



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

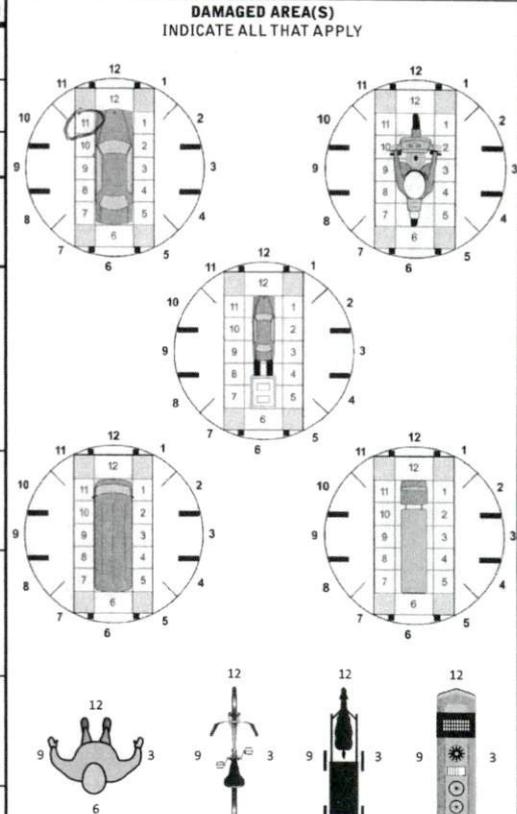
<input checked="" type="checkbox"/> PHOTOS TAKEN		<input type="checkbox"/> OH-2	<input type="checkbox"/> OH-3	LOCAL INFORMATION		LOCAL REPORT NUMBER*				
<input type="checkbox"/> SECONDARY CRASH		<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP	NUMBER OF UNITS		
				Fairfield Police Department		0 0 9 0 1	1 - SOLVED	0 2	UNIT IN ERROR	
							2 - UNSOLVED		0 1 98 - ANIMAL 0 1 99 - UNKNOWN	
COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*					CRASH DATE / TIME*		CRASH SEVERITY	
0 9	1 CITY 2 VILLAGE 3 TOWNSHIP	City of Fairfield					0 7 2 7 2 0 2 2 1 7 1 8		4	
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES		1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY	
U S	1 2 7						3 9 3 4 0 4 9 5			
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES			
					5088		- 8 4 5 5 9 7 9 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)			AL - ALLEY US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE	HW - HIGHWAY LA - LANE BL - BOULEVARD MP - MILEPOST CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS	RD - ROAD SQ - SQUARE ST - STREET OV - OVAL TE - TERRACE PK - PARKWAY PI - PIKE PL - PLACE	<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA	NUMBER OF APPROACHES	
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	ROUTE TYPE					ROADWAY			
	1 - MILES 2 - FEET 3 - YARDS	TR - NUMBERED TOWNSHIP ROUTE					<input type="checkbox"/> ROADWAY DIVIDED			
LOCATION OF FIRST HARMFUL EVENT				MANNER OF CRASH COLLISION/IMPACT			DIRECTION OF TRAVEL	MEDIAN TYPE		
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	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	6	1 - NOT COLLISION 2 - REAR-TO-REAR 3 - BACKING 4 - ANGLE 5 - SIDEWIPE, SAME DIRECTION 6 - REAR-END 7 - SIDEWIPE, OPPOSITE DIRECTION 8 - HEAD-ON 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				
WORK ZONE RELATED		WORK ZONE TYPE	LOCATION OF CRASH IN WORK ZONE			CONTOUR	CONDITIONS	SURFACE		
<input type="checkbox"/> WORKERS PRESENT		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 2 - ADVANCE WARNING SIGN 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	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	2 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN				
<input type="checkbox"/> LAW ENFORCEMENT PRESENT										
<input type="checkbox"/> ACTIVE SCHOOL ZONE										
LIGHT CONDITION			WEATHER							
1	1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	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						
<p>NARRATIVE</p> <p>On 7/27/2022 at about 5:18 p.m. Unit 1 was exiting private property at 5088 U.S. 127 attempting to turn left to travel south on U.S. 127. In so doing, Unit 1 failed to yield the right of way to Unit 2 which was traveling north on U.S. 127 and was consequently struck by Unit 2.</p>										
CRASH REPORTED DATE / TIME		DISPATCH DATE / TIME		ARRIVAL DATE / TIME		SCENE CLEARED DATE / TIME		REPORT TAKEN BY		
0 7 2 7 2 0 2 2 1 7 1 8		0 7 2 7 2 0 2 2 1 7 2 0		0 7 2 7 2 0 2 2 1 7 2 4		0 7 2 7 2 0 2 2 1 8 0 2		<input checked="" type="checkbox"/> POLICE AGENCY		
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*		CHECKED BY OFFICER'S NAME*		<input type="checkbox"/> MOTORIST			
0 0 0	0 3 0	0 7 2	D. Gooch		Sgt. Aaron Meyer		<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO DOPS)			
OFFICER'S BADGE NUMBER*		1 6 0		CHECKED BY OFFICER'S BADGE NUMBER*		1 3 2				

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER		OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER	
0 1	OWNER ADDRESS: STREET, CITY, STATE, ZIP <input checked="" type="checkbox"/> SAME AS DRIVER			
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	
O H	DKC4272	K M H C T 4 A E 6 E U 6 8 3 3 4 1	2 0 1 4	
VEHICLE	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	
<input checked="" type="checkbox"/> VERIFIED	Grange Ins Co	4765882	Silver	
TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME	
<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	#OCCUPANTS			
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	VEHICLE WEIGHT GVWR/GCWR	HAZARDOUS MATERIAL	
		1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	<input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	
UNIT TYPE	CLASS # PLACARD ID #			
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 0	# OF TRAILING UNITS			
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?				
0 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				
0 1	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				
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 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	
VEHICLE DEFECTS				
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 99 - OTHER / UNKNOWN	
NON-MOTORIST LOCATION AT IMPACT				
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				
0 4	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 - DRIVINGLESS	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 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 24 - OTHER UNKNOWN	
CONTRIBUTING CIRCUMSTANCES				
0 2	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 / A/CDA 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 MOVABLE OBJECT	
COLLISION WITH FIXED OBJECT				
4 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 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 7 8 1

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



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

INITIAL POINT OF CONTACT
0 - NO DAMAGE 14 - UNDERCARRIAGE

1 1 1 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE

DIAGRAM 99 - UNKNOWN

13 - TOP

TRAFFIC

TRAFFICWAY FLOW
1 - ONE-WAY
2 - TWO-WAY
2

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

OF THROUGH LANES ON ROAD
3

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

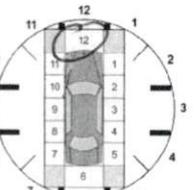
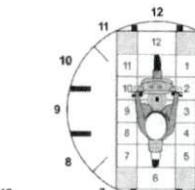
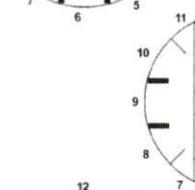
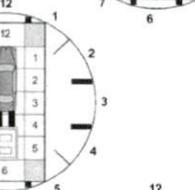
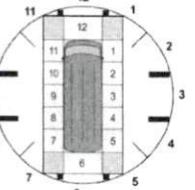
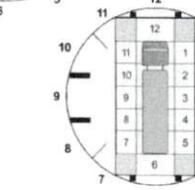
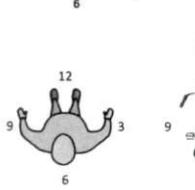
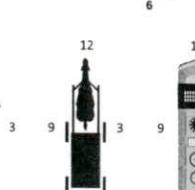
UNIT / NON-MOTORIST DIRECTION
1 - NORTH 5 - NORTHEAST
2 - SOUTH 6 - NORTHWEST
3 - EAST 7 - SOUTHEAST
4 - WEST 8 - SOUTHWEST
9 - OTHER / UNKNOWN
3

FROM 3 TO 2
UNIT SPEED
0 0 5
1

DETECTED SPEED
1 - STATED / ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED
2 5

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 2			
OWNER ADDRESS: STREET, CITY, STATE, ZIP <input checked="" type="checkbox"/> SAME AS DRIVER			
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	
LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR
O H	HYU5574	K L 7 C J L S B 3 L B 0 0 1 6 2 3 1	2 0 2 0
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR
	State Farm	960 6339-F06-35C	White
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.
UNIT TYPE	1 - PASSENGER CAR 2 - MOTORCYCLE 3 - WHEELED 4 - PASSENGER VAN (MINIVAN) 5 - MOTORCYCLE 3-WHEELED 3 - SPORT UTILITY VEHICLE 6 - AUTOCYCLE 4 - PICK UP 10 - MOVED OR MOTORIZED 5 - CARGO VAN 11 - BICYCLE 6 - VAN (9-15 SEATS) 11 - ALL TERRAIN VEHICLE (ATV/UTV)		
0 3			
0 0	# OF TRAILING UNITS		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?			
0 2	1 - YES 2 - NO 9 - OTHER/UNKNOWN		
AUTONOMOUS MODE LEVEL			
0 1	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN
SPECIAL FUNCTION	1 - NONE 6 - BUS - CHARTER/TOUR 2 - TAXI 7 - BUS - INTERCITY 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE		
0 1	11 - FIRE 16 - FARM 12 - MILITARY 17 - MOWING 13 - POLICE 18 - SNOW REMOVAL 14 - PUBLIC UTILITY 19 - TOWING 15 - SEMI-TRACTOR 20 - SAFETY SERVICE PATROL	21 - MAIL CARRIER 99 - OTHER/UNKNOWN	
CARGO BODY TYPE	1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL		
0 1	8 - POLE 12 - CONCRETE MIXER 9 - CARGO TANK 13 - AUTO TRANSPORTER 10 - FLAT BED 14 - GARBAGE/REFUSE 11 - DUMP 99 - OTHER/UNKNOWN		
VEHICLE DEFECTS	1 - TURN SIGNALS 4 - BRAKES 2 - HEAD LAMPS 5 - STEERING 3 - TAIL LAMPS 6 - TIRE BLOWOUT 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT		
0 1	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS AT INCIDENT SCENE 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER 99 - OTHER/UNKNOWN	
NON-MOTORIST LOCATION AT IMPACT	1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED 5 - TRAVEL LANE - OTHER LOCATION		
0 3	6 - BICYCLE LANE 7 - SHOULDER/Roadside 8 - SIDEWALK	9 - LEAVING TRAFFIC LANE 10 - SLOWING OR STOPPED IN TRAFFIC 11 - DRIVING 12 - DRIVING 13 - NEUTRAL 14 - REVERSE 15 - SWERVING 16 - TURN 17 - TURN 18 - TURN 19 - TURN 20 - TURN 21 - TURN 22 - TURN 23 - TURN 24 - TURN 25 - TURN 26 - TURN 27 - TURN 28 - TURN 29 - TURN 30 - TURN	12 - FIRST RESPONDER 99 - OTHER/UNKNOWN
ACTION	1 - NON-CONTACT 1 - STRAIGHT AHEAD 2 - NON-COLLISION 2 - BACKING 3 - STRIKING 3 - CHANGING LANES 4 - STRUCK 4 - OVERTAKING/PASSING 5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 9 - OTHER/UNKNOWN		
0 3	6 - BICYCLE LANE 7 - SHOULDER/Roadside 8 - SIDEWALK	9 - LEAVING TRAFFIC LANE 10 - SLOWING OR STOPPED IN TRAFFIC 11 - DRIVING 12 - DRIVING 13 - NEUTRAL 14 - REVERSE 15 - SWERVING 16 - TURN 17 - TURN 18 - TURN 19 - TURN 20 - TURN 21 - TURN 22 - TURN 23 - TURN 24 - TURN 25 - TURN 26 - TURN 27 - TURN 28 - TURN 29 - TURN 30 - TURN	12 - FIRST RESPONDER 99 - OTHER/UNKNOWN
CONTRIBUTING CIRCUMSTANCES	1 - NONE 7 - LEFT OF CENTER 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE 4 - RAN STOP SIGN 10 - IMPROPER PASSING 5 - UNSAFE SPEED 11 - DROVE OFF ROAD 6 - IMPROPER TURN 12 - IMPROPER BACKING		
0 1	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 6 - EQUIPMENT FAILURE 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN		
1	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNSHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE		
2	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE		
3	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		
5	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER		
6	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT		
7	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT		
8	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN		
9	1 - FIRST HARMFUL EVENT 2 - MOST HARMFUL EVENT		

LOCAL REPORT NUMBER	
2 2 0 5 3 7 8 1	
DAMAGE	
2	1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN
DAMAGED AREA(S) INDICATE ALL THAT APPLY	
       	
<input type="checkbox"/> - NO DAMAGE [0] <input type="checkbox"/> - UNDERCARRIAGE [14] <input type="checkbox"/> - TOP [13] <input type="checkbox"/> - ALL AREAS [15] <input type="checkbox"/> - UNIT NOT AT SCENE [16]	
INITIAL POINT OF CONTACT	
1 2	0 - NO DAMAGE 14 - UNDERCARRIAGE 1 - 12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN 13 - TOP
TRAFFIC	
TRAFFICWAY FLOW	TRAFFIC CONTROL
2	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
3	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION	
FROM 2 TO 1	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
UNIT SPEED	
0 2 5	DETECTED SPEED
1	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED	
2 5	



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER

2 2 0 5 3 7 8 1

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE 0 1 Starkey-Jones, Beverly				DATE OF BIRTH	AGE	GENDER
					0 2 0 7 1 9 6 2	6 0	F	
ADDRESS: STREET, CITY, STATE, ZIP 5754 Argus Rd., Cincinnati, OH, 45224								
INJURIES 4 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 AIR BAG USAGE EJECTION TRAPPED								
OL STATE O H OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL CODE 331.22a <input checked="" type="checkbox"/> OFFENSE DESCRIPTION CITATION NUMBER ROW Leaving Private Pro 254576								
OL CLASS 4 ENDORSEMENT RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY ALCOHOL / DRUG SUSPECTED 0 3 1 <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG CONDITION ALCOHOL TEST DRUG TEST(S) 1 1 1 1 1 1								
UNIT # 0 2 NAME: LAST, FIRST, MIDDLE Riley, Helena, A DATE OF BIRTH AGE GENDER 0 4 1 7 1 9 5 3 6 9 F								
ADDRESS: STREET, CITY, STATE, ZIP 5436 Eastgate Dr. Apt. 1, Fairfield, OH, 45014 CONTACT PHONE - INCLUDE AREA CODE								
INJURIES 5 INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED 0 4 <input type="checkbox"/> DOT-COMPLIANT MC HELMET SEATING POSITION AIR BAG USAGE EJECTION TRAPPED								
OL STATE O H OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL CODE OFFENSE DESCRIPTION CITATION NUMBER								
OL CLASS 4 ENDORSEMENT RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY ALCOHOL / DRUG SUSPECTED 1 <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG CONDITION ALCOHOL TEST DRUG TEST(S) 1 1 1 1 1 1								
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								
OL STATE OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL CODE OFFENSE DESCRIPTION CITATION NUMBER								
OL CLASS ENDORSEMENT RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY ALCOHOL / DRUG SUSPECTED 1 <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG CONDITION ALCOHOL TEST DRUG TEST(S) 1 1 1 1 1 1								
INJURIES SEATING POSITION AIR BAG OL CLASS OL RESTRICTION(S) DRIVER DISTRACTION TEST STATUS								
1-FATAL	1-FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1-NOT DEPLOYED	1-CLASS A	1-ALCOHOL INTERLOCK DEVICE	1-NOT DISTRACTED	1-NONE GIVEN		
2-SUSPECTED SERIOUS INJURY	2-FRONT - MIDDLE	2-DEPLOYED FRONT	2-CLASS B	2-CDL INTRASTATE ONLY	2-MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2-TEST REFUSED		
3-SUSPECTED MINOR INJURY	3-FRONT - RIGHT SIDE	3-DEPLOYED SIDE	3-CLASS C	3-CORRECTIVE LENSES	3-TALKING ON HANDS-FREE COMMUNICATION DEVICE	3-TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		
4-POSSIBLE INJURY	4-SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4-DEPLOYED BOTH FRONT / SIDE	4-REGULAR CLASS (OHIO=D)	4-FARM WAIVER	4-TALKING ON HAND-HELD COMMUNICATION DEVICE	4-TEST GIVEN, RESULTS KNOWN		
5-NO APPARENT INJURY	5-SECOND - MIDDLE	5-NOT APPLICABLE	5-M/C MOPED ONLY	5-EXCEPT CLASS A BUS	5-OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5-TEST GIVEN, RESULTS UNKNOWN		
INJURED TAKEN BY	6-SECOND - RIGHT SIDE	6-DEPLOYMENT UNKNOWN	6-NO VALID OL	6-EXCEPT CLASS A & CLASS B BUS	6-PASSSENGER	6-BLOOD		
1-NOT TRANSPORTED / TREATED AT SCENE	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	7-NOT EJECTED	7-H - HAZMAT	7-EXCEPT TRACTOR-TRAILER	7-OTHER DISTRACTION INSIDE THE VEHICLE	7-URINE		
2-EMS	8-THIRD - MIDDLE	8-PARTIALLY EJECTED	8-M - MOTORCYCLE	8-INTERMEDIATE LICENSE RESTRICTIONS	8-OTHER DISTRACTION OUTSIDE THE VEHICLE	8-BREATH		
3-POLICE	9-THIRD - RIGHT SIDE	9-TOTALLY EJECTED	9-P - PASSENGER	9-LEARNER'S PERMIT RESTRICTIONS	9-OTHER/UNKNOWN	5-OTHER		
9-OTHER / UNKNOWN	10-SLEEPER SECTION OF TRUCK CAB	10-NOT APPLICABLE	10-N - TANKER	10-LIMITED TO DAYLIGHT ONLY				
SAFETY EQUIPMENT	11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	11-NOT TRAPPED	11-Q - MOTOR SCOOTER	11-LIMITED TO EMPLOYMENT				
1-NONE USED	12-PASSENGER IN UNENCLOSED CARGO AREA	12-EXTRICATED BY MECHANICAL MEANS	12-R - THREE-WHEEL MOTORCYCLE	12-LIMITED - OTHER				
2-SHOULDER BELT ONLY USED	13-TRAILING UNIT	13-FREED BY NON-MECHANICAL MEANS	13-S - SCHOOL BUS	13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)				
3-LAP BELT ONLY USED	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14-T - DOUBLE & TRIPLE TRAILERS	14-MILITARY VEHICLES ONLY				
4-SHOULDER & LAP BELT USED	15-NON-MOTORIST		15-X - TANKER / HAZMAT	15-MOTOR VEHICLES WITHOUT AIR BRAKES				
5-CHILD RESTRAINT SYSTEM - FORWARD FACING	99-OTHER / UNKNOWN			16-OUTSIDE MIRROR				
6-CHILD RESTRAINT SYSTEM - REAR FACING				17-PROSTHETIC AID				
7-BOOSTER SEAT				18-OTHER				
8-HELMET USED								
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)								
10-REFLECTIVE CLOTHING								
11-LIGHTING - PEDESTRIAN / BICYCLE ONLY								
99-OTHER / UNKNOWN								
EJECTION OL ENDORSEMENT								
1-NOT EJECTED	H - HAZMAT	1-APPARENTLY NORMAL	1-NONE					
2-PARTIALLY EJECTED	M - MOTORCYCLE	2-PHYSICAL IMPAIRMENT	2-BLOOD					
3-TOTALLY EJECTED	P - PASSENGER	3-EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	3-URINE					
4-NOT APPLICABLE	N - TANKER	4-ILLNESS	4-OTHER					
5-NO VALID OL	Q - MOTOR SCOOTER	5-FELL ASLEEP, FAINTED, FATIGUED, ETC.						
6-EXCEPT CLASS A & CLASS B BUS	R - THREE-WHEEL MOTORCYCLE	6-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL						
7-EXCEPT TRACTOR-TRAILER	S - SCHOOL BUS	9-OTHER / UNKNOWN						
8-INTERMEDIATE LICENSE RESTRICTIONS	T - DOUBLE & TRIPLE TRAILERS							
9-LEARNER'S PERMIT RESTRICTIONS	X - TANKER / HAZMAT							
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								
GENDER								
F - FEMALE	M - MALE	U - OTHER / UNKNOWN						
TEST STATUS								
ALCOHOL TEST TYPE								
1-NONE	2-BLOOD	3-URINE	4-BREATH					
5-OTHER								
DRUG TEST TYPE								
1-NONE	2-BLOOD	3-URINE	4-OTHER					
5-OTHER								
DRUG TEST RESULT(S)								
1-AMPHETAMINES	2-BARBITURATES	3-BENZODIAZEPINES	4-CANNABINOID					
5-COCAIN	6-OPIATES / OPIOIDS	7-OTHER	8-NEGATIVE RESULTS					