




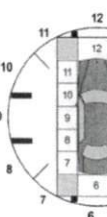

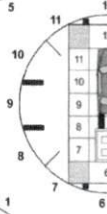
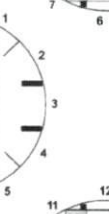

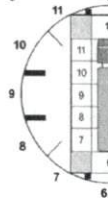
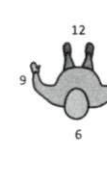

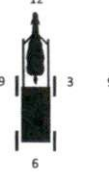

# TRAFFIC CRASH REPORT

\*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	2 2 0 2 9 2 9 4	
COUNTY* 0 9	LOCALITY* 1 1 2-VILLAGE 3-TOWNSHIP	LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield		CRASH DATE / TIME* 04262022 1044		CRASH SEVERITY 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY	
ROUTE TYPE 1	ROUTE NUMBER 1	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME Symmes	ROAD TYPE R D	LATITUDE DECIMAL DEGREES 39.352685	CRASH SEVERITY 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY	
ROUTE TYPE 1	ROUTE NUMBER 1	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) River	ROAD TYPE R D	LONGITUDE DECIMAL DEGREES -84.567082	CRASH SEVERITY 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY	
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 PL-PLACE 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			
DISTANCE FROM REFERENCE 1-MILES 2-Feet 3-YARDS		DISTANCE UNIT OF MEASURE 1-MILES 2-Feet 3-YARDS		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 0 1		MANNER OF CRASH COLLISION/IMPACT 1-NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2-REAR-END 3-HEAD-ON 9-CROSSOVER 10-DRIVEWAY/ALLEY ACCESS 11-RAILWAY GRADE CROSSING 12-SHARED USE PATHS OR TRAILS 13-BIKE LANE 14-TOLL BOOTH 99-OTHER / UNKNOWN 1		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 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	
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		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	
NARRATIVE On April 26, 2022 at approximately 10:44 A.M. Unit 1 was traveling north on River Rd. and when at Symmes Rd. crossed the intersection on a no walk sign, and struck Unit 2 which was making a left turn on River Rd. from Symmes Rd.  After Unit 1 and Unit 2 had a conversation, Unit 1 left the scene on her bicycle.  See OH-2				 Indicate the north direction with an "N" on the compass diagram.			
CRASH REPORTED DATE / TIME 0 4 2 6 2 0 2 2 1 0 4 4		DISPATCH DATE / TIME 0 4 2 6 2 0 2 2 1 1 0 0		ARRIVAL DATE / TIME 0 4 2 6 2 0 2 2 1 1 0 2		SCENE CLEARED DATE / TIME 0 4 2 6 2 0 2 2 1 1 1 3	
TOTAL TIME ROADWAY CLOSED 1 5		OTHER INVESTIGATION TIME 2 8		OFFICER'S NAME* Z. Shust		CHECKED BY OFFICER'S NAME* Sgt. J. Jorgue	
TOTAL MINUTES 1 5		OFFICER'S BADGE NUMBER* 1 4 6		CHECKED BY OFFICER'S BADGE NUMBER* 8 4		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 ODP)	

OWNER	UNIT # 01		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						
VEHICLE	LP STATE	LICENSE PLATE #		VEHICLE IDENTIFICATION #				VEHICLE YEAR		VEHICLE MAKE				
	INSURANCE VERIFIED	INSURANCE COMPANY			INSURANCE POLICY #			COLOR		VEHICLE MODEL				
	COMMERCIAL	TYPE OF USE GOVERNMENT ( ) IN EMERGENCY RESPONSE ( )		US DOT #		TOWED BY: COMPANY NAME								
	INTERLOCK DEVICE EQUIPPED	HIT/SKIP UNIT		#OCCUPANTS 01		VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.		HAZARDOUS MATERIAL MATERIAL RELEASED ( ) CLASS # PLACARD ID # PLACARD						
	UNIT TYPE		26		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	
	# of TRAILING UNITS		0		WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - YES 2 - NO 9 - OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL 0		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION		3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION		9 - UNKNOWN	
	SPECIAL FUNCTION		01		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	
	CARGO BODY TYPE		01		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 DEFECTS		99		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	
	EVENT(S)	NON-MOTORIST LOCATION AT IMPACT		01		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
ACTION		3		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		
CONTRIBUTING CIRCUMSTANCES		20		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		
SEQUENCE OF EVENTS														
1		20		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		
COLLISION WITH FIXED OBJECT - STRUCK														
4		0		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		
1		0		FIRST HARMFUL EVENT										
1		0		MOST HARMFUL EVENT										

<b>LOCAL REPORT NUMBER</b> <div style="display: flex; justify-content: space-between; width: 100%;"> <span>2 2 0 2</span> <span>9 2 9 4</span> </div>	
<b>DAMAGE</b> <b>DAMAGE SCALE</b> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 1 - NONE  2 - MINOR DAMAGE  3 - FUNCTIONAL DAMAGE  4 - DISABLING DAMAGE  9 - UNKNOWN </div> <div style="width: 45%;"> 3 - FUNCTIONAL DAMAGE  4 - DISABLING DAMAGE  9 - UNKNOWN </div> </div>	
<b>DAMAGED AREA(S)</b> INDICATE ALL THAT APPLY	
<div style="display: grid; grid-template-columns: 1fr 1fr; gap: 20px;">           </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> - NO DAMAGE [ 0 ] <input type="checkbox"/> - UNDERCARRIAGE [ 14 ] <input type="checkbox"/> - TOP [ 13 ] <input type="checkbox"/> - ALL AREAS [ 15 ] </div> <div style="text-align: center; margin-top: 10px;"> <input checked="" type="checkbox"/> - UNIT NOT AT SCENE [ 16 ] </div>	
<b>INITIAL POINT OF CONTACT</b> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 0 - NO DAMAGE  1-12 - REFER TO UNIT DIAGRAM  13 - TOP </div> <div style="width: 45%;"> 14 - UNDERCARRIAGE  15 - VEHICLE NOT AT SCENE  99 - UNKNOWN </div> </div>	
<b>TRAFFIC</b>	
<b>TRAFFICWAY FLOW</b> 1 - ONE-WAY 2 - TWO-WAY	<b>TRAFFIC CONTROL</b> 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL
<b># OF THROUGH LANES ON ROAD</b>	<b>RAIL GRADE CROSSING</b> 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
<b>UNIT / NON-MOTORIST DIRECTION</b> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> FROM 2 TO 1 </div> <div style="width: 45%;"> 1 - NORTH  2 - SOUTH  3 - EAST  4 - WEST  5 - NORTHEAST  6 - NORTHWEST  7 - SOUTHEAST  8 - SOUTHWEST  9 - OTHER / UNKNOWN </div> </div>	
<b>UNIT SPEED</b>	<b>DETECTED SPEED</b> 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
<b>POSTED SPEED</b>	

OWNER		LOCAL REPORT NUMBER	
UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER)	2 2 0 2 9 2 9 4	
0 2			
OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)		DAMAGE	
		DAMAGE SCALE	
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		1 - NONE 3 - FUNCTIONAL DAMAGE	
		2 - MINOR DAMAGE 4 - DISABLING DAMAGE	
COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		9 - UNKNOWN	
		DAMAGED AREA(S) INDICATE ALL THAT APPLY	
LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	
OH	GFQ 3397	1N4A124E48C288621	
INSURANCE VERIFIED	INSURANCE COMPANY	VEHICLE YEAR	VEHICLE MAKE
X	Safeco	2008	Nissan
TYPE OF USE		COLOR	VEHICLE MODEL
COMMERCIAL	GOVERNMENT	Gray	Altima
IN EMERGENCY RESPONSE		TOWED BY: COMPANY NAME	
INTERLOCK DEVICE EQUIPPED	HIT/SKIP UNIT	HAZARDOUS MATERIAL	
		CLASS # PLACARD ID #	
#OCCUPANTS		MATERIAL RELEASED	
0 1		PLACARD	
VEHICLE WEIGHT GVWR/GCWR			
1 - <10K LBS.			
2 - 10,001 - 26K LBS.			
3 - >26K LBS.			
UNIT TYPE		18 - LIMO (LIVERY VEHICLE)	
1 - PASSENGER CAR		23 - PEDESTRIAN / SKATER	
2 - PASSENGER VAN (MINIVAN)		24 - WHEELCHAIR (ANY TYPE)	
3 - SPORT UTILITY VEHICLE		25 - OTHER NON-MOTORIST	
4 - PICK UP		26 - BICYCLE	
5 - CARGO VAN		27 - TRAIN	
6 - VAN (9-15 SEATS)		99 - UNKNOWN OR HIT/SKIP	
# OF TRAILING UNITS			
0			
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		0 - NO AUTOMATION	
1 - YES 2 - NO 9 - OTHER / UNKNOWN		3 - CONDITIONAL AUTOMATION	
AUTONOMOUS MODE LEVEL		4 - HIGH AUTOMATION	
0		5 - FULL AUTOMATION	
SPECIAL FUNCTION		1 - NONE	
1 - NONE		6 - BUS - CHARTER/TOUR	
2 - TAXI		7 - BUS - INTERCITY	
3 - ELECTRONIC RIDE SHARING		8 - BUS - SHUTTLE	
4 - SCHOOL TRANSPORT		9 - BUS - OTHER	
5 - BUS - TRANSIT/COMMUTER		10 - AMBULANCE	
11 - FIRE		12 - MILITARY	
13 - POLICE		14 - PUBLIC UTILITY	
15 - CONSTRUCTION EQUIPMENT		20 - SAFETY SERVICE PATROL	
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 DEFECTS		1 - TURN SIGNALS	
2 - HEAD LAMPS		4 - BRAKES	
3 - TAIL LAMPS		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	
NON-MOTORIST LOCATION AT IMPACT		1 - INTERSECTION - MARKED CROSSWALK	
2 - INTERSECTION - UNMARKED CROSSWALK		3 - INTERSECTION - OTHER	
5 - TRAVEL LANE - OTHER LOCATION		6 - BICYCLE LANE	
7 - SHOULDER / ROADSIDE		9 - MEDIAN/CROSSING ISLAND	
10 - DRIVEWAY ACCESS		12 - FIRST RESPONDER AT INCIDENT SCENE	
11 - SHARED USE PATHS OR TRAILS		99 - OTHER / UNKNOWN	
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	
99 - OTHER / UNKNOWN		18 - APPROACHING OR LEAVING VEHICLE	
19 - STANDING		20 - OTHER NON-MOTORIST	
21 - STANDING OUTSIDE DISABLED VEHICLE		99 - OTHER / UNKNOWN	
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 PASSING	
10 - IMPROPER LANE CHANGE		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		24 - OTHER IMPROPER ACTION	
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			
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 - CULTVERT		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	
INITIAL POINT OF CONTACT		0 - NO DAMAGE	
1 - 12 - REFER TO UNIT DIAGRAM		14 - UNDERCARRIAGE	
13 - TOP		15 - VEHICLE NOT AT SCENE	
99 - UNKNOWN		99 - UNKNOWN	
TRAFFIC		TRAFFICWAY FLOW	
1 - ONE-WAY		2 - TWO-WAY	
# OF THROUGH LANES ON ROAD		2	
RAIL GRADE CROSSING		1 - NOT INVOLVED	
2 - INVOLVED-ACTIVE CROSSING		3 - INVOLVED-PASSIVE CROSSING	
UNIT / NON-MOTORIST DIRECTION		1 - NORTH	
2 - SOUTH		3 - EAST	
4 - WEST		5 - NORTHEAST	
6 - NORTHWEST		7 - SOUTHEAST	
8 - SOUTHWEST		9 - OTHER / UNKNOWN	
UNIT SPEED		1 0	
POSTED SPEED		2 5	
DETECTED SPEED		1 - STATED / ESTIMATED SPEED	
2 - CALCULATED / EDR		3 - UNDETERMINED	
FIRST HARMFUL EVENT		1	
MOST HARMFUL EVENT		1	



# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
2 2 0 2 9 2 9 4

UNIT # 0 1	NAME: LAST, FIRST, MIDDLE		DATE OF BIRTH		AGE 0	GENDER F				
ADDRESS: STREET, CITY, STATE, ZIP			CONTACT PHONE - INCLUDE AREA CODE							
INJURIES 4	INJURED TAKEN BY 1	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 9 9	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 5	EJECTION 4	TRAPPED 1	
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 9	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		CONDITION 9	ALCOHOL TEST STATUS TYPE VALUE 1 1 .		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4 1 1	

UNIT # 0 2	NAME: LAST, FIRST, MIDDLE Crouch, Robin		DATE OF BIRTH 0 2 0 4 1 9 4 5		AGE 7 7	GENDER F				
ADDRESS: STREET, CITY, STATE, ZIP 4654 River Rd, Fairfield, OH 45014			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 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1	
OL STATE O H	OPERATOR LICENSE NUMBER		OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER			
OL CLASS 4	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	

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 - TALKING ON HANDS-FREE COMMUNICATION DEVICE	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE
4 - POSSIBLE INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SIDE	4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE	4 - TEST GIVEN, RESULTS KNOWN
5 - NO APPARENT INJURY	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M/C MOPED ONLY	5 - EXCEPT CLASS A & CLASS B BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5 - TEST GIVEN, RESULTS UNKNOWN
INJURED TAKEN BY	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	7 - EXCEPT TRACTOR-TRAILER	6 - PASSENGER	ALCOHOL TEST TYPE
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION	OL ENDORSEMENT	8 - INTERMEDIATE LICENSE RESTRICTIONS	7 - OTHER DISTRACTION INSIDE THE VEHICLE	1 - NONE
2 - EMS	8 - THIRD - MIDDLE	1 - NOT EJECTED	H - HAZMAT	9 - LEARNER'S PERMIT RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	2 - BLOOD
3 - POLICE	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED	M - MOTORCYCLE	10 - LIMITED TO DAYLIGHT ONLY	9 - OTHER / UNKNOWN	3 - URINE
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED	P - PASSENGER	11 - LIMITED TO EMPLOYMENT	CONDITION	4 - BREATH
SAFETY EQUIPMENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE	N - TANKER	12 - LIMITED - OTHER	1 - APPARENTLY NORMAL	5 - OTHER
1 - NONE USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	TRAPPED	Q - MOTOR SCOOTER	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	2 - PHYSICAL IMPAIRMENT	DRUG TEST TYPE
2 - SHOULDER BELT ONLY USED	13 - TRAILING UNIT	1 - NOT TRAPPED	R - THREE-WHEEL MOTORCYCLE	14 - MILITARY VEHICLES ONLY	3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	1 - NONE
3 - LAP BELT ONLY USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2 - EXTRICATED BY MECHANICAL MEANS	S - SCHOOL BUS	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	4 - ILLNESS	2 - BLOOD
4 - SHOULDER & LAP BELT USED	15 - NON-MOTORIST	3 - FREED BY NON-MECHANICAL MEANS	T - DOUBLE & TRIPLE TRAILERS	16 - OUTSIDE MIRROR	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	3 - URINE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	99 - OTHER / UNKNOWN	GENDER	X - TANKER / HAZMAT	17 - PROSTHETIC AID	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	4 - OTHER
6 - CHILD RESTRAINT SYSTEM - REAR FACING		F - FEMALE		18 - OTHER	9 - OTHER / UNKNOWN	DRUG TEST RESULT(S)
7 - BOOSTER SEAT		M - MALE				1 - AMPHETAMINES
8 - HELMET USED		U - OTHER / UNKNOWN				2 - BARBITURATES
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						3 - BENZODIAZEPINES
10 - REFLECTIVE CLOTHING						4 - CANNABINOIDS
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						5 - COCAINE
99 - OTHER / UNKNOWN						6 - OPIATES / OPIOIDS
						7 - OTHER
						8 - NEGATIVE RESULTS

LOCAL REPORT NUMBER 22-029294	REPORTING AGENCY Fairfield Police Department	DATE OF ACCIDENT 4/26/22
IN COUNTY OF Butler	ACCIDENT LOCATION River Rd/Symmes Rd.	

Diagram illustrating the accident location at the intersection of River Rd and Symmes Rd. The diagram shows the road layout, including lanes and traffic flow directions. A north arrow is present, labeled "N", with the note "\* Not to Scale". The accident location is marked with a circle and labeled "unit 1". The diagram also shows a sign with the number "2" and the road names "Symmes Rd" and "River Rd".

OFFICER'S SIGNATURE Z. Shust	BADGE NO 146
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