# OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

**LOCAL REPORT NUMBER*:** 22053526

- [X] PHOTOS TAKEN
- [ ] SECONDARY CRASH
- [ ] OH-2
- [X] OH-3
- [ ] OH-1P
- [ ] OTHER
- [ ] PRIVATE PROPERTY

**LOCAL INFORMATION:**

**REPORTING AGENCY NAME*:** Fairfield Police Department

**NCIC*:** 00901

**HIT/SKIP** (1 - SOLVED, 2 - UNSOLVED):

**NUMBER OF UNITS:** 02

**UNIT IN ERROR** (98 - ANIMAL, 99 - UNKNOWN): 01

**COUNTY*:** 09

**LOCALITY*** (1 - CITY, 2 - VILLAGE, 3 - TOWNSHIP): 1

**LOCATION: CITY, VILLAGE, TOWNSHIP*:** City of Fairfield

**CRASH DATE / TIME*:** 07262022 2255

**CRASH SEVERITY:** 4 (1 - FATAL, 2 - SERIOUS INJURY SUSPECTED, 3 - MINOR INJURY SUSPECTED, 4 - INJURY POSSIBLE, 5 - PROPERTY DAMAGE ONLY)

## LOCATION

| ROUTE TYPE | ROUTE NUMBER | PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST) | LOCATION ROAD NAME | ROAD TYPE |
|---|---|---|---|---|
| | | | Mack | RD |

**LATITUDE DECIMAL DEGREES:** 39.313226

## REFERENCE

| ROUTE TYPE | ROUTE NUMBER | PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST) | REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) | ROAD TYPE |
|---|---|---|---|---|
| | | | 2452 | |

**LONGITUDE DECIMAL DEGREES:** -84.537434

**REFERENCE POINT** (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE #): 3

**DIRECTION FROM REFERENCE** (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST):

**DISTANCE FROM REFERENCE:**

**DISTANCE UNIT OF MEASURE** (1 - MILES, 2 - FEET, 3 - YARDS):

**ROUTE TYPE:** IR - INTERSTATE ROUTE (TP); US - FEDERAL US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

**ROAD TYPE:** AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; OV - OVAL; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

**INTERSECTION RELATED**

- [ ] WITHIN INTERSECTION OR ON APPROACH
- [ ] WITHIN INTERCHANGE AREA

**NUMBER OF APPROACHES:**

**ROADWAY**

- [ ] ROADWAY DIVIDED

**LOCATION OF FIRST HARMFUL EVENT:** 01

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:** 3

1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT; 2 - REAR-END; 3 - HEAD-ON; 4 - REAR-TO-REAR; 5 - BACKING; 6 - ANGLE; 7 - SIDESWIPE, SAME DIRECTION; 8 - SIDESWIPE, OPPOSITE DIRECTION; 9 - 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 (≥4 FEET); 3 - DIVIDED, DEPRESSED MEDIAN; 4 - DIVIDED, RAISED MEDIAN (ANY TYPE); 9 - OTHER/UNKNOWN

- [ ] WORK ZONE RELATED
- [ ] WORKERS PRESENT
- [ ] LAW ENFORCEMENT PRESENT
- [ ] 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:** 4 (1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - OTHER/UNKNOWN)

**CONDITIONS:** 1 (1 - DRY; 2 - WET; 3 - SNOW; 4 - ICE; 5 - SAND, MUD, DIRT, OIL, GRAVEL; 6 - WATER (STANDING, MOVING); 7 - SLUSH; 9 - OTHER/UNKNOWN)

**SURFACE:** 2 (1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 9 - OTHER/UNKNOWN)

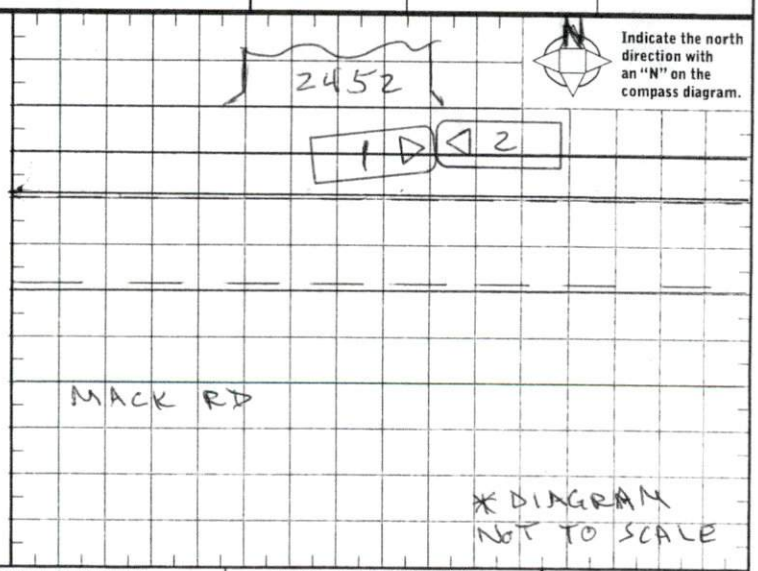
**LIGHT CONDITION:** 3 (1 - DAYLIGHT; 2 - DAWN/DUSK; 3 - DARK – LIGHTED ROADWAY; 4 - DARK – ROADWAY NOT LIGHTED; 5 - DARK – UNKNOWN ROADWAY LIGHTING; 9 - OTHER / UNKNOWN)

**WEATHER:** 01 (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 7/26/22 at 10:55 PM the operator of unit #1 was eastbound on Mack Rd. Unit #1 operator said that he was reaching for his phone near the passenger seat and the crossed the double yellow line. Unit #2 was traveling westbound on Mack Rd. When unit #1 crossed the double yellow line its front end struck the front of unit #2.

The operator of unit #1 was also cited with No operators license (FCO 335.01 a1).




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

| CRASH REPORTED DATE / TIME | DISPATCH DATE / TIME | ARRIVAL DATE / TIME | SCENE CLEARED DATE / TIME |
|---|---|---|---|
| 07262022 2255 | 07262022 2258 | 07262022 2305 | 07262022 2353 |

**REPORT TAKEN BY**

- [X] POLICE AGENCY
- [ ] MOTORIST
- [ ] SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

| TOTAL TIME ROADWAY CLOSED | OTHER INVESTIGATION TIME | TOTAL MINUTES | OFFICER'S NAME* | CHECKED BY OFFICER'S NAME* |
|---|---|---|---|---|
| | | 55 | Sgt. Harrington | Sgt. Harrington |

**OFFICER'S BADGE NUMBER*:** 112

**CHECKED BY OFFICER'S BADGE NUMBER*:** 112

OHIO DEPARTMENT OF PUBLIC SAFETY

# UNIT

LOCAL REPORT NUMBER: 22053526

## OWNER

UNIT #: 01

OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER): Navarri Bristol, Carlos

OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER):

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER): 4808 Glenway Ave., Cincinnati, OH 45238

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

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

## VEHICLE

| LP STATE | LICENSE PLATE # | VEHICLE IDENTIFICATION # | VEHICLE YEAR | VEHICLE MAKE |
|---|---|---|---|---|
| OH | JSE3012 | 1FMDU85WX3UN51082 | 2003 | Ford |

| INSURANCE VERIFIED | INSURANCE COMPANY | INSURANCE POLICY # | COLOR | VEHICLE MODEL |
|---|---|---|---|---|
| ☐ | | | blue | Explorer |

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME: Marcells

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

#OCCUPANTS: 01

VEHICLE WEIGHT GVWR/GCWR: 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — CLASS # — PLACARD ID #

UNIT TYPE: 03
1 - PASSENGER CAR; 2 - PASSENGER VAN (MINIVAN); 3 - SPORT UTILITY VEHICLE; 4 - PICK UP; 5 - CARGO VAN; 6 - VAN (9-15 SEATS); 7 - MOTORCYCLE 2-WHEELED; 8 - MOTORCYCLE 3-WHEELED; 9 - AUTOCYCLE; 10 - MOPED OR MOTORIZED BICYCLE; 11 - ALL TERRAIN VEHICLE (ATV/UTV); 12 - GOLF CART; 13 - SNOWMOBILE; 14 - SINGLE UNIT TRUCK; 15 - SEMI-TRACTOR; 16 - FARM EQUIPMENT; 17 - MOTORHOME; 18 - LIMO (LIVERY VEHICLE); 19 - BUS (16+ PASSENGERS); 20 - OTHER VEHICLE; 21 - HEAVY EQUIPMENT; 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE; 23 - PEDESTRIAN / SKATER; 24 - WHEELCHAIR (ANY TYPE); 25 - OTHER NON-MOTORIST; 26 - BICYCLE; 27 - TRAIN; 99 - UNKNOWN OR HIT/SKIP

# OF TRAILING UNITS:

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 (1 - YES 2 - NO 9 - OTHER / UNKNOWN)

AUTONOMOUS MODE LEVEL:
0 - NO AUTOMATION; 1 - DRIVER ASSISTANCE; 2 - PARTIAL AUTOMATION; 3 - CONDITIONAL AUTOMATION; 4 - HIGH AUTOMATION; 5 - FULL AUTOMATION; 9 - UNKNOWN

SPECIAL FUNCTION: 01
1 - NONE; 2 - TAXI; 3 - ELECTRONIC RIDE SHARING; 4 - SCHOOL TRANSPORT; 5 - BUS - TRANSIT/COMMUTER; 6 - BUS - CHARTER/TOUR; 7 - BUS - INTERCITY; 8 - BUS - SHUTTLE; 9 - BUS - OTHER; 10 - AMBULANCE; 11 - FIRE; 12 - MILITARY; 13 - POLICE; 14 - PUBLIC UTILITY; 15 - CONSTRUCTION EQUIPMENT; 16 - FARM; 17 - MOWING; 18 - SNOW REMOVAL; 19 - TOWING; 20 - SAFETY SERVICE PATROL; 21 - MAIL CARRIER; 99 - OTHER / UNKNOWN

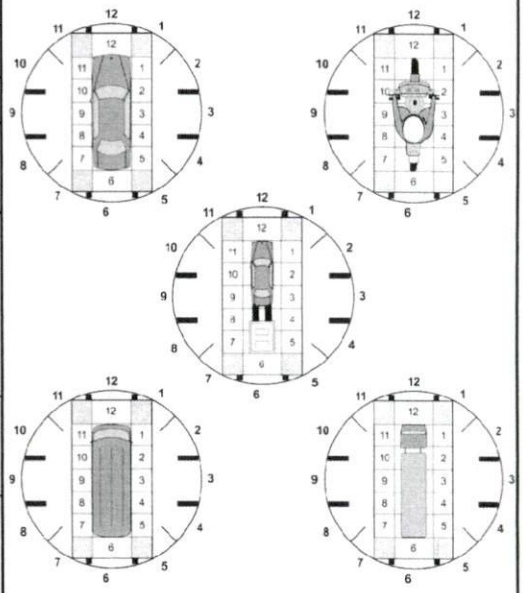
CARGO BODY TYPE: 01
1 - NO CARGO BODY TYPE / NOT APPLICABLE; 2 - BUS; 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE; 4 - LOGGING; 5 - INTERMODAL CONTAINER CHASSIS; 6 - CARGO VAN/ENCLOSED BOX; 7 - GRAIN/CHIPS/GRAVEL; 8 - POLE; 9 - CARGO TANK; 10 - FLAT BED; 11 - DUMP; 12 - CONCRETE MIXER; 13 - AUTO TRANSPORTER; 14 - GARBAGE/REFUSE; 99 - OTHER / UNKNOWN

VEHICLE DEFECTS:
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

## DAMAGE

DAMAGE SCALE: 4
1 - NONE; 2 - MINOR DAMAGE; 3 - FUNCTIONAL DAMAGE; 4 - DISABLING DAMAGE; 9 - UNKNOWN

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

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

## EVENT(S)

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

ACTION: 3
1 - NON-CONTACT; 2 - NON-COLLISION; 3 - STRIKING; 4 - STRUCK; 5 - BOTH STRIKING & STRUCK; 9 - OTHER / UNKNOWN

PRE-CRASH ACTIONS: 13
1 - STRAIGHT AHEAD; 2 - BACKING; 3 - CHANGING LANES; 4 - OVERTAKING/PASSING; 5 - MAKING RIGHT TURN; 6 - MAKING LEFT TURN; 7 - MAKING U-TURN; 8 - ENTERING TRAFFIC LANE; 9 - LEAVING TRAFFIC LANE; 10 - PARKED; 11 - SLOWING OR STOPPED IN TRAFFIC; 12 - DRIVERLESS; 13 - NEGOTIATING A CURVE; 14 - ENTERING OR CROSSING SPECIFIED LOCATION; 15 - WALKING, RUNNING, JOGGING, PLAYING; 16 - WORKING; 17 - PUSHING VEHICLE; 18 - APPROACHING OR LEAVING VEHICLE; 19 - STANDING; 20 - OTHER NON-MOTORIST; 21 - STANDING OUTSIDE DISABLED VEHICLE; 99 - OTHER / UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 07
1 - NONE; 2 - FAILURE TO YIELD; 3 - RAN RED LIGHT; 4 - RAN STOP SIGN; 5 - UNSAFE SPEED; 6 - IMPROPER TURN; 7 - LEFT OF CENTER; 8 - FOLLOWING TOO CLOSE / ACDA; 9 - IMPROPER LANE CHANGE; 10 - IMPROPER PASSING; 11 - DROVE OFF ROAD; 12 - IMPROPER BACKING; 13 - IMPROPER START FROM A PARKED POSITION; 14 - STOPPED OR PARKED ILLEGALLY; 15 - SWERVING TO AVOID; 16 - WRONG WAY; 17 - VISION OBSTRUCTION; 18 - OPERATING DEFECTIVE EQUIPMENT; 19 - LOAD SHIFTING/FALLING/SPILLING; 20 - IMPROPER CROSSING; 21 - LYING IN ROADWAY; 22 - NOT DISCERNIBLE; 23 - OPENING DOOR INTO ROADWAY; 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS
1: 20
2: 11
3:
4:
5:
6:

EVENT CODES:
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

NON-COLLISION: 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL; 12 - DOWNHILL RUNAWAY; 13 - OTHER NON-COLLISION; 14 - PEDESTRIAN; 15 - PEDALCYCLE; 16 - RAILWAY VEHICLE; 17 - ANIMAL - FARM; 18 - ANIMAL - DEER; 19 - ANIMAL - OTHER; 20 - MOTOR VEHICLE IN TRANSPORT; 21 - PARKED MOTOR VEHICLE; 22 - WORK ZONE MAINTENANCE EQUIPMENT; 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE; 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK: 25 - IMPACT ATTENUATOR / CRASH CUSHION; 26 - BRIDGE OVERHEAD STRUCTURE; 27 - BRIDGE PIER OR ABUTMENT; 28 - BRIDGE PARAPET; 29 - BRIDGE RAIL; 30 - GUARDRAIL FACE; 31 - GUARDRAIL END; 32 - PORTABLE BARRIER; 33 - MEDIAN CABLE BARRIER; 34 - MEDIAN GUARDRAIL BARRIER; 35 - MEDIAN CONCRETE BARRIER; 36 - MEDIAN OTHER BARRIER; 37 - TRAFFIC SIGN POST; 38 - OVERHEAD SIGN POST; 39 - LIGHT / LUMINARIES SUPPORT; 40 - UTILITY POLE; 41 - OTHER POST, POLE OR SUPPORT; 42 - CULVERT; 43 - CURB; 44 - DITCH; 45 - EMBANKMENT; 46 - FENCE; 47 - MAILBOX; 48 - TREE; 49 - FIRE HYDRANT; 50 - WORK ZONE MAINTENANCE EQUIPMENT; 51 - WALL; 52 - BUILDING; 53 - TUNNEL; 54 - OTHER FIXED OBJECT; 99 - OTHER / UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

## TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY; 2 - TWO-WAY)

TRAFFIC CONTROL: 6
1 - ROUNDABOUT; 2 - SIGNAL; 3 - FLASHER; 4 - STOP SIGN; 5 - YIELD SIGN; 6 - NO CONTROL

# OF THROUGH LANES ON ROAD: 2

RAIL GRADE CROSSING: 1
1 - NOT INVOLVED; 2 - INVOLVED-ACTIVE CROSSING; 3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION: FROM 4 TO 3
1 - NORTH; 2 - SOUTH; 3 - EAST; 4 - WEST; 5 - NORTHEAST; 6 - NORTHWEST; 7 - SOUTHEAST; 8 - SOUTHWEST; 9 - OTHER / UNKNOWN

UNIT SPEED: 35

DETECTED SPEED: 1
1 - STATED / ESTIMATED SPEED; 2 - CALCULATED / EDR; 3 - UNDETERMINED

POSTED SPEED: 35

OHIO DEPARTMENT OF PUBLIC SAFETY

# UNIT

LOCAL REPORT NUMBER: 22053526

## OWNER

| UNIT # | OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) | OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER) |
|---|---|---|
| 02 | Keim, Kenneth M. | |

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
6418 Taylor Trace Ln. Hamilton, OH 45011

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

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

## VEHICLE

| LP STATE | LICENSE PLATE # | VEHICLE IDENTIFICATION # | VEHICLE YEAR | VEHICLE MAKE |
|---|---|---|---|---|
| OH | ADM1445 | JTDKN3DU9A0141085 1 | 2010 | Toyota |

| INSURANCE VERIFIED | INSURANCE COMPANY | INSURANCE POLICY # | COLOR | VEHICLE MODEL |
|---|---|---|---|---|
| ☒ | Progressive | 941815240 | Gray | Prius |

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME: Wayne's Towing

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

# OCCUPANTS: 01

VEHICLE WEIGHT GVWR/GCWR: 1 (1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.)

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — CLASS # — PLACARD ID #

UNIT TYPE: 01
1 - PASSENGER CAR; 2 - PASSENGER VAN (MINIVAN); 3 - SPORT UTILITY VEHICLE; 4 - PICK UP; 5 - CARGO VAN; 6 - VAN (9-15 SEATS); 7 - MOTORCYCLE 2-WHEELED; 8 - MOTORCYCLE 3-WHEELED; 9 - AUTOCYCLE; 10 - MOPED OR MOTORIZED BICYCLE; 11 - ALL TERRAIN VEHICLE (ATV/UTV); 12 - GOLF CART; 13 - SNOWMOBILE; 14 - SINGLE UNIT TRUCK; 15 - SEMI-TRACTOR; 16 - FARM EQUIPMENT; 17 - MOTORHOME; 18 - LIMO (LIVERY VEHICLE); 19 - BUS (16+ PASSENGERS); 20 - OTHER VEHICLE; 21 - HEAVY EQUIPMENT; 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE; 23 - PEDESTRIAN / SKATER; 24 - WHEELCHAIR (ANY TYPE); 25 - OTHER NON-MOTORIST; 26 - BICYCLE; 27 - TRAIN; 99 - UNKNOWN OR HIT/SKIP

# OF TRAILING UNITS:

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 02 (1 - YES 2 - NO 9 - OTHER / UNKNOWN)
AUTONOMOUS MODE LEVEL:
0 - NO AUTOMATION; 1 - DRIVER ASSISTANCE; 2 - PARTIAL AUTOMATION; 3 - CONDITIONAL AUTOMATION; 4 - HIGH AUTOMATION; 5 - FULL AUTOMATION; 9 - UNKNOWN

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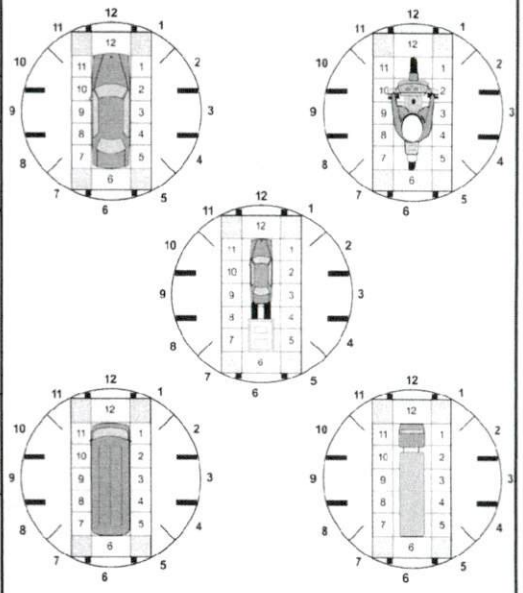
CARGO BODY TYPE: 01
1 - NO CARGO BODY TYPE / NOT APPLICABLE; 2 - BUS; 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE; 4 - LOGGING; 5 - INTERMODAL CONTAINER CHASSIS; 6 - CARGO VAN/ENCLOSED BOX; 7 - GRAIN/CHIPS/GRAVEL; 8 - POLE; 9 - CARGO TANK; 10 - FLAT BED; 11 - DUMP; 12 - CONCRETE MIXER; 13 - AUTO TRANSPORTER; 14 - GARBAGE/REFUSE; 99 - OTHER / UNKNOWN

VEHICLE DEFECTS:
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

## DAMAGE

DAMAGE SCALE: 4
1 - NONE; 2 - MINOR DAMAGE; 3 - FUNCTIONAL DAMAGE; 4 - DISABLING DAMAGE; 9 - UNKNOWN

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [ 0 ] ☐ - UNDERCARRIAGE [ 14 ] ☐ - TOP [ 13 ] ☐ - ALL AREAS [ 15 ] ☐ - UNIT NOT AT SCENE [ 16 ]

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

## EVENT(S)

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

ACTION: 04
1 - NON-CONTACT; 2 - NON-COLLISION; 3 - STRIKING; 4 - STRUCK; 5 - BOTH STRIKING & STRUCK; 9 - OTHER / UNKNOWN

PRE-CRASH ACTIONS: 01
1 - STRAIGHT AHEAD; 2 - BACKING; 3 - CHANGING LANES; 4 - OVERTAKING/PASSING; 5 - MAKING RIGHT TURN; 6 - MAKING LEFT TURN; 7 - MAKING U-TURN; 8 - ENTERING TRAFFIC LANE; 9 - LEAVING TRAFFIC LANE; 10 - PARKED; 11 - SLOWING OR STOPPED IN TRAFFIC; 12 - DRIVERLESS; 13 - NEGOTIATING A CURVE; 14 - ENTERING OR CROSSING SPECIFIED LOCATION; 15 - WALKING, RUNNING, JOGGING, PLAYING; 16 - WORKING; 17 - PUSHING VEHICLE; 18 - APPROACHING OR LEAVING VEHICLE; 19 - STANDING; 20 - OTHER NON-MOTORIST; 21 - STANDING OUTSIDE DISABLED VEHICLE; 99 - OTHER / UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 01
1 - NONE; 2 - FAILURE TO YIELD; 3 - RAN RED LIGHT; 4 - RAN STOP SIGN; 5 - UNSAFE SPEED; 6 - IMPROPER TURN; 7 - LEFT OF CENTER; 8 - FOLLOWING TOO CLOSE / ACDA; 9 - IMPROPER LANE CHANGE; 10 - IMPROPER PASSING; 11 - DROVE OFF ROAD; 12 - IMPROPER BACKING; 13 - IMPROPER START FROM A PARKED POSITION; 14 - STOPPED OR PARKED ILLEGALLY; 15 - SWERVING TO AVOID; 16 - WRONG WAY; 17 - VISION OBSTRUCTION; 18 - OPERATING DEFECTIVE EQUIPMENT; 19 - LOAD SHIFTING/FALLING/SPILLING; 20 - IMPROPER CROSSING; 21 - LYING IN ROADWAY; 22 - NOT DISCERNIBLE; 23 - OPENING DOOR INTO ROADWAY; 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS
1: 20
2:
3:
4:
5:
6:

EVENT CODES:
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

NON-COLLISION: 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL; 12 - DOWNHILL RUNAWAY; 13 - OTHER NON-COLLISION; 14 - PEDESTRIAN; 15 - PEDALCYCLE; 16 - RAILWAY VEHICLE; 17 - ANIMAL - FARM; 18 - ANIMAL - DEER; 19 - ANIMAL - OTHER; 20 - MOTOR VEHICLE IN TRANSPORT; 21 - PARKED MOTOR VEHICLE; 22 - WORK ZONE MAINTENANCE EQUIPMENT; 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE; 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK: 25 - IMPACT ATTENUATOR / CRASH CUSHION; 26 - BRIDGE OVERHEAD STRUCTURE; 27 - BRIDGE PIER OR ABUTMENT; 28 - BRIDGE PARAPET; 29 - BRIDGE RAIL; 30 - GUARDRAIL FACE; 31 - GUARDRAIL END; 32 - PORTABLE BARRIER; 33 - MEDIAN CABLE BARRIER; 34 - MEDIAN GUARDRAIL BARRIER; 35 - MEDIAN CONCRETE BARRIER; 36 - MEDIAN OTHER BARRIER; 37 - TRAFFIC SIGN POST; 38 - OVERHEAD SIGN POST; 39 - LIGHT / LUMINARIES SUPPORT; 40 - UTILITY POLE; 41 - OTHER POST, POLE OR SUPPORT; 42 - CULVERT; 43 - CURB; 44 - DITCH; 45 - EMBANKMENT; 46 - FENCE; 47 - MAILBOX; 48 - TREE; 49 - FIRE HYDRANT; 50 - WORK ZONE MAINTENANCE EQUIPMENT; 51 - WALL; 52 - BUILDING; 53 - TUNNEL; 54 - OTHER FIXED OBJECT; 99 - OTHER / UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

## TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY; 2 - TWO-WAY)

TRAFFIC CONTROL: 6 (1 - ROUNDABOUT; 2 - SIGNAL; 3 - FLASHER; 4 - STOP SIGN; 5 - YIELD SIGN; 6 - NO CONTROL)

# OF THROUGH LANES ON ROAD: 2

RAIL GRADE CROSSING: 1 (1 - NOT INVOLVED; 2 - INVOLVED-ACTIVE CROSSING; 3 - INVOLVED-PASSIVE CROSSING)

UNIT / NON-MOTORIST DIRECTION: FROM 3 TO 4
1 - NORTH; 2 - SOUTH; 3 - EAST; 4 - WEST; 5 - NORTHEAST; 6 - NORTHWEST; 7 - SOUTHEAST; 8 - SOUTHWEST; 9 - OTHER / UNKNOWN

UNIT SPEED: 35

DETECTED SPEED: 1 (1 - STATED / ESTIMATED SPEED; 2 - CALCULATED / EDR; 3 - UNDETERMINED)

POSTED SPEED: 35

# OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER: 22053526

## MOTORIST / NON-MOTORIST

| UNIT # | NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | AGE | GENDER |
|---|---|---|---|---|
| 01 | Briones Colorado, Michel | 12091982 | 39 | M |

ADDRESS: STREET, CITY, STATE, ZIP: 3975 Woodridge Blvd. Apt. 8, 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 |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 1 | Fairfield FD | | 04 | ☐ | 01 | 1 | 1 | 1 |

| OL STATE | OPERATOR LICENSE NUMBER | OFFENSE CHARGED | LOCAL CODE | OFFENSE DESCRIPTION | CITATION NUMBER |
|---|---|---|---|---|---|
| | | 331.07A | ☒ | left of cener | 247640 |

| OL CLASS | ENDORSEMENT (SELECT UP TO 2) | RESTRICTION (SELECT UP TO 3) | DRIVER DISTRACTED BY | ALCOHOL / DRUG SUSPECTED | CONDITION | ALCOHOL TEST STATUS | ALCOHOL TEST TYPE | ALCOHOL TEST VALUE | DRUG TEST(S) STATUS | DRUG TEST(S) TYPE | DRUG TEST(S) RESULT (SELECT UP TO 4) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | 5 | ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG | 1 | 1 | 1 | . | 1 | 1 | |

## MOTORIST / NON-MOTORIST

| UNIT # | NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | AGE | GENDER |
|---|---|---|---|---|
| 02 | Keim, Alexander Collin | 01012003 | 19 | M |

ADDRESS: STREET, CITY, STATE, ZIP: 6418 Taylor Trace Ln. Hamilton, OH 45011

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 |
|---|---|---|---|---|---|---|---|---|---|
| 4 | | | | 04 | ☐ | 01 | 2 | 1 | 1 |

| OL STATE | OPERATOR LICENSE NUMBER | OFFENSE CHARGED | LOCAL CODE | OFFENSE DESCRIPTION | CITATION NUMBER |
|---|---|---|---|---|---|
| OH | | | ☐ | | |

| OL CLASS | ENDORSEMENT (SELECT UP TO 2) | RESTRICTION (SELECT UP TO 3) | DRIVER DISTRACTED BY | ALCOHOL / DRUG SUSPECTED | CONDITION | ALCOHOL TEST STATUS | ALCOHOL TEST TYPE | ALCOHOL TEST VALUE | DRUG TEST(S) STATUS | DRUG TEST(S) TYPE | DRUG TEST(S) RESULT (SELECT UP TO 4) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 4 | | | 1 | ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG | 1 | 1 | 1 | . | 1 | 1 | |

## MOTORIST / NON-MOTORIST

| 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 | 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 STATUS | ALCOHOL TEST TYPE | ALCOHOL TEST VALUE | DRUG TEST(S) STATUS | DRUG TEST(S) TYPE | DRUG TEST(S) RESULT (SELECT UP TO 4) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG | | | | . | | | |

### INJURIES
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

### INJURED TAKEN BY
1 - NOT TRANSPORTED /TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

### SAFETY EQUIPMENT
1 - NONE USED
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

### SEATING POSITION
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

### AIR BAG
1 - NOT DEPLOYED
2 - DEPLOYED FRONT
3 - DEPLOYED SIDE
4 - DEPLOYED BOTH FRONT / SIDE
5 - NOT APPLICABLE
9 - DEPLOYMENT UNKNOWN

### EJECTION
1 - NOT EJECTED
2 - PARTIALLY EJECTED
3 - TOTALLY EJECTED
4 - NOT APPLICABLE

### TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

### OL CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/C MOPED ONLY
6 - NO VALID OL

### OL ENDORSEMENT
H - HAZMAT
M - MOTORCYCLE
P - PASSENGER
N - TANKER
Q - MOTOR SCOOTER
R - THREE-WHEEL MOTORCYCLE
S - SCHOOL BUS
T - DOUBLE & TRIPLE TRAILERS
X - TANKER / HAZMAT

### GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

### 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

### 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

### 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
9 - 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

### ALCOHOL TEST TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - BREATH
5 - OTHER

### DRUG TEST TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - OTHER

### DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

# OCCUPANT / WITNESS ADDENDUM

OHIO DEPARTMENT OF PUBLIC SAFETY

LOCAL REPORT NUMBER: 22052526

## OCCUPANT

| 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 | DOT-COMPLIANT MC HELMET | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | ☐ | | | | |

## OCCUPANT

| UNIT # | NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | AGE | GENDER |
|---|---|---|---|---|
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| | | | | | ☐ | | | | |

## OCCUPANT

| UNIT # | NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | AGE | GENDER |
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| | | | | | ☐ | | | | |

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### INJURED TAKEN BY
1 - NOT TRANSPORTED /TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

### GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

### SAFETY EQUIPMENT USED
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
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### AIR BAG USAGE
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3 - TOTALLY EJECTED
4 - NOT APPLICABLE

### TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

## WITNESS

| NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | AGE | GENDER |
|---|---|---|---|
| Cantwell, Tracy | 02221973 | 49 | F |

ADDRESS: STREET, CITY, STATE, ZIP: 4381 Rita Mae Dr., Fairfield, OH 45014

CONTACT PHONE - INCLUDE AREA CODE

## WITNESS

| NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | AGE | GENDER |
|---|---|---|---|
| | | 0 | |

ADDRESS: STREET, CITY, STATE, ZIP

CONTACT PHONE - INCLUDE AREA CODE

## WITNESS

| NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | AGE | GENDER |
|---|---|---|---|
| | | 0 | |

ADDRESS: STREET, CITY, STATE, ZIP

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