



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	LOCAL INFORMATION				LOCAL REPORT NUMBER*			
<input type="checkbox"/> SECONDARY CRASH		<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME*				NCIC*			
		Fairfield Police Department				0 0 9 0 1	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR		
							1 - SOLVED	0 2	0 1		
							2 - UNSOLVED		98 - ANIMAL		
									99 - UNKNOWN		
COUNTY*		LOCALITY*		LOCATION: CITY, VILLAGE, TOWNSHIP*				CRASH DATE / TIME*		CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY	
0 9		1 - CITY 2 - VILLAGE 3 - TOWNSHIP		City of Fairfield				0 7 2 6 2 0 2 2 1 5 1 8			
ROUTE TYPE		ROUTE NUMBER		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		LOCATION ROAD NAME		ROAD TYPE	LATITUDE DECIMAL DEGREES		
						Union Center		B L	3 9 . 3 4 3 7 5 7		
ROUTE TYPE		ROUTE NUMBER		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)		ROAD TYPE	LONGITUDE DECIMAL DEGREES		
						Seward		R D	- 8 4 . 4 9 1 5 8 6		
REFERENCE POINT		DIRECTION FROM REFERENCE		ROUTE TYPE		ROAD TYPE		INTERSECTION RELATED			
1 - INTERSECTION 2 - MILE POST 3 - HOUSE #		1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE		AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS		HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE	<input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA		
DISTANCE FROM REFERENCE		DISTANCE UNIT OF MEASURE		CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE					NUMBER OF APPROACHES 4		
		1 - MILES 2 - FEET 3 - YARDS							ROADWAY		
LOCATION OF FIRST HARMFUL EVENT				MANNER OF CRASH COLLISION/IMPACT				DIRECTION OF TRAVEL	MEDIAN TYPE		
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		1 - NOT COLLISION 2 - BACKING 3 - TWO MOTOR VEHICLES IN TRANSPORT 4 - REAR-END 5 - HEAD-ON		4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN		1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	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		WORK ZONE TYPE		LOCATION OF CRASH IN WORK ZONE		CONTOUR	CONDITIONS	SURFACE	
<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		1 - BEFORE THE 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		1	1	2	
								1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/UNKNOWN	1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN	
LIGHT CONDITION				WEATHER							
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN				0 2 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					
NARRATIVE											
On 07/26/22 at 3:18 P.M. Unit 1 was traveling West on Union Center Blvd. and entered the turn lane to travel south on Seward Rd. Unit 2 is a semi truck/trailer and was traveling east on Symmes Rd. in the right lane to continue straight on Union Center Blvd. Unit 1 failed to yield to the right of way of Unit 2. Unit 2 struck Unit 1 on the back passenger side. Unit 1 spun out into a nearby field.											
See OH-2											
CRASH REPORTED DATE / TIME		DISPATCH DATE / TIME		ARRIVAL DATE / TIME		SCENE CLEARED DATE / TIME		REPORT TAKEN BY			
0 7 2 6 2 0 2 2 1 5 1 8		0 7 2 6 2 0 2 2 1 5 2 1		0 7 2 6 2 0 2 2 1 5 2 2		0 7 2 6 2 0 2 2 1 5 5 9		<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP)			
TOTAL TIME ROADWAY CLOSED		OTHER INVESTIGATION TIME		TOTAL MINUTES		OFFICER'S NAME*		CHECKED BY OFFICER'S NAME*			
						D. Miller		<i>S. Miller</i>			
						OFFICER'S BADGE NUMBER*		CHECKED BY OFFICER'S BADGE NUMBER*			
0		3 0		6 8		1 6 7		<i>B. Miller</i>			



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

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)				
VEHICLE	COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP			COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
	LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE	
O H	JEC1492	5NPD84LF0JH268388	2018	Hyundai		
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL		
	Safeco	K336035	Gray	Elantra		
TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME			
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	Marcell's			
<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	1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.			
0 1	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 99 - UNKNOWN OR HIT/SKIP		
0	# 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	9 - UNKNOWN		
0 1	1 - YES 2 - NO 9 - OTHER / UNKNOWN	AUTONOMOUS MODE LEVEL				
SPECIAL FUNCTION		1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 21 - MAIL CARRIER 99 - OTHER / UNKNOWN	
0 1	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
0 1	VEHICLE DEFECTS	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT	99 - OTHER / UNKNOWN
0 1	NON-MOTORIST LOCATION AT IMPACT	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN
0 2	ACTION	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN
0 2	CONTRIBUTING CIRCUMSTANCES	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/SPILLING 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION
SEQUENCE OF EVENTS						
1 2 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE	22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOBILE OBJECT	
4	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 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	FIRST HARMFUL EVENT					1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER	
2 2 0 5 3 4 2 4	DAMAGE
4	DAMAGE SCALE
1 - NONE	3 - FUNCTIONAL DAMAGE
2 - MINOR DAMAGE	4 - DISABLING DAMAGE
9 - UNKNOWN	
DAMAGED AREA(S) INDICATE ALL THAT APPLY	
<img alt="Diagram of a vehicle showing 12 numbered damage areas: 1 (front left), 2 (front center), 3 (front right), 4 (side left), 5 (side center), 6 (side right), 7 (rear left), 8 (rear center), 9 (rear right), 10 (top left), 11 (top center),	

OWNER

UNIT # **012** 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)

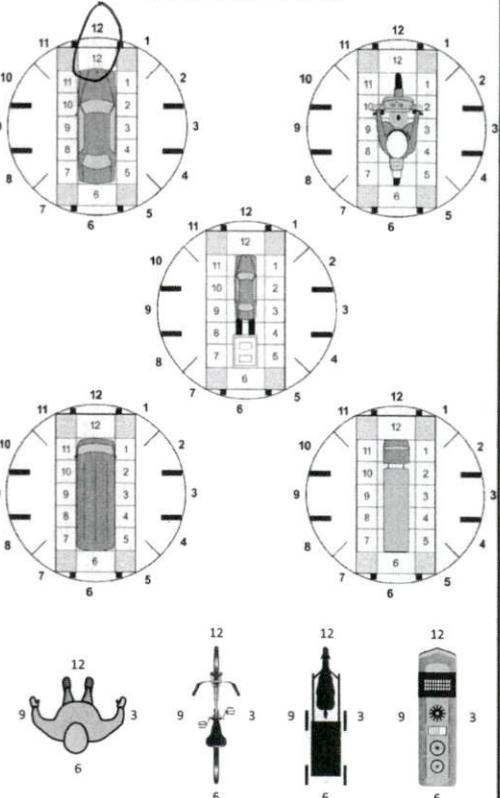
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

T-Force Freight, 3343 W Coliseum Blvd., Fort Wayne, IN 46808

LP STATE **I_N** LICENSE PLATE # **3177467** VEHICLE IDENTIFICATION # **4V4N39EG9FN927912** VEHICLE YEAR **2015** VEHICLE MAKE **Volvo**INSURANCE VERIFIED INSURANCE COMPANY **Liberty Mutual** INSURANCE POLICY # **016067969** COLOR **Green** VEHICLE MODEL **Semi**TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE
US DOT # **1 2 1 0 5 8**
INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS **0 1**
VEHICLE WEIGHT GVWR/GCWR
1 - <10K LBS.
2 - 10,001 - 26K LBS.
3 - >26K LBS.UNIT TYPE **1 5**
1 - PASSENGER CAR
2 - PASSENGER VAN (MINIVAN)
3 - SPORT UTILITY VEHICLE
4 - PICK UP
5 - CARGO VAN
6 - VAN (9-15 SEATS)
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 **1**WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?
2 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 - UNKNOWNSPECIAL FUNCTION **9 9**
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 / UNKNOWNCARGO BODY TYPE **9 9**
1 - NO CARGO BODY TYPE / NOT APPLICABLE
2 - BUS
3 - LOGGING
4 - VEHICLE TOWING ANOTHER MOTOR VEHICLE
5 - CARGO VAN / ENCLOSED BOX
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 / UNKNOWNVEHICLE DEFECTS
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
99 - OTHER / UNKNOWNNON-MOTORIST LOCATION AT IMPACT
1
1 - INTERSECTION - MARKED CROSSWALK
2 - INTERSECTION - UNMARKED CROSSWALK
3 - INTERSECTION - OTHER CROSSWALK
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
13 - STANDING
20 - OTHER NON-MOTORIST
21 - STANDING OUTSIDE DISABLED VEHICLE
99 - OTHER / UNKNOWNACTION **3**
1 - NON-CONTACT
2 - NON-COLLISION
3 - STRIKING **0 1**
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 A 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 / UNKNOWNCONTRIBUTING CIRCUMSTANCES
0 1
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 - OVERTURN / ROLLOVER
2 - FIRE / EXPLOSION
3 - IMMERSION
4 - JACKKNIFE
5 - CARGO / EQUIPMENT LOSS OR SHIFT
6 - EQUIPMENT FAILURE
7 - SEPARATION OF UNITS
8 - RAN OFF ROAD RIGHT
9 - RAN OFF ROAD LEFT
10 - CROSS MEDIAN
11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL
12 - DOWNHILL RUNAWAY
13 - OTHER NON-COLLISION
14 - PEDESTRIAN
15 - PEDALCYCLE
16 - RAILWAY VEHICLE
17 - ANIMAL - FARM
18 - ANIMAL - DEER
19 - ANIMAL - OTHER
20 - MOTOR VEHICLE IN TRANSPORT
21 - PARKED MOTOR VEHICLE
22 - WORK ZONE MAINTENANCE EQUIPMENT
23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
24 - OTHER MOBILE OBJECTCOLLISION WITH FIXED OBJECT **4**
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
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 / UNKNOWNFIRST HARMFUL EVENT **1** MOST HARMFUL EVENT **1**LOCAL REPORT NUMBER
2 2 0 5 3 4 2 4DAMAGE
DAMAGE SCALE
1 - NONE
2 - MINOR DAMAGE
3 - FUNCTIONAL DAMAGE
4 - DISABLING DAMAGE
9 - UNKNOWNDAMAGED AREA(S)
INDICATE ALL THAT APPLY - NO DAMAGE **0** - UNDERCARRIAGE **[14]** - TOP **[13]** - ALL AREAS **[15]** - UNIT NOT AT SCENE **[16]**INITIAL POINT OF CONTACT
0 - NO DAMAGE **1 2** 14 - UNDERCARRIAGE
1 - 12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE DIAGRAM
99 - UNKNOWN
13 - TOPTRAFFIC
TRAFFICWAY FLOW **2** TRAFFIC CONTROL
1 - ONE-WAY
2 - TWO-WAY
1 - ROUNDABOUT
2 - SIGNAL
3 - FLASHER
4 - STOP SIGN
5 - YIELD SIGN
6 - NO CONTROL# OF THROUGH LANES ON ROAD **4** RAIL GRADE CROSSING
1 - NOT INVOLVED
2 - INVOLVED-ACTIVE CROSSING
3 - INVOLVED-PASSIVE CROSSINGUNIT / NON-MOTORIST DIRECTION
1 - NORTH **4** 5 - NORTHEAST
2 - SOUTH 6 - NORTHWEST
3 - EAST 7 - SOUTHEAST
4 - WEST 8 - SOUTHWEST
9 - OTHER / UNKNOWN
FROM **4** TO **3**UNIT SPEED **3 5** DETECTED SPEED
1 - STATED / ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED
POSTED SPEED **3 5**



MOTORIST / Non-MOTORIST

MOTORIST / NON-MOTORIST	LOCAL REPORT NUMBER												
	2	2	0	5	3	4	2	4	DATE OF BIRTH	AGE	GENDER		
UNIT #	NAME: LAST, FIRST, MIDDLE 0 1 Dahal, Radhika												
ADDRESS: STREET, CITY, STATE, ZIP 236 Martha Ln., 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	DOT-COMPLIANT MC HELMET		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
5						0 4	<input type="checkbox"/>		0 1	1	1	1	
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER				
O H				331.17 a		<input checked="" type="checkbox"/>	FTY Turning Left		251762				
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)			
4				1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	1	<input type="checkbox"/> STATUS	<input type="checkbox"/> TYPE	<input type="checkbox"/> VALUE	<input type="checkbox"/> STATUS	<input type="checkbox"/> TYPE	<input type="checkbox"/> RESULT SELECT UP TO 4	
UNIT #	NAME: LAST, FIRST, MIDDLE 0 2 Copeland, Vincent										DATE OF BIRTH	AGE	GENDER
ADDRESS: STREET, CITY, STATE, ZIP 2911 Whitley Ct., Cincinnati, OH 45251										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	
5						0 4	<input type="checkbox"/>		0 1	1	1	1	
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER				
O H						<input type="checkbox"/>							
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)			
1				1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	1	<input type="checkbox"/> STATUS	<input type="checkbox"/> TYPE	<input type="checkbox"/> VALUE	<input type="checkbox"/> STATUS	<input type="checkbox"/> TYPE	<input type="checkbox"/> RESULT SELECT UP TO 4	
UNIT #	NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH	AGE	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	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	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)			
					<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<input type="checkbox"/> STATUS	<input type="checkbox"/> TYPE	<input type="checkbox"/> VALUE	<input type="checkbox"/> STATUS	<input type="checkbox"/> TYPE	<input type="checkbox"/> 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-TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		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-TEST GIVEN, RESULTS KNOWN		4-TEST GIVEN, RESULTS KNOWN			
5-NO APPARENT INJURY	5-SECOND - MIDDLE		5-NOT APPLICABLE		5-MIC MOPED ONLY	5-EXCEPT CLASS A BUS		5-TALKING ON HANDS-FREE COMMUNICATION DEVICE		5-TEST GIVEN, RESULTS UNKNOWN			
					9-DEPLOYMENT UNKNOWN	6-EXCEPT CLASS A & CLASS B BUS		6-TALKING ON HAND-HELD COMMUNICATION DEVICE		6-TALKING ON HAND-HELD COMMUNICATION DEVICE			
					6-NO VALID OL	7-EXCEPT TRACTOR-TRAILER		7-EXCEPT TRACTOR-TRAILER		7-EXCEPT TRACTOR-TRAILER			
						8-INTERMEDIATE LICENSE RESTRICTIONS		8-INTERMEDIATE LICENSE RESTRICTIONS		8-INTERMEDIATE LICENSE RESTRICTIONS			
						9-LEARNER'S PERMIT RESTRICTIONS		9-LEARNER'S PERMIT RESTRICTIONS		9-LEARNER'S PERMIT RESTRICTIONS			
						10-LIMITED TO DAYLIGHT ONLY		10-LIMITED TO DAYLIGHT ONLY		10-LIMITED TO DAYLIGHT ONLY			
						11-LIMITED TO EMPLOYMENT		11-LIMITED TO EMPLOYMENT		11-LIMITED TO EMPLOYMENT			
						12-LIMITED - OTHER		12-LIMITED - OTHER		12-LIMITED - OTHER			
						13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)			
						14-MILITARY VEHICLES ONLY		14-MILITARY VEHICLES ONLY		14-MILITARY VEHICLES ONLY			
						15-MOTOR VEHICLES WITHOUT AIR BRAKES		15-MOTOR VEHICLES WITHOUT AIR BRAKES		15-MOTOR VEHICLES WITHOUT AIR BRAKES			
						16-OUTSIDE MIRROR		16-OUTSIDE MIRROR		16-OUTSIDE MIRROR			
						17-PROSTHETIC AID		17-PROSTHETIC AID		17-PROSTHETIC AID			
						18-OTHER		18-OTHER		18-OTHER			
INJURED TAKEN BY	EJECTION		OL ENDORSEMENT		CONDITION	DRUG TEST TYPE		DRUG TEST RESULT(S)					
1-NOT TRANSPORTED / TREATED AT SCENE	1-NOT EJECTED		H-HAZMAT		1-APPARENTLY NORMAL	1-NONE		1-AMPHETAMINES					
2-EMS	2-PARTIALLY EJECTED		M-MOTORCYCLE		2-PHYSICAL IMPAIRMENT	2-BLOOD		2-BARBITURATES					
3-POLICE	3-TOTALLY EJECTED		P-PASSENGER		3-EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	3-URINE		3-BENZODIAZEPINES					
9-OTHER / UNKNOWN	4-NOT APPLICABLE		N-TANKER		4-ILLNESS	4-OOTHER		4-CANNABINOID					
			Q-MOTOR SCOOTER		5-FELL ASLEEP, FAINTED, FATIGUED, ETC.			5-COCAIN					
			R-THREE-WHEEL MOTORCYCLE		6-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL			6-OPIATES / OPIOIDS					
			S-SCHOOL BUS		9-OTHER / UNKNOWN			7-OTHER					
			T-DOUBLE & TRIPLE TRAILERS					8-NEGATIVE RESULTS					
			X-TANKER / HAZMAT										
SAFETY EQUIPMENT	TRAPPED		GENDER		DRUG TEST RESULT(S)	DRUG TEST RESULT(S)							
1-NONE USED	1-NOT TRAPPED		F-FEMALE		1-APPARENTLY NORMAL	1-AMPHETAMINES							
2-SHOULDER BELT ONLY USED	2-EXTRICATED BY MECHANICAL MEANS		M-MALE		2-PHYSICAL IMPAIRMENT	2-BARBITURATES							
3-LAP BELT ONLY USED	3-FREED BY NON-MECHANICAL MEANS		U-OTHER / UNKNOWN		3-EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	3-BENZODIAZEPINES							
4-SHOULDER & LAP BELT USED					4-ILLNESS	4-CANNABINOID							
5-CHILD RESTRAINT SYSTEM - FORWARD FACING					5-FELL ASLEEP, FAINTED, FATIGUED, ETC.	5-COCAIN							
6-CHILD RESTRAINT SYSTEM - REAR FACING					6-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	6-OPIATES / OPIOIDS							
7-BOOSTER SEAT					9-OTHER / UNKNOWN	7-OTHER							
8-HELMET USED						8-NEGATIVE RESULTS							
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)													
10-REFLECTIVE CLOTHING													
11-LIGHTING - PEDESTRIAN / BICYCLE ONLY													
99-OTHER / UNKNOWN													

REPORT NUMBER

PD-22-053424

AGENCY

FAIRFIELD P.D. 00901

M 7 10 26 2022

IN COUNTY OF

BUTLER

ACCIDENT LOCATION

Seward Rd // Union Center Blvd.

