1 1 1 1 RESULT SELECT UP TO 4 | | | | | | | | | |
| INJURIES SEATING POSITION AIR BAG DL CLASS DL 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) 3-SUSPECTED MINOR INJURY 3-FRONT- RIGHT SIDE 3-DEPLOYED SIDE 3-CLASS C 3-CORRECTIVE LENSES 4-Possible INJURY 4-SECOND- LEFT SIDE (MOTORCYCLE PASSENGER) 4-DEPLOYED BOTH FRONT / SIDE 4-REGULAR CLASS (OHIO = D) 5-NO APPARENT INJURY 5-SECOND- MIDDLE 5-NOT APPLICABLE 5-M/C MOPED ONLY 5-EXCEPT CLASS A BUS 6-SECOND- RIGHT SIDE 6-SECOND- RIGHT SIDE 6-DEPLOYMENT UNKNOWN 6-NO VALID DL 6-EXCEPT CLASS A & CLASS B BUS 7-THIRD- LEFT SIDE (MOTORCYCLE SIDE CAR) 7-THIRD- MIDDLE 7-THIRD- RIGHT SIDE 7-EXCEPT TRACTOR-TRAILER 8-THIRD- MIDDLE 9-THIRD- RIGHT SIDE 10-SLEEPER SECTION OF TRUCK CAB 8-INTERMEDIATE LICENSE RESTRICTIONS 11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 11-LEARNER'S PERMIT RESTRICTIONS 12-PASSENGER IN UNENCLOSED CARGO AREA 12-PASSENGER IN UNENCLOSED CARGO AREA 12-LIMITED TO DAYLIGHT ONLY 13-TRAILING UNIT 14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 15-NON-MOTORIST 15-NON-MOTORIST 14-MILITARY VEHICLES ONLY 16-BOOSTER SEAT 16-BOOSTER SEAT 15-MOTOR VEHICLES WITHOUT AIR BRAKES 17-HELMET USED 17-HELMET USED 16-OUTSIDE MIRROR 18-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) 18-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) 17-PROSTHETIC AID 19-REFLECTIVE CLOTHING 19-REFLECTIVE CLOTHING 18-OTHER 20-LIGHTING - PEDESTRIAN / BICYCLE ONLY 20-LIGHTING - PEDESTRIAN / BICYCLE ONLY 19-OTHER / UNKNOWN 21-OTHER / UNKNOWN 21-OTHER / UNKNOWN 20-OTHER / UNKNOWN EJECTION OL ENDORSEMENT TRAPPED GENDER CONDITION DRUG TEST TYPE 1-NOT EJECTED H-HAZMAT 1-NOT TRAPPED F-FEMALE 1-APPARENTLY NORMAL 2-PARTIALLY EJECTED M-MOTORCYCLE 2-EXTRICATED BY MECHANICAL MEANS M-MALE 2-PHYSICAL IMPAIRMENT 3-TOTALLY EJECTED P-PASSENGER 3-FREED BY NON-MECHANICAL MEANS U-OTHER / UNKNOWN 3-EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED) 4-NOT APPLICABLE N-TANKER 4-NOT APPLICABLE 4-ILLNESS TRAPPED Q-MOTOR SCOOTER 5-FREED BY NON-MECHANICAL MEANS 5-FELL ASLEEP, FAINTED, FATIGUED, ETC. 1-NOT TRAPPED R-THREE-WHEEL MOTORCYCLE 6-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL 2-EXTRICATED BY MECHANICAL MEANS S-SCHOOL BUS 7-OTHER / UNKNOWN 3-FREED BY NON-MECHANICAL MEANS T-DOUBLE & TRIPLE TRAILERS 8-OTHER / UNKNOWN 4-NOT APPLICABLE X-TANKER / HAZMAT 9-OTHER / UNKNOWN DRUG TEST RESULT(S) 1-AMPHETAMINES 2-BARBITURATES 3-BENZODIAZEPINES 4-CANNABINOID 5-COCAIN 6-OPIATES / OPIOIDS 7-OTHER 8-NEGATIVE RESULTS | | | | | | | | | |
| INJURED TAKEN BY 1-NOT TRANSPORTED / TREATED AT SCENE 2-EMS 3-POLICE 9-OTHER / UNKNOWN | | | | | | | | | |
| SAFETY EQUIPMENT 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 | | | | | | | | | |