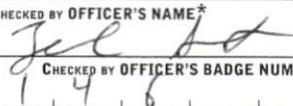


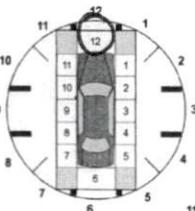
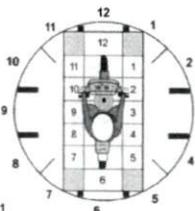
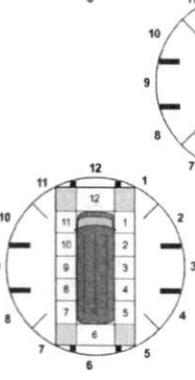
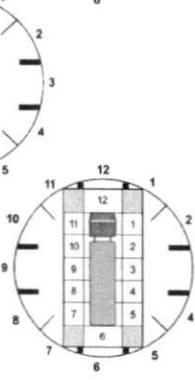
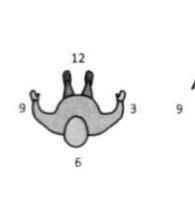
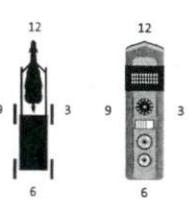
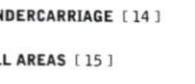
TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<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		LOCAL REPORT NUMBER*			
		REPORTING AGENCY NAME* Fairfield Police Department		NCIC*	2 2 0 3 3 5 6 2	UNIT IN ERROR 98-ANIMAL 0 1 99-UNKNOWN	
ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME Mack	ROAD TYPE R D	LATITUDE DECIMAL DEGREES 39° 31' 10.008	CRASH DATE / TIME* 04 28 2022 11:00	
ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 3000	ROAD TYPE	LONGITUDE DECIMAL DEGREES -84° 51' 8.689	CRASH SEVERITY 5 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY	
REFERENCE POINT 1-INTERSECTION 3-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 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 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 ROADWAY <input type="checkbox"/> ROADWAY DIVIDED			
LOCATION OF FIRST HARMFUL EVENT 0 1 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	MANNER OF CRASH COLLISION/IMPACT 2 1-NOT COLLISION 2-TWO MOTOR VEHICLES IN TRANSPORT 3-REAR-END 4-HEAD-ON	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 2	CONDITIONS 1-DRY 2-WET 3-SNOW 4-ICE 9-OTHER/UNKNOWN	SURFACE 2 1-CONCRETE 2-BLACKTOP, BITUMINOUS, ASPHALT 3-BRICK/BLOCK 4-SLAG, GRAVEL, STONE 5-DIRT 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	WEATHER 0 1 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	9-OTHER/UNKNOWN	SEE OH 2	Indicate the north direction with an "N" on the compass diagram. 		
NARRATIVE On 4/28/22 at about 11:00 a.m. Unit 1 was traveling westbound on Mack Rd. and when at 3000 Mack Rd. failed to stop within assured clear distance, striking Unit 2 which was slowing for traffic.							
CRASH REPORTED DATE / TIME 0 5 1 2 2 0 2 2 1 7 5 5		DISPATCH DATE / TIME 0 5 1 2 2 0 2 2 1 7 5 6		ARRIVAL DATE / TIME 0 5 1 2 2 0 2 2 1 7 5 6	SCENE CLEARED DATE / TIME 0 5 1 2 2 0 2 2 1 8 0 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 OOPS)	
TOTAL TIME ROADWAY CLOSED 0	OTHER INVESTIGATION TIME 4 5	TOTAL MINUTES 5 7	OFFICER'S NAME* J. Sons	CHECKED BY OFFICER'S NAME*  1 4 6		OFFICER'S BADGE NUMBER* 1 5 0	CHECKED BY OFFICER'S BADGE NUMBER* 1 4 6

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (<input type="checkbox"/> SAME AS DRIVER)		OWNER PHONE: INCLUDE AREA CODE (<input checked="" type="checkbox"/> SAME AS DRIVER)
0 1	Lopez, Laura		
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	JFZ8729	5J6YH18544L011308	2004
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR
			Black
TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR
		0 1	1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.
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 ANIMAL-DRAWN VEHICLE		23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN	
28 - UNKNOWN OR HIT/SKIP			
# OF TRAILING UNITS			
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION
2	1 - YES 2 - NO 9 - OTHER / UNKNOWN	0	AUTONOMOUS MODE LEVEL
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 22 - OTHER / UNKNOWN			
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
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		8 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE / REFUSE 15 - CONSTRUCTION EQUIPMENT
1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT	16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL
1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		11 - SHARED USE PATHS OR TRAILS	21 - PEDESTRIAN / SKATER 22 - WHEELCHAIR (ANY TYPE) 23 - OTHER NON-MOTORIST 24 - BICYCLE 25 - TRAIN
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
1 - NON-CONTACT 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN		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 22 - LYING IN ROADWAY
1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN		18 - OPERATING DEFECTIVE EQUIPMENT 19 - SWERVING TO AVOID 20 - IMPROPER CROSSING	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 24 - OTHER IMPROPER ACTION
1 - OVERTURN / ROLLOVER 2 - FIRE / EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT		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
1 - OVERTURN / ROLLOVER 2 - FIRE / EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT		16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT	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			
1 - IMPACT ATTENUATOR / CRASH CUSHION 2 - BRIDGE OVERHEAD STRUCTURE 3 - BRIDGE PIER OR ABUTMENT 4 - BRIDGE PARAPET 5 - BRIDGE RAIL 6 - 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
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 55 - OTHER / UNKNOWN
1 - FIRST HARMFUL EVENT		1 - MOST HARMFUL EVENT	

LOCAL REPORT NUMBER	
2 2 0 3 3 5 6 2	
DAMAGE	
2	DAMAGE SCALE 1 - NONE 2 - MINOR DAMAGE 3 - FUNCTIONAL 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	
1 2	0 - NO DAMAGE 1 - 12 - REFER TO UNIT DIAGRAM 13 - TOP
TRAFFIC	
TRAFFIC FLOW	TRAFFIC CONTROL
2	1 - ONE-WAY 2 - TWO-WAY
6	1 - ROUNDABOUT 2 - SIGNAL 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	
3	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
UNIT SPEED	DETECTED SPEED
3	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED	
3 5	



UNIT

OWNER	UNIT # 0 1 2	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 O H	LICENSE PLATE # JSC6704	VEHICLE IDENTIFICATION # 3 G N D A 5 1 3 P 2 8 S 6 3 9 6 1 2	VEHICLE YEAR 2 0 0 8	
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY Root	INSURANCE POLICY # 4JGRKF	COLOR Gray	
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	HIT/SKIP UNIT	#OCCUPANTS 0 2	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		CLASS # PLACARD ID #		
UNIT TYPE 1 0 1 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE	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 1 0 1 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	21 - MAIL CARRIER 99 - OTHER / UNKNOWN 22 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN
CARGO BODY TYPE 1 0 1	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
VEHICLE DEFECTS 1 0 1	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 0 1 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 1 0 1 4 - STRUCK 5 - BOTH STRIKING & STRUCK	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 7 - TURNING 8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	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 0 1 5 - UNSAFE SPEED 6 - IMPROPER TURN	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN	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
SEQUENCE OF EVENTS				
1 0 1	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	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
2 1 1	4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT
3 1 1	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	42 - CULVERT	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN
1	FIRST HARMFUL EVENT	1	MOST HARMFUL EVENT	

LOCAL REPORT NUMBER												
2	2	0	3	3	5	6	2					
DAMAGE												
DAMAGE SCALE												
2		1 - NONE			3 - FUNCTIONAL DAMAGE			4 - DISABLING DAMAGE			9 - UNKNOWN	
DAMAGED AREA(S) INDICATE ALL THAT APPLY												
						<img alt="Diagram of a vehicle showing damage to the rear right side (



MOTORIST / Non-MOTORIST

										LOCAL REPORT NUMBER																										
										2 2 0 3 3 5 6 2			DATE OF BIRTH		AGE		GENDER																			
MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE Perez Cerecero, Francisco									0 9 1 8 1 9 8 8		3 3		M																					
	ADDRESS: STREET, CITY, STATE, ZIP 12 Bellbrook Ct. Apt A, Fairfield, Oh 45014										CONTACT PHONE - INCLUDE AREA CODE																									
	INJURIES	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																		
	5																																			
	OL STATE	OPERATOR LICENSE NUMBER				OFFENSE CHARGED			LOCAL CODE		OFFENSE DESCRIPTION			CITATION NUMBER																						
	O H																																			
	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY	1	ALCOHOL / DRUG SUSPECTED			CONDITION	1	<input type="checkbox"/> ALCOHOL TEST STATUS	1	TYPE	1	RESULT	DRUG TEST(S) SELECT UP TO 4																		
	4							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA																											
								<input type="checkbox"/> OTHER DRUG																												
	UNIT #	NAME: LAST, FIRST, MIDDLE Webb, Hillery									DATE OF BIRTH		0 4 1 0 1 9 5 2		AGE		7 0		M																	
ADDRESS: STREET, CITY, STATE, ZIP 59 Lakeside Dr. Hamilton, Oh 45013										CONTACT PHONE - INCLUDE AREA CODE																										
INJURIES	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																			
5																																				
OL STATE	OPERATOR LICENSE NUMBER				OFFENSE CHARGED			LOCAL CODE		OFFENSE DESCRIPTION			CITATION NUMBER																							
O H																																				
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY	1	ALCOHOL / DRUG SUSPECTED			CONDITION	1	<input type="checkbox"/> ALCOHOL TEST STATUS	1	TYPE	1	RESULT	DRUG TEST(S) SELECT UP TO 4																			
4							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA																												
							<input type="checkbox"/> OTHER DRUG																													
UNIT #	NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH		0		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		OFFENSE DESCRIPTION			CITATION NUMBER																							
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3			DRIVER DISTRACTED BY	1	ALCOHOL / DRUG SUSPECTED			CONDITION	1	<input type="checkbox"/> ALCOHOL TEST STATUS	1	TYPE	1	RESULT	DRUG TEST(S) SELECT UP TO 4																			
							<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA																												
							<input type="checkbox"/> OTHER DRUG																													
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 2 - DEPLOYED FRONT		1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN		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																									
2 - SUSPECTED SERIOUS INJURY	2 - FRONT - MIDDLE		3 - FRONT - RIGHT SIDE		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		5 - M/C MOPED ONLY		6 - NO VALID OL																											
3 - SUSPECTED MINOR INJURY	3 - FRONT - RIGHT SIDE		4 - SECOND - MIDDLE		5 - SECOND - MIDDLE		6 - SECOND - RIGHT SIDE		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)																											
4 - POSSIBLE INJURY	4 - SECOND - MIDDLE		5 - SECOND - MIDDLE		6 - SECOND - RIGHT SIDE		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		8 - THIRD - MIDDLE																											
5 - NO APPARENT INJURY	5 - SECOND - MIDDLE		6 - SECOND - RIGHT SIDE		7 - THIRD - MIDDLE		8 - THIRD - MIDDLE		9 - THIRD - RIGHT SIDE																											
INJURED TAKEN BY	1 - NOT TRANSPORTED / TREATED AT SCENE		2 - EMS		3 - POLICE		4 - OTHER / UNKNOWN		10 - SLEEPER SECTION OF TRUCK CAB																											
1 - NOT TRANSPORTED / TREATED AT SCENE	2 - EMS		3 - POLICE		4 - OTHER / UNKNOWN		10 - SLEEPER SECTION OF TRUCK CAB																													
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													
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															
INJURED TAKEN BY	1 - NOT TRANSPORTED / TREATED AT SCENE		2 - EMS		3 - POLICE		4 - OTHER / UNKNOWN		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 TRANSPORTED / TREATED AT SCENE	2 - EMS		3 - POLICE		4 - OTHER / UNKNOWN		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																	
INJURIES	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		2 - FRONT - MIDDLE		3 - FRONT - RIGHT SIDE		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		5 - M/C MOPED ONLY		6 - NO VALID OL		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 - FATAL	2 - SUSPECTED SERIOUS INJURY		3 - SUSPECTED MINOR INJURY		4 - POSSIBLE INJURY		5 - NO APPARENT INJURY		6 - SECOND - MIDDLE		7 - THIRD - MIDDLE		8 - THIRD - RIGHT SIDE		9 - OTHER / UNKNOWN		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							
SEATING POSITION	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		2 - FRONT - MIDDLE		3 - FRONT - RIGHT SIDE		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		5 - M/C MOPED ONLY		6 - NO VALID OL		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 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	2 - FRONT - MIDDLE		3 - FRONT - RIGHT SIDE		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		5 - M/C MOPED ONLY		6 - NO VALID OL		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							
AIR BAG	1 - NOT DEPLOYED		2 - DEPLOYED FRONT		3 - DEPLOYED SIDE		4 - DEPLOYED BOTH FRONT / SIDE		5 - NOT APPLICABLE		6 - DEPLOYMENT UNKNOWN		7 - H - HAZMAT		8 - M - MOTORCYCLE		9 - P - PASSENGER		10 - N - TANKER		11 - Q - MOTOR SCOOTER		12 - R - THREE-WHEEL MOTORCYCLE		13 - S - SCHOOL BUS		14 - T - DOUBLE & TRIPLE TRAILERS		15 - X - TANKER / HAZMAT		16 - F - FEMALE		17 - M - MALE		18 - U - OTHER / UNKNOWN	
1 - NOT DEPLOYED	2 - DEPLOYED FRONT		3 - DEPLOYED SIDE		4 - DEPLOYED BOTH FRONT / SIDE		5 - NOT APPLICABLE		6 - DEPLOYMENT UNKNOWN		7 - H - HAZMAT		8 - M - MOTORCYCLE		9 - P - PASSENGER		10 - N - TANKER		11 - Q - MOTOR SCOOTER		12 - R - THREE-WHEEL MOTORCYCLE		13 - S - SCHOOL BUS		14 - T - DOUBLE & TRIPLE TRAILERS		15 - X - TANKER / HAZMAT		16 - F - FEMALE		17 - M - MALE		18 - U - OTHER / UNKNOWN			
OL CLASS	1 - CLASS A		2 - CLASS B		3 - CLASS C		4 - REGULAR CLASS (OHIO = D)		5 - M/C MOPED ONLY		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 - CLASS A	2 - CLASS B		3 - CLASS C		4 - REGULAR CLASS (OHIO = D)		5 - M/C MOPED ONLY		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			
OL RESTRICTION(S)	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 - 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			
DRIVER DISTRACTION	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		10 - NOT DISTRACTED		11 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		12 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		13 - TALKING ON HAND-HELD COMMUNICATION DEVICE		14 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		15 - PASSENGER		16 - OTHER DISTRACTION INSIDE THE VEHICLE		17 - OTHER DISTRACTION OUTSIDE THE VEHICLE		18 - OTHER / UNKNOWN	
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		10 - NOT DISTRACTED		11 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		12 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		13 - TALKING ON HAND-HELD COMMUNICATION DEVICE		14 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		15 - PASSENGER		16 - OTHER DISTRACTION INSIDE THE VEHICLE		17 - OTHER DISTRACTION OUTSIDE THE VEHICLE		18 - OTHER / UNKNOWN			
TEST STATUS	1 - NONE GIVEN		2 - TEST REFUSED		3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		4 - TEST GIVEN, RESULTS KNOWN		5 - TEST GIVEN, RESULTS UNKNOWN		6 - NOT DISTRACTED		7 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		8 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		9 - TALKING ON HAND-HELD COMMUNICATION DEVICE		10 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		11 - PASSENGER		12 - OTHER DISTRACTION INSIDE THE VEHICLE		13 - OTHER DISTRACTION OUTSIDE THE VEHICLE		14 - OTHER / UNKNOWN		15 - NOT DISTRACTED		16 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		17 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		18 - TALKING ON HAND-HELD COMMUNICATION DEVICE	
1 - NONE GIVEN	2 - TEST REFUSED		3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		4 - TEST GIVEN, RESULTS KNOWN		5 - TEST GIVEN, RESULTS UNKNOWN		6 - NOT DISTRACTED		7 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		8 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		9 - TALKING ON HAND-HELD COMMUNICATION DEVICE		10 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		11 - PASSENGER		12 - OTHER DISTRACTION INSIDE THE VEHICLE		13 - OTHER DISTRACTION OUTSIDE THE VEHICLE		14 - OTHER / UNKNOWN		15 - NOT DISTRACTED		16 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		17 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		18 - TALKING ON HAND-HELD COMMUNICATION DEVICE			
ALCOHOL TEST TYPE	1 - NONE		2 - BLOOD		3 - URINE		4 - BREATH		5 - OTHER		6 - NOT DISTRACTED		7 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		8 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		9 - TALKING ON HAND-HELD COMMUNICATION DEVICE		10 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		11 - PASSENGER		12 - OTHER DISTRACTION INSIDE THE VEHICLE		13 - OTHER DISTRACTION OUTSIDE THE VEHICLE		14 - OTHER / UNKNOWN		15 - NOT DISTRACTED		16 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		17 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		18 - TALKING ON HAND-HELD COMMUNICATION DEVICE	
1 - NONE	2 - BLOOD		3 - URINE		4 - BREATH		5 - OTHER		6 - NOT DISTRACTED		7 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		8 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		9 - TALKING ON HAND-HELD COMMUNICATION DEVICE		10 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		11 - PASSENGER		12 - OTHER DISTRACTION INSIDE THE VEHICLE		13 - OTHER DISTRACTION OUTSIDE THE VEHICLE		14 - OTHER / UNKNOWN		15 - NOT DISTRACTED		16 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		17 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		18 - TALKING ON HAND-HELD COMMUNICATION DEVICE			
DRUG TEST TYPE	1 - AMPHETAMINES		2 - BARBITURATES		3 - BENZODIAZEPINES		4 - CANNABINOID		5 - COCAINE		6 - OPIATES / OPIOIDS		7 - OTHER		8 - NEGATIVE RESULTS		9 - OTHER / UNKNOWN		10 - NOT DISTRACTED		11 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		12 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		13 - TALKING ON HAND-HELD COMMUNICATION DEVICE		14 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		15 - PASSENGER		16 - OTHER DISTRACTION INSIDE THE VEHICLE		17 - OTHER DISTRACTION OUTSIDE THE VEHICLE		18 - OTHER / UNKNOWN	
1 - AMPHETAMINES	2 - BARBITURATES		3 - BENZODIAZEPINES		4 - CANNABINOID		5 - COCAINE		6 - OPIATES / OPIOIDS		7 - OTHER		8 - NEGATIVE RESULTS		9 - OTHER / UNKNOWN		10 - NOT DISTRACTED		11 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		12 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		13 - TALKING ON HAND-HELD COMMUNICATION DEVICE		14 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		15 - PASSENGER		16 - OTHER DISTRACTION INSIDE THE VEHICLE		17 - OTHER DISTRACTION OUTSIDE THE VEHICLE		18 - OTHER / UNKNOWN			
CONDITION	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		7 - OTHER / UNKNOWN		8 - OTHER / UNKNOWN		9 - OTHER / UNKNOWN		10 - NOT DISTRACTED		11 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		12 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		13 - TALKING ON HAND-HELD COMMUNICATION DEVICE		14 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		15 - PASSENGER		16 - OTHER DISTRACTION INSIDE THE VEHICLE		17 - OTHER DISTRACTION OUTSIDE THE VEHICLE		18 - OTHER / UNKNOWN	
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		7 - OTHER / UNKNOWN		8 - OTHER / UNKNOWN		9 - OTHER / UNKNOWN		10 - NOT DISTRACTED		11 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		12 - TALKING ON HANDS-FREE COMMUNICATION DEVICE		13 - TALKING ON HAND-HELD COMMUNICATION DEVICE		14 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		15 - PASSENGER		16 - OTHER DISTRACTION INSIDE THE VEHICLE		17 - OTHER DISTRACTION OUTSIDE THE VEHICLE		18 - OTHER / UNKNOWN			
DRUG TEST RESULT(S)	1 - AMPHETAMINES		2 - BARBITURATES		3 - BENZODIAZEPINES		4 - CANNABINOID		5 - COCAINE		6 - OPIATES / OPIOIDS		7 - OTHER		8 - NEGATIVE RESULTS</td																					



OCCUPANT / WITNESS ADDENDUM

OCCUPANT						LOCAL REPORT NUMBER				
	UNIT #	NAME: LAST, FIRST, MIDDLE				2 2 0 3 3 5 6 2	DATE OF BIRTH	AGE	GENDER	
	2	Webb, Luke				1 2 1 8 1 9 9 1	3 0	M		
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
59 Lakeside Dr. Hamilton, Oh 45013										
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED					
	5				0 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH			AGE	GENDER
									0	
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
	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH			AGE	GENDER
									0	
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
	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH			AGE	GENDER
									0	
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
	INJURIES	SAFETY EQUIPMENT USED	SEATING POSITION	AIR BAG USAGE						
	1 - FATAL	1 - NONE USED - VEHICLE OCCUPANT	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED						
	2 - SUSPECTED SERIOUS INJURY	2 - SHOULDER BELT ONLY USED	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT						
	3 - SUSPECTED MINOR INJURY	3 - LAP BELT ONLY USED	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE						
	4 - POSSIBLE INJURY	4 - SHOULDER & LAP BELT USED	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT/SIDE						
	5 - NO APPARENT INJURY	5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	5 - SECOND - MIDDLE	5 - NOT APPLICABLE						
	INJURED TAKEN BY		6 - CHILD RESTRAINT SYSTEM - REAR FACING	6 - SECOND - RIGHT SIDE						
	1 - NOT TRANSPORTED /TREATED AT SCENE		7 - BOOSTER SEAT	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)						
	2 - EMS		8 - HELMET USED	8 - THIRD - MIDDLE						
	3 - POLICE		9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	9 - THIRD - RIGHT SIDE						
	9 - OTHER / UNKNOWN		10 - REFLECTIVE CLOTHING	10 - SLEEPER SECTION OF TRUCK CAB						
	GENDER		11 - LIGHTING - PEDESTRIAN /BICYCLE ONLY	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)						
	F - FEMALE		99 - OTHER / UNKNOWN	12 - PASSENGER IN UNENCLOSED CARGO AREA						
	M - MALE			13 - TRAILING UNIT						
	U - OTHER / UNKNOWN			14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)						
				15 - NON-MOTORIST						
				99 - OTHER / UNKNOWN						
	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH			AGE	GENDER
									0	
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH			AGE	GENDER
									0	
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH			AGE	GENDER
									0	
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					

OHIO TRAFFIC ACCIDENT - DIAGRAM / NARRATIVE CONTINUATION

OH-2 (Rev. 1/82)

LOCAL REPORT NUMBER	22-033562	REPORTING AGENCY	Fairfield Police Department	DATE OF ACCIDENT
IN COUNTY OF	Butler	ACCIDENT LOCATION	MACK RD / 3000 MACK RD	
<p>STOP SIGN</p> <p>→ PRIVATE DRIVE 3000 MACK RD</p> <p>2 1</p> <p>CLASS MEDIAN</p> <p>MACK RD</p> <p>NOT TO SCALE</p>				
		OFFICER'S SIGNATURE	J. SONS	BADGE NO. 150