



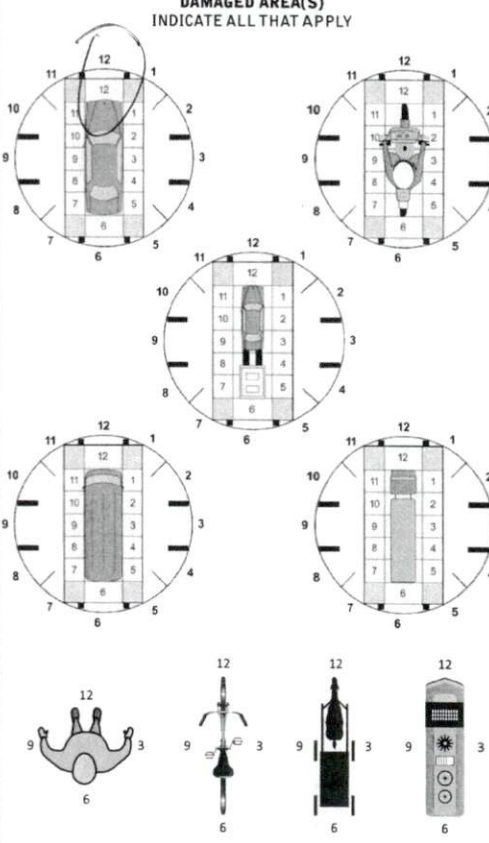
TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH		<input checked="" type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> PRIVATE PROPERTY	LOCAL INFORMATION		2 2 0 5 3 8 5 4										
COUNTY* 0 9		LOCALITY* 1 1 2-VILLAGE 3-TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield		HIT/SKIP 1-SOLVED 2-UNSOLVED		NUMBER OF UNITS 0 2		UNIT IN ERROR 0 1 98-ANIMAL 99-UNKNOWN					
ROUTE TYPE 1-NORTH 2-SOUTH 3-EAST 4-WEST		ROUTE NUMBER 1		PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST		LOCATION ROAD NAME Winton		ROAD TYPE R D		CRASH DATE / TIME* 07/27/2022 21:37		CRASH SEVERITY 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY			
REFERENCE POINT 1-INTERSECTION 2-MILE POST 3-HOUSE #		DIRECTION FROM REFERENCE 1-NORTH 2-SOUTH 3-EAST 4-WEST		ROUTE TYPE IR-INTERSTATE ROUTE(TP) US-FEDERAL US ROUTE SR-STATE ROUTE CR-NUMBERED COUNTY ROUTE TR-NUMBERED TOWNSHIP ROUTE		ROAD TYPE AL-ALLEY AV-AVENUE BL-BOULEVARD CR-CIRCLE CT-COURT DR-DRIVE HE-HEIGHTS		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Williamsburg		ROAD TYPE W A		LATITUDE DECIMAL DEGREES 39.322748		LONGITUDE DECIMAL DEGREES -84.541005	
DISTANCE FROM REFERENCE 1-MILES 2-Feet 3-YARDS		DISTANCE UNIT OF MEASURE 1-MILES 2-Feet 3-YARDS		IR-INTERSTATE ROUTE(TP) US-FEDERAL US ROUTE SR-STATE ROUTE CR-NUMBERED COUNTY ROUTE TR-NUMBERED TOWNSHIP ROUTE		ROAD TYPE HW-HIGHWAY LA-LANE MP-MILEPOST OV-OVAL PK-PARKWAY PI-PIKE PL-PLACE		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Williamsburg		ROAD TYPE W A		LATITUDE DECIMAL DEGREES 39.322748		LONGITUDE DECIMAL DEGREES -84.541005	
LOCATION OF FIRST HARMFUL EVENT 1-ON ROADWAY 2-ON SHOULDER 3-IN MEDIAN 4-ON ROADSIDE 5-ON GORE 6-OUTSIDE TRAFFIC WAY 7-ON RAMP 8-OFF RAMP		9-CROSSOVER 10-DRIVEWAY/ALLEY ACCESS 11-RAILWAY GRADE CROSSING 12-SHARED USE PATHS OR TRAILS 13-BIKE LANE 14-TOLL BOOTH 99-OTHER / UNKNOWN		MANNER OF CRASH COLLISION/IMPACT 1-NOT COLLISION 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 (ANY TYPE) 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 1 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 1-DAYLIGHT 2-DAWN/DUSK 3-DARK - LIGHTED ROADWAY 4-DARK - ROADWAY NOT LIGHTED 5-DARK - UNKNOWN ROADWAY LIGHTING 9-OTHER / UNKNOWN		WEATHER 1-CLEAR 2-CLOUDY 3-FOG, SMOG, SMOKE 4-RAIN 5-SLEET, HAIL 6-SNOW 7-SEVERE CROSSWINDS 8-BLOWING SAND, SOIL, DIRT, SNOW 9-FREEZING RAIN OR FREEZING DRIZZLE 99-OTHER / UNKNOWN		NARRATIVE On 07/27/2022 at 9:37 P.M. Unit 1 was traveling north on Winton Rd. Unit 1 made a left hand turn to travel west on Williamsburg Way. Unit 2 was traveling east on Williamsburg Way and was slowing/stopped for a stop sign. Unit 1 failed to control their vehicle and hit Unit 2 on the front of their vehicle.		See OH-2									
CRASH REPORTED DATE / TIME 07/27/2022 21:37		DISPATCH DATE / TIME 07/27/2022 21:38		ARRIVAL DATE / TIME 07/27/2022 21:43		SCENE CLEARED DATE / TIME 07/27/2022 22:07		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST							
TOTAL TIME ROADWAY CLOSED 0		OTHER INVESTIGATION TIME 3 0		TOTAL MINUTES 5 9		OFFICER'S NAME* D. Miller		CHECKED BY OFFICER'S NAME* P.O. Wells 148							
OFFICER'S BADGE NUMBER* 1 6 7		OFFICER'S BADGE NUMBER* 1 4 8		OFFICER'S BADGE NUMBER* 1 4 8		OFFICER'S BADGE NUMBER* 1 4 8		SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)							

OWNER	UNIT # 01	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) Total Maintenance Managment INC.	OWNER PHONE: INCLUDE AREA CODE (☒ SAME AS DRIVER) 2053854
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (☒ SAME AS DRIVER)		
VEHICLE	COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE
	LP STATE OH	LICENSE PLATE # JBE2461	VEHICLE IDENTIFICATION # 1GK52C1K141R275403
	INSURANCE VERIFIED ☒	INSURANCE COMPANY Employer's Mutual	INSURANCE POLICY # 4E78502
	TYPE OF USE ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE		US DOT #
	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
	VEHICLE YEAR 2020		VEHICLE MAKE GMC
	VEHICLE MODEL Yukon		
	UNIT TYPE 03		
	# OF TRAILING UNITS 0		
EVENT(S)	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - YES 2 - NO 9 - OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL 0
	SPECIAL FUNCTION 01		
	CARGO BODY TYPE 01		
	VEHICLE DEFECTS		
	NON-MOTORIST LOCATION AT IMPACT		
	ACTION 3		
	CONTRIBUTING CIRCUMSTANCES 99		
	SEQUENCE OF EVENTS		
	NON-COLLISION		
	COLLISION WITH FIXED OBJECT - STRUCK		
FIRST HARMFUL EVENT 1		MOST HARMFUL EVENT 1	

LOCAL REPORT NUMBER 2053854	
DAMAGE DAMAGE SCALE 2 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR 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 0 - NO DAMAGE 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 13 - TOP 99 - UNKNOWN	
TRAFFIC TRAFFICWAY FLOW 2 1 - ONE-WAY 2 - TWO-WAY # 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 2 TO 4	
UNIT SPEED 15 POSTED SPEED 35	
DETECTED SPEED 1 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED	

OWNER	UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER)
	<u>012</u>		
VEHICLE	OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)		
	COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		
	COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
	LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #
	<u>OH</u>	<u>P090060</u>	<u>1G1P1C5SH4C73441554</u>
	<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #
	<u>Grange</u>	<u>4321294</u>	
	TYPE OF USE	US DOT #	VEHICLE YEAR
	<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		<u>2012</u>
	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	VEHICLE MAKE
<input type="checkbox"/>	<input type="checkbox"/>	<u>Chevy</u>	
EVENT(S)	VEHICLE WEIGHT GVWR/GCWR	HAZARDOUS MATERIAL	VEHICLE MODEL
	<u>1 - ≤10K LBS.</u> <u>2 - 10,001 - 26K LBS.</u> <u>3 - >26K LBS.</u>	<input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	<u>Cruze</u>
	UNIT TYPE	CLASS #	PLACARD ID #
	<u>01</u>		
	# OF TRAILING UNITS		
	<u>0</u>		
	WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?	AUTONOMOUS MODE LEVEL	
	<u>2</u> 1-YES 2-NO 9-OTHER/UNKNOWN	<u>0</u>	
	SPECIAL FUNCTION		
	<u>01</u>		
CARGO BODY TYPE			
<u>01</u>			
VEHICLE DEFECTS			
<u>01</u>			
NON-MOTORIST LOCATION AT IMPACT			
<u>01</u>			
ACTION			
<u>4</u>			
CONTRIBUTING CIRCUMSTANCES			
<u>01</u>			
SEQUENCE OF EVENTS			
<u>120</u>			
NON-COLLISION			
<u>1</u>			
COLLISION WITH FIXED OBJECT - STRUCK			
<u>1</u>			
FIRST HARMFUL EVENT	MOST HARMFUL EVENT		
<u>1</u>	<u>1</u>		

LOCAL REPORT NUMBER	
<u>22053854</u>	
DAMAGE	
DAMAGE SCALE	
<u>2</u> 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	
<u>12</u> 0 - NO DAMAGE 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 13 - TOP 99 - UNKNOWN	
TRAFFICWAY FLOW	TRAFFIC CONTROL
<u>2</u> 1 - ONE-WAY 2 - TWO-WAY	<u>4</u> 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
<u>2</u>	<u>1</u> 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION	
<u>4</u> FROM <u>3</u> TO	
UNIT SPEED	DETECTED SPEED
<u>05</u>	<u>1</u> 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED	
<u>25</u>	

HSY8306 OH1M 1/19 [760-1500]

LOCAL REPORT NUMBER PD-22-053854	REPORTING AGENCY Fairfield Police Department	DATE OF ACCIDENT 7/27/22
IN COUNTY OF Butler	ACCIDENT LOCATION Winton Rd. // Williamsburg Way.	

Williamsburg way.

Winton Rd

Stop sign

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|
N
NOT TO
scale

OFFICER'S SIGNATURE D. Miller	BADGE NO. 167
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