



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

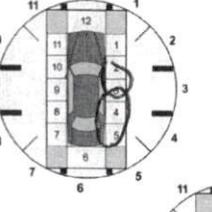
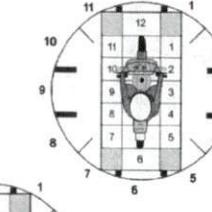
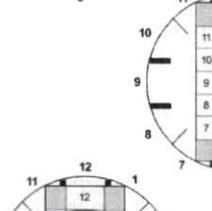
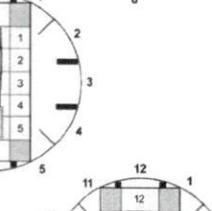
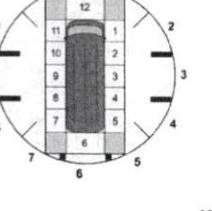
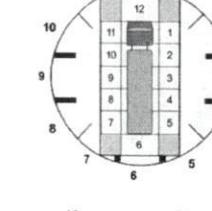
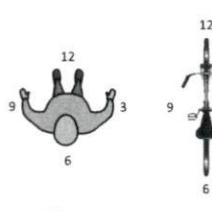
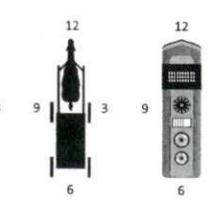
				LOCAL REPORT NUMBER*				
<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input checked="" type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION REPORTING AGENCY NAME* NCIC* Fairfield Police Department 0 0 9 0 1						
COUNTY* 0 9		LOCALITY* 1-CITY 1 2-VILLAGE 1 3-TOWNSHIP 1		LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield				
LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME River	ROAD TYPE R D	LATITUDE DECIMAL DEGREES 39 3 3 7 8 4 8		
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Nilles	ROAD TYPE R D	LONGITUDE DECIMAL DEGREES 84 5 6 8 4 7 5		
REFERENCE POINT 1-INTERSECTION 2-MILE POST 3-HOUSE #	DIRECTION FROM REFERENCE 1-NORTH 2-SOUTH 3-EAST 4-WEST	ROUTE TYPE IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE	ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS	ROAD TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE	INTERSECTION RELATED <input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA			
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE 1-MILES 2-FEET 3-YARDS	ROUTE TYPE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION 2 - BETWEEN 3 - TWO MOTOR VEHICLES IN TRANSPORT 4 - REAR-END 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - HEAD-ON 10 - OTHER / UNKNOWN		DIRECTION OF TRAVEL 1-NORTH 2-SOUTH 3-EAST 4-WEST	NUMBER OF APPROACHES 0 4		
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 9 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED USE PATHS OR TRAILS 13 - BIKE LANE 14 - TOLL BOOTH 99 - OTHER / UNKNOWN		MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION 2 - BETWEEN 3 - TWO MOTOR VEHICLES IN TRANSPORT 4 - REAR-END 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - HEAD-ON 10 - OTHER / UNKNOWN		DIRECTION OF TRAVEL 1-NORTH 2-SOUTH 3-EAST 4-WEST	MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (24 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		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	CONDITIONS 1	SURFACE 2	
LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN		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		CONTOUR 9 - OTHER/UNKNOWN	CONDITIONS 1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN	SURFACE 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN		
NARRATIVE On 4/26/2022 at about 5:34 p.m. Unit 1 was traveling east on River Rd. and when at River Rd. attempted to turn left to travel north and in so doing, failed to yield the right of way to oncoming traffic and collided with Unit 2 which was traveling west on Nilles Rd.								
See OH-2								
CRASH REPORTED DATE / TIME 0 4 2 6 2 0 2 2 1 7 3 4				DISPATCH DATE / TIME 0 4 2 6 2 0 2 2 1 7 3 5		ARRIVAL DATE / TIME 0 4 2 6 2 0 2 2 1 7 4 0	SCENE CLEARED DATE / TIME 0 4 2 6 2 0 2 2 1 8 1 6	REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST
TOTAL TIME ROADWAY CLOSED 0 0 0		OTHER INVESTIGATION TIME 0 3 0		TOTAL MINUTES 0 7 1	OFFICER'S NAME* D. Gooch		CHECKED BY OFFICER'S NAME <i>Sgt. C. Gooch</i>	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOS)
					OFFICER'S BADGE NUMBER* 1 6 0		CHECKED BY OFFICER'S BADGE NUMBER 1 1 8	



UNIT

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (<input checked="" type="checkbox"/> SAME AS DRIVER)		OWNER PHONE: INCLUDE AREA CODE (<input checked="" type="checkbox"/> SAME AS DRIVER)					
0 1								
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	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR					
O H	JEC3739	2G61W5S80E9131702	2014					
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	VEHICLE MAKE					
	Liberty Mutual	AOV281925751-4016	Cadillac					
TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME					
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	Marcells					
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS	HAZARDOUS MATERIAL					
0 1		0 1	<input type="checkbox"/> MATERIAL RELEASED	CLASS #	PLACARD ID #			
			<input type="checkbox"/> PLACARD					
UNIT TYPE		VEHICLE WEIGHT GVWR/GCWR						
0 1	1 - PASSENGER CAR	1 - <10K LBS.	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER				
3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED	2 - 10,001 - 26K LBS.	19 - BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)				
4 - PICK UP	9 - AUTOCYCLE	3 - >26K LBS.	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST				
5 - CARGO VAN	10 - MOPED OR MOTORIZED		21 - HEAVY EQUIPMENT	26 - BICYCLE				
6 - VAN (9-15 SEATS)	BICYCLE		22 - ANIMAL WITH RIDER OR	27 - TRAIN				
	11 - ALL-TERRAIN VEHICLE (ATV / UTV)		17 - MOTORHOME	28 - ANIMAL DRAWN VEHICLE				
0 0	# OF TRAILING UNITS		29 - UNKNOWN OR HIT/SKIP					
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?				0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN		
0 2	1 - YES	2 - NO	9 - OTHER / UNKNOWN	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION			
	AUTONOMOUS MODE LEVEL			2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION			
SPECIAL FUNCTION				1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE		
0 1	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	16 - FARM	21 - MAIL CARRIER			
3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE	17 - MOWING	99 - OTHER / UNKNOWN				
4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	18 - SNOW REMOVAL					
5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIPMENT	19 - TOWING					
CARGO BODY TYPE				1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE	12 - CONCRETE MIXER
0 1	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	9 - CARGO TANK	13 - AUTO TRANSPORTER			
			7 - GRAIN/CHIPS/GRAVEL	10 - FLAT BED	14 - GARBAGE/REFUSE			
				11 - DUMP	99 - OTHER / UNKNOWN			
VEHICLE DEFECTS				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 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER
0 1	2 - INTERSECTION - UNMARKED CROSSWALK	4 - MIDBLOCK - MARKED	7 - SHOULDER / ROADSIDE	10 - DRIVEWAY ACCESS	AT INCIDENT SCENE			
		5 - TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN			
ACTION				1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE
0 4	2 - NON-COLLISION	2 - BACKING	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19 - STANDING			
3 - STRIKING	0 6	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	10 - PARKED	20 - OTHER NON-MOTORIST			
4 - STRUCK	PRE-CRASH ACTIONS	4 - OVERTAKING/PASSING	11 - SLOWING OR STOPPED IN TRAFFIC	15 - WALKING, RUNNING, JOGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE			
5 - BOTH STRIKING & STRUCK		5 - MAKING RIGHT TURN	12 - MAKING LEFT TURN	16 - WORKING	17 - PUSHING VEHICLE			
9 - OTHER / UNKNOWN					99 - OTHER / UNKNOWN			
CONTRIBUTING CIRCUMSTANCES				1 - NONE	7 - LEFT OF CENTER	13 - IMPROPER START FROM A PARKED POSITION	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY
0 2	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	10 - IMPROPER PASSING	15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLING/SPILLING	23 - OPENING DOOR INTO ROADWAY			
4 - RAN STOP SIGN	11 - DROVE OFF ROAD	12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION			
5 - UNSAFE SPEED								
6 - IMPROPER TURN								
SEQUENCE OF EVENTS								
NON-COLLISION								
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	12 - DOWNHILL RUNAWAY	17 - ANIMAL - FARM				
	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION	18 - ANIMAL - DEER				
2 1	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN	19 - ANIMAL - OTHER				
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	15 - PEDALCYCLE	20 - MOTOR VEHICLE IN TRANSPORT				
				21 - PARKED MOTOR VEHICLE				
4 1	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				
5 1	27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	39 - LIGHT / LUMINARIES	45 - EMBANKMENT	51 - WALL			
	28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL	40 - UTILITY POLE	46 - FENCE	52 - BUILDING			
6 1	29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX	53 - TUNNEL			
	30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	48 - TREE	54 - OTHER FIXED OBJECT			
1	FIRST HARMFUL EVENT	1	MOST HARMFUL EVENT	49 - FIRE HYDRANT	99 - OTHER / UNKNOWN			

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

OWNER

VEHICLE

EVENT(S)

1

FIRST HARMFUL EVENT

1 MOST HARMFUL EVENT

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER		OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER		
0 2	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	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR		
O H	HENRY JR	1 G K D T 1 3 S 2 3 2 3 8 0 1 8 9	2 0 0 3		
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR		
	State Farm	8292631-D28-35A	Gray		
TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME		
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	Waynes		
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS	HAZARDOUS MATERIAL		
0 3		0 2	<input type="checkbox"/> MATERIAL RELEASED	CLASS #	PLACARD ID #
<input type="checkbox"/> PLACARD					
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 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 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 28 - ANIMAL DRAWN VEHICLE 29 - UNKNOWN OR HIT/SKIP					
UNIT TYPE		# OF TRAILING UNITS			
0 0					
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		AUTONOMOUS MODE LEVEL			
0 2		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN			
0 1		1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER			
SPECIAL FUNCTION		6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE			
0 1		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			
CARGO BODY TYPE		1 - NO CARGO BODY TYPE /NOT APPLICABLE 2 - BUS			
0 1		3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL			
0 1		8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP			
0 1		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			
0 1		11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER AT INCIDENT SCENE 13 - MEDIAN/CROSSING ISLAND 14 - DRIVEWAY ACCESS 15 - SHARED USE PATHS OR TRAILS 16 - OTHER / UNKNOWN			
0 3		1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK 3 - STRIKING 0 1 3 - CHANGING LANES 4 - STRIKING 0 1 4 - MIDBLOCK - MARKED CROSSWALK 5 - BOTH STRIKING & STRUCK 4 - OVERTAKING/PASSING ACTIONS 6 - MAKING LEFT TURN 7 - TURN SIGNALS 8 - HEAD LAMPS 9 - TAIL LAMPS 10 - RAN RED LIGHT 11 - RAN STOP SIGN 12 - UNSAFE SPEED 13 - IMPROPER TURN			
0 1		14 - LEAVING TRAFFIC LANE 15 - PARKED 16 - SLOWING OR STOPPED IN TRAFFIC 17 - DRIVINGLESS 18 - ENTERING TRAFFIC LANE 19 - PARKED POSITION 20 - DRIVINGLESS 21 - NEUTRAL POSITION 22 - DRIVINGLESS 23 - DRIVINGLESS 24 - DRIVINGLESS			
0 1		25 - NEUTRAL POSITION 26 - DRIVINGLESS 27 - DRIVINGLESS 28 - DRIVINGLESS 29 - DRIVINGLESS 30 - DRIVINGLESS			
0 1		31 - NEUTRAL POSITION 32 - DRIVINGLESS 33 - DRIVINGLESS 34 - DRIVINGLESS 35 - DRIVINGLESS 36 - DRIVINGLESS			
0 1		37 - NEUTRAL POSITION 38 - DRIVINGLESS 39 - NEUTRAL POSITION 40 - NEUTRAL POSITION 41 - NEUTRAL POSITION 42 - NEUTRAL POSITION			
0 1		43 - NEUTRAL POSITION 44 - NEUTRAL POSITION 45 - NEUTRAL POSITION 46 - NEUTRAL POSITION 47 - NEUTRAL POSITION 48 - NEUTRAL POSITION 49 - NEUTRAL POSITION			
0 1		50 - NEUTRAL POSITION 51 - NEUTRAL POSITION 52 - NEUTRAL POSITION 53 - NEUTRAL POSITION 54 - NEUTRAL POSITION 55 - NEUTRAL POSITION			
0 1		56 - NEUTRAL POSITION 57 - NEUTRAL POSITION 58 - NEUTRAL POSITION 59 - NEUTRAL POSITION 60 - NEUTRAL POSITION 61 - NEUTRAL POSITION			
0 1		62 - NEUTRAL POSITION 63 - NEUTRAL POSITION 64 - NEUTRAL POSITION 65 - NEUTRAL POSITION 66 - NEUTRAL POSITION 67 - NEUTRAL POSITION			
0 1		68 - NEUTRAL POSITION 69 - NEUTRAL POSITION 70 - NEUTRAL POSITION 71 - NEUTRAL POSITION 72 - NEUTRAL POSITION 73 - NEUTRAL POSITION			
0 1		74 - NEUTRAL POSITION 75 - NEUTRAL POSITION 76 - NEUTRAL POSITION 77 - NEUTRAL POSITION 78 - NEUTRAL POSITION 79 - NEUTRAL POSITION			
0 1		80 - NEUTRAL POSITION 81 - NEUTRAL POSITION 82 - NEUTRAL POSITION 83 - NEUTRAL POSITION 84 - NEUTRAL POSITION 85 - NEUTRAL POSITION			
0 1		86 - NEUTRAL POSITION 87 - NEUTRAL POSITION 88 - NEUTRAL POSITION 89 - NEUTRAL POSITION 90 - NEUTRAL POSITION 91 - NEUTRAL POSITION			
0 1		92 - NEUTRAL POSITION 93 - NEUTRAL POSITION 94 - NEUTRAL POSITION 95 - NEUTRAL POSITION 96 - NEUTRAL POSITION 97 - NEUTRAL POSITION			
0 1		98 - NEUTRAL POSITION 99 - NEUTRAL POSITION 100 - NEUTRAL POSITION 101 - NEUTRAL POSITION 102 - NEUTRAL POSITION 103 - NEUTRAL POSITION			
0 1		104 - NEUTRAL POSITION 105 - NEUTRAL POSITION 106 - NEUTRAL POSITION 107 - NEUTRAL POSITION 108 - NEUTRAL POSITION 109 - NEUTRAL POSITION			
0 1		110 - NEUTRAL POSITION 111 - NEUTRAL POSITION 112 - NEUTRAL POSITION 113 - NEUTRAL POSITION 114 - NEUTRAL POSITION 115 - NEUTRAL POSITION			
0 1		116 - NEUTRAL POSITION 117 - NEUTRAL POSITION 118 - NEUTRAL POSITION 119 - NEUTRAL POSITION 120 - NEUTRAL POSITION 121 - NEUTRAL POSITION			
0 1		122 - NEUTRAL POSITION 123 - NEUTRAL POSITION 124 - NEUTRAL POSITION 125 - NEUTRAL POSITION 126 - NEUTRAL POSITION 127 - NEUTRAL POSITION			
0 1		128 - NEUTRAL POSITION 129 - NEUTRAL POSITION 130 - NEUTRAL POSITION 131 - NEUTRAL POSITION 132 - NEUTRAL POSITION 133 - NEUTRAL POSITION			
0 1		134 - NEUTRAL POSITION 135 - NEUTRAL POSITION 136 - NEUTRAL POSITION 137 - NEUTRAL POSITION 138 - NEUTRAL POSITION 139 - NEUTRAL POSITION			
0 1		140 - NEUTRAL POSITION 141 - NEUTRAL POSITION 142 - NEUTRAL POSITION 143 - NEUTRAL POSITION 144 - NEUTRAL POSITION 145 - NEUTRAL POSITION			
0 1		146 - NEUTRAL POSITION 147 - NEUTRAL POSITION 148 - NEUTRAL POSITION 149 - NEUTRAL POSITION 150 - NEUTRAL POSITION 151 - NEUTRAL POSITION			
0 1		152 - NEUTRAL POSITION 153 - NEUTRAL POSITION 154 - NEUTRAL POSITION 155 - NEUTRAL POSITION 156 - NEUTRAL POSITION 157 - NEUTRAL POSITION			
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0 1		584 - NEUTRAL POSITION 585 - NEUTRAL POSITION 586 - NEUTRAL POSITION 587 - NEUTRAL POSITION 588 - NEUTRAL POSITION 589 - NEUTRAL POSITION			
0 1		590 - NEUTRAL POSITION 591 - NEUTRAL POSITION 592 - NEUTRAL POSITION 593 - NEUTRAL POSITION 594 - NEUTRAL POSITION 595 - NEUTRAL POSITION			
0 1		596 - NEUTRAL POSITION 597 - NEUTRAL POSITION 598 - NEUTRAL POSITION 599 - NEUTRAL POSITION 600 - NEUTRAL POSITION 601 - NEUTRAL POSITION			
0 1		602 - NEUTRAL POSITION 603 - NEUTRAL POSITION 604 - NEUTRAL POSITION 605 - NEUTRAL POSITION 606 - NEUTRAL POSITION 607 - NEUTRAL POSITION			
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0 1		626 - NEUTRAL POSITION 627 - NEUTRAL POSITION 628 - NEUTRAL POSITION 629 - NEUTRAL POSITION 630 - NEUTRAL POSITION 631 - NEUTRAL POSITION			
0 1		632 - NEUTRAL POSITION 633 - NEUTRAL POSITION 634 - NEUTRAL POSITION 635 - NEUTRAL POSITION 636 - NEUTRAL POSITION 637 - NEUTRAL POSITION			
0 1		638 - NEUTRAL POSITION 639 - NEUTRAL POSITION 640 - NEUTRAL POSITION 641 - NEUTRAL POSITION 642 - NEUTRAL POSITION 643 - NEUTRAL POSITION			
0 1		644 - NEUTRAL POSITION 645 - NEUTRAL POSITION 646 - NEUTRAL POSITION 647 - NEUTRAL POSITION 648 - NEUTRAL POSITION 649 - NEUTRAL POSITION			
0 1		650 - NEUTRAL POSITION 651 - NEUTRAL POSITION 652 - NEUTRAL POSITION 653 - NEUTRAL POSITION 654 - NEUTRAL POSITION 655 - NEUTRAL POSITION			
0 1		656 - NEUTRAL POSITION 657 - NEUTRAL POSITION 658 - NEUTRAL POSITION 659 - NEUTRAL POSITION 660 - NEUTRAL POSITION 661 - NEUTRAL POSITION			
0 1		662 - NEUTRAL POSITION 663 - NEUTRAL POSITION 664 - NEUTRAL POSITION 665 - NEUTRAL POSITION 666 - NEUTRAL POSITION 667 - NEUTRAL POSITION			
0 1		668 - NEUTRAL POSITION 669 - NEUTRAL POSITION 670 - NEUTRAL POSITION 671 - NEUTRAL POSITION 672 - NEUTRAL POSITION 673 - NEUTRAL POSITION			
0 1		674 - NEUTRAL POSITION 675 - NEUTRAL POSITION 676 - NEUTRAL POSITION 677 - NEUTRAL POSITION 678 - NEUTRAL POSITION 679 - NEUTRAL POSITION			
0 1		680 - NEUTRAL POSITION 681 - NEUTRAL POSITION 682 - NEUTRAL POSITION 683 - NEUTRAL POSITION 684 - NEUTRAL POSITION 685 - NEUTRAL POSITION			
0 1		686 - NEUTRAL POSITION 687 - NEUTRAL POSITION 688 - NEUTRAL POSITION 689 - NEUTRAL POSITION 690 - NEUTRAL POSITION 691 - NEUTRAL POSITION			

MOTORIST / Non-MOTORIST

MOTORIST / NON-MOTORIST	LOCAL REPORT NUMBER												
	2 2 0 2 9 4 2 8					DATE OF BIRTH		AGE	GENDER				
UNIT #	NAME: LAST, FIRST, MIDDLE												
0 1	Fails, Gregory, K												
ADDRESS: STREET, CITY, STATE, ZIP													
1125 Arbor Springs Dr., Hamilton, OH, 45013													
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET			SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5						0 4				0 1	3	1	1
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER			
O H				331.17a		X	Fail to Yield Turning L			250695			
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	1	1	1	1	1	1	
UNIT #	NAME: LAST, FIRST, MIDDLE												
0 2	Walker, Henry												
ADDRESS: STREET, CITY, STATE, ZIP													
250 Hanover St., Hamilton, OH, 45011													
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET			SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5						0 4				0 1	2	1	1
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER			
O H													
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	1	1	1	1	1	1	
UNIT #	NAME: LAST, FIRST, MIDDLE												
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	DOT-COMPLIANT MC HELMET			SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION			CITATION NUMBER			
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST			DRUG TEST(S)		
					<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA							
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)		2-TEST REFUSED	
3-SUSPECTED MINOR INJURY		3-FRONT - RIGHT SIDE		3-DEPLOYED SIDE		3-CLASS C		3-CORRECTIVE LENSES		3-TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		3-TEST GIVEN, RESULTS KNOWN	
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 UNKNOWN	
5-NO APPARENT INJURY		5-SECOND - MIDDLE		5-NOT APPLICABLE		5-M/C MOPED ONLY		5-EXCEPT CLASS A 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 DL		6-EXCEPT CLASS A & CLASS B BUS		6-PASSENGER		6-BLOOD	
1-NOT TRANSPORTED /TREATED AT SCENE		7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		1-NOT EJECTED		H-HAZMAT		7-EXCEPT TRACTOR-TRAILER		7-OTHER DISTRACTION INSIDE THE VEHICLE		7-URINE	
2-EMS		8-THIRD - MIDDLE		2-PARTIALLY EJECTED		M-MOTORCYCLE		8-INTERMEDIATE LICENSE RESTRICTIONS		8-OTHER DISTRACTION OUTSIDE THE VEHICLE		8-BREATH	
3-POLICE		9-THIRD - RIGHT SIDE		3-TOTALLY EJECTED		P-PASSENGER		9-LEARNER'S PERMIT RESTRICTIONS		9-OTHER / UNKNOWN		5-OTHER	
9-OTHER / UNKNOWN		10-SLEEPER SECTION OF TRUCK CAB		4-NOT APPLICABLE		N-TANKER		10-LIMITED TO DAYLIGHT ONLY					
SAFETY EQUIPMENT		11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		TRAPPED		Q-MOTOR SCOOTER		11-LIMITED TO EMPLOYMENT					
1-NONE USED		12-PASSENGER IN UNENCLOSED CARGO AREA		1-NOT TRAPPED		R-THREE-WHEEL MOTORCYCLE		12-LIMITED - OTHER					
2-SHOULDER BELT ONLY USED		13-TRAILING UNIT		2-EXTRICATED BY MECHANICAL MEANS		S-SCHOOL BUS		13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)					
3-LAP BELT ONLY USED		14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		3-FREED BY NON-MECHANICAL MEANS		T-DOUBLE & TRIPLE TRAILERS		14-MILITARY VEHICLES ONLY					
4-SHOULDER & LAP BELT USED		15-NON-MOTORIST				X-TANKER / HAZMAT		15-MOTOR VEHICLES WITHOUT AIR BRAKES					
5-CHILD RESTRAINT SYSTEM - FORWARD FACING		99-OTHER / UNKNOWN						16-OUTSIDE MIRROR					
6-CHILD RESTRAINT SYSTEM - REAR FACING								17-PROSTHETIC AID					
7-BOOSTER SEAT								18-OTHER					
8-HELMET USED													
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)													
10-REFLECTIVE CLOTHING													
11-LIGHTING - PEDESTRIAN / BICYCLE ONLY													
99-OTHER / UNKNOWN													
CONTACT PHONE - INCLUDE AREA CODE													



OCCUPANT / WITNESS ADDENDUM

		LOCAL REPORT NUMBER									
		2 2 0 2 9 4 2 8					DATE OF BIRTH		AGE	GENDER	
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE 2 Walker, Henry					0 7 0 7 1 9 4 0		81	M	
	ADDRESS: STREET, CITY, STATE, ZIP 250 Hanover St., Hamilton, OH, 45011					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES 4		INJURED TAKEN BY 2	EMS AGENCY (NAME) Fairfield EMS	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) Mercy Hospital	SAFETY EQUIPMENT USED 0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET		SEATING POSITION 0 3	AIR BAG USAGE 0 3	EJECTION 1	TRAPPED 1
OCCUPANT	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
OCCUPANT	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
OCCUPANT	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
OCCUPANT	INJURIES		SAFETY EQUIPMENT USED		SEATING POSITION		AIR BAG USAGE				
	1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY		1 - NONE USED - VEHICLE OCCUPANT 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 99 - OTHER / UNKNOWN		1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN				
INJURED TAKEN BY		1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN		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 EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE					
GENDER		F - FEMALE M - MALE U - OTHER / UNKNOWN		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 TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS					
WITNESS	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH		AGE 0	GENDER		
	ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
WITNESS	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH		AGE 0	GENDER		
	ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
WITNESS	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH		AGE 0	GENDER		
	ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					

OHIO TRAFFIC ACCIDENT - DIAGRAM / NARRATIVE CONTINUATION

OH-2 (Rev. 1/82)

LOCAL REPORT NUMBER	22027428	REPORTING AGENCY	Fairfield Police Department	DATE OF ACCIDENT
IN COUNTY OF	Butler	ACCIDENT LOCATION	River Rd. and Nilles Rd.	
<p>RIVER RD</p> <p>5200</p> <p>RIVER RD</p> <p>NILLES RD</p> <p>SOUTHGATE BND</p> <p>N</p>				
		OFFICER'S SIGNATURE	D. Gooch	BADGE NO.
				160