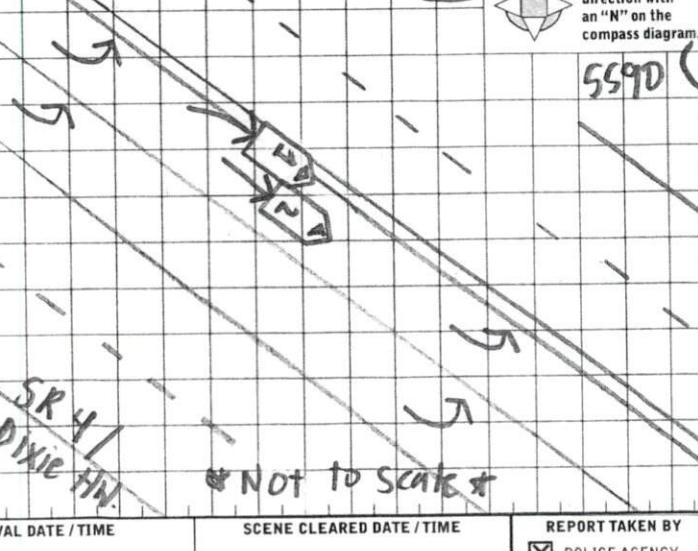




## TRAFFIC CRASH REPORT

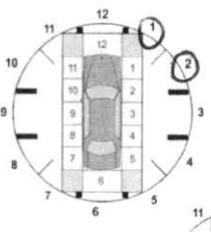
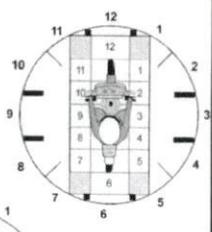
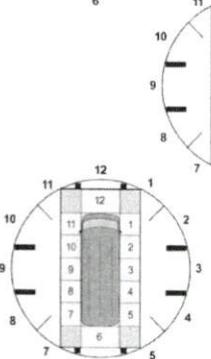
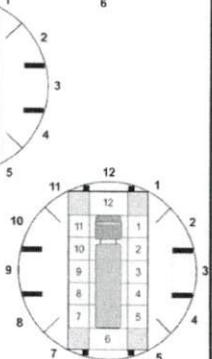
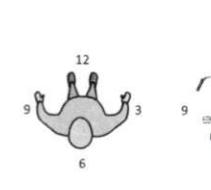
\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION		2 2 0 5 5 2 7 6
		REPORTING AGENCY NAME* Fairfield Police Department		NCIC* 0 0 9 0 1
COUNTY* 0 9		LOCALITY* 1 - CITY 1 - CITY 2 - VILLAGE 2 - VILLAGE 3 - TOWNSHIP 3 - TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield
REFERENCE LOCATION	ROUTE TYPE S R	ROUTE NUMBER 4	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 5590
REFERENCE POINT 3	DIRECTION FROM REFERENCE 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	ROUTE TYPE IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE	ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS	ROAD TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS	ROUTE TYPE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY	
LOCATION OF FIRST HARMFUL EVENT 0 1			MANNER OF CRASH COLLISION/IMPACT 7	
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			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	
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				
DIRECTION OF TRAVEL 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST			INTERSECTION RELATED <input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH 4 <input type="checkbox"/> WITHIN INTERCHANGE AREA	
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			ROADWAY <input type="checkbox"/> ROADWAY DIVIDED	
WORK ZONE RELATED  <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE			WORK ZONE TYPE 1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER	
LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE 1ST WORK ZONE 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA			CONTOUR 1	CONDITIONS 1
WEATHER 0 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
LIGHT CONDITION 3			1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 9 - OTHER / UNKNOWN	WEATHER 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN
NARRATIVE			 <p>On 08/02/22 at around 3:54 a.m., the driver of Unit 2 stated that she was traveling southeast in the leftmost left-hand turn lane on Dixie Hw. When at 5590 Dixie Hw., Unit 2 slowed in traffic in order to make a left-hand turn into the parking lot. Unit 1 was traveling southeast on Dixie Hw. at a high rate of speed and in the leftmost left-hand turn lane. When at 5590 Dixie Hw., Unit 1 crossed over the double yellow line and collided with Unit 2. Unit 1 then continued southeast in the opposing lane of travel.</p> <p>The driver of Unit 1 stated that Unit 2 changed lanes and cut her off, therefore, causing the accident.</p> <p>No citation was issued for the accident because officers were unable to determine fault.</p>	
CRASH REPORTED DATE / TIME 0 8 0 2 2 0 2 2 0 3 5 4		DISPATCH DATE / TIME 0 8 0 2 2 0 2 2 0 3 5 7		ARRIVAL DATE / TIME 0 8 0 2 2 0 2 2 0 3 5 7
SCENE CLEARED DATE / TIME 0 8 0 2 2 0 2 2 0 4 2 0		REPORT TAKEN BY		
TOTAL TIME ROADWAY CLOSED 2 6		OTHER INVESTIGATION TIME 3 8		TOTAL MINUTES 6 1
OFFICER'S NAME* O. Eckstein		CHECKED BY OFFICER'S NAME* SGT. K. HARRINGTON		
OFFICER'S BADGE NUMBER* 1 6 5		CHECKED BY OFFICER'S BADGE NUMBER*		

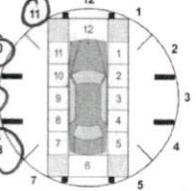
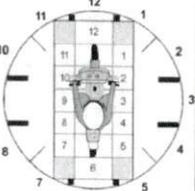
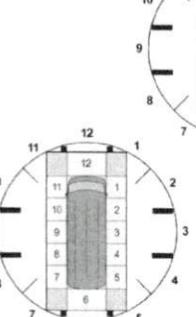
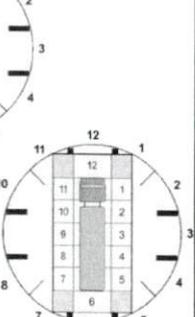
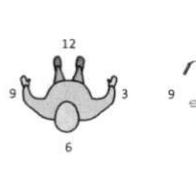
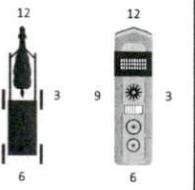
HSY7001 OH1 1/19 [760-0820]

PAGE 1 OF 4

UNIT # <u>0 1</u>	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER)		OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER)				
OWNER ADDRESS: STREET, CITY, STATE, ZIP <input checked="" type="checkbox"/> SAME AS DRIVER)							
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE					
LP STATE <u>O H</u>	LICENSE PLATE # <u>P064728</u>	VEHICLE IDENTIFICATION # <u>5J8TC2H63KL020982</u>	VEHICLE YEAR <u>2019</u> VEHICLE MAKE <u>Acura</u>				
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY <u>State Farm</u>	INSURANCE POLICY # <u>974 6739-F04-35</u>	COLOR <u>Black</u> VEHICLE MODEL <u>MDX</u>				
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME				
<input type="checkbox"/> INTERLOCK EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	# OCCUPANTS <u>0 1</u>	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.				
HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD							
UNIT TYPE <u>0 3</u>	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	
<u>0</u>	# OF TRAILING UNITS						
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? <u>2</u> 1 - YES 2 - NO 9 - OTHER / UNKNOWN			0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION				
SPECIAL FUNCTION <u>0 1</u> 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER			1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - BUS - OTHER 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 <u>0 1</u>			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 <u>0 1</u> 2 - HEAD LAMPS 3 - TAIL LAMPS			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 <u>0 1</u> 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 <u>3</u> 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN			1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - PRE-CRASH 5 - OVERTAKING/PASSING 6 - MAKING LEFT TURN 7 - MAKING RIGHT TURN 8 - BACKING 9 - CHANGING LANES 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVING REVERSE 13 - SWERVING TO AVOID 14 - WORKING 15 - PUSHING VEHICLE	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 - DRIVING REVERSE 13 - SWERVING TO AVOID 14 - WORKING 15 - PUSHING VEHICLE	1 - APPROACHING OR LEAVING VEHICLE 2 - ENTERING OR CROSSING SPECIFIED LOCATION 3 - WALKING, RUNNING, JOGGING, PLAYING 4 - STANDING 5 - WORKING 6 - PUSHING VEHICLE	7 - NEGOTIATING A CURVE 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVING REVERSE 13 - SWERVING TO AVOID 14 - WORKING 15 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN
CONTRIBUTING CIRCUMSTANCES <u>0 5</u> 1 - FAILURE TO YIELD 2 - RAN RED LIGHT 3 - RAN STOP SIGN 4 - DROVE OFF ROAD 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 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 <u>1 2 0</u> 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	
COLLISION WITH FIXED OBJECT - STRUCK <u>4 5 6</u> 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 SUPPORT 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES 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 <u>1</u>			MOST HARMFUL EVENT <u>1</u>				

LOCAL REPORT NUMBER <u>2 2 0 5 5 2 7 6</u>	
DAMAGE	
<u>2</u>	DAMAGE SCALE 1 - NONE 2 - MINOR 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>0 1</u>	0 - NO DAMAGE 1 - 12 - REFER TO UNIT DIAGRAM 13 - TOP
14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN	
TRAFFIC	
TRAFFIC WAY FLOW <u>2</u>	TRAFFIC CONTROL 1 - ONE-WAY 2 - TWO-WAY 6
# OF THROUGH LANES ON ROAD <u>4</u>	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION	
FROM <u>6</u> TO <u>7</u>	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - SOUTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
UNIT SPEED <u>5 0</u>	
DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED	
POSTED SPEED <u>3 5</u>	

UNIT # <u>0 2</u>	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER	OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER		
OWNER ADDRESS: STREET, CITY, STATE, ZIP <input checked="" type="checkbox"/> SAME AS DRIVER				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
LP STATE <u>O H</u>	LICENSE PLATE # <u>GEG3000</u>	VEHICLE IDENTIFICATION # <u>1G4HA5EM0AU113705</u>	VEHICLE YEAR <u>2010</u>	VEHICLE MAKE <u>Buick</u>
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY <u>Grange</u>	INSURANCE POLICY # <u>4725402</u>	COLOR <u>Red</u>	VEHICLE MODEL <u>Lucerne</u>
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
<input type="checkbox"/> INTERLOCK EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	# OCCUPANTS <u>0 1</u>	VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	
HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD		CLASS # <u></u>	PLACARD ID # <u></u>	
UNIT TYPE <u>0 1</u>	3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	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 <u>0</u>				
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? <u>2</u> 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		
SPECIAL FUNCTION <u>0 1</u> 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		1 - NONE 2 - TAXI 3 - BUS - INTERCITY 4 - BUS - SHUTTLE 5 - BUS - OTHER 6 - BUS - TRANSIT/COMMUTER 7 - BUS - CHARTER/TOUR 8 - BUS - PUBLIC UTILITY 9 - BUS - POLICE 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		
CARGO BODY TYPE <u>0 1</u> 2 - BUS		1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 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 15 - DUMP 16 - CONCRETE MIXER 17 - AUTO TRANSPORTER 18 - GARBAGE/REFUSE 19 - DUMP 20 - SAFETY SERVICE PATROL		
VEHICLE DEFECTS <u>0 1</u> 2 - HEAD LAMPS 3 - TAIL LAMPS		1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS 4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT		
NON-MOTORIST LOCATION AT IMPACT <u>0 1</u> 2 - INTERSECTION - UNMARKED CROSSWALK		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 13 - APPROACHING OR LEAVING VEHICLE 14 - ENTERING TRAFFIC LANE 15 - LEAVING TRAFFIC LANE 16 - WORKING 17 - PUSHING VEHICLE 18 - STANDING 19 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - LYING IN ROADWAY 23 - NOT DISCERNIBLE 24 - OTHER IMPROPER ACTION		
ACTION <u>4</u> 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN		1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - PRE-CRASH 5 - BOTH STRIKING & STRUCK 6 - OVERTAKING/PASSING 7 - STRUCK 8 - STRIKING 9 - OTHER / UNKNOWN 10 - BACKING 11 - CHANGING LANES 12 - MAKING RIGHT TURN 13 - MAKING LEFT TURN 14 - PARKED 15 - SLOWING OR STOPPED IN TRAFFIC 16 - DRIVING 17 - DRIVING 18 - DRIVING 19 - SWERVING TO AVOID 20 - DRIVING 21 - DRIVING 22 - DRIVING 23 - DRIVING 24 - DRIVING 25 - DRIVING 26 - DRIVING 27 - DRIVING 28 - DRIVING 29 - DRIVING 30 - DRIVING 31 - DRIVING 32 - DRIVING 33 - DRIVING 34 - DRIVING 35 - DRIVING 36 - DRIVING 37 - DRIVING 38 - DRIVING 39 - DRIVING 40 - DRIVING 41 - DRIVING 42 - DRIVING 43 - DRIVING 44 - DRIVING 45 - DRIVING 46 - DRIVING 47 - DRIVING 48 - DRIVING 49 - DRIVING		
CONTRIBUTING CIRCUMSTANCES <u>0 1</u> 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN		1 - LEFT OF CENTER 2 - FOLLOWING TOO CLOSE / ACDA 3 - IMPROPER LANE CHANGE 4 - IMPROPER PASSING 5 - DROVE OFF ROAD 6 - IMPROPER BACKING 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 25 - CURB 26 - DITCH 27 - EMBANKMENT 28 - FENCE 29 - BUILDING 30 - TUNNEL 31 - TREE 32 - OTHER FIXED OBJECT 33 - FIRE HYDRANT		
SEQUENCE OF EVENTS <u>1 2 0</u> 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT 6 - IMPACT ATTENUATOR / CRASH CUSHION 7 - BRIDGE OVERHEAD STRUCTURE 8 - BRIDGE PIER OR ABUTMENT 9 - BRIDGE PARAPET 10 - BRIDGE RAIL 11 - GUARDRAIL FACE		1 - SEPARATION OF UNITS 2 - RAN OFF ROAD RIGHT 3 - RAN OFF ROAD LEFT 4 - CROSS MEDIAN 5 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 6 - PEDESTRIAN 7 - PEDALCYCLE 8 - RAILWAY VEHICLE 9 - ANIMAL - FARM 10 - ANIMAL - DEER 11 - ANIMAL - OTHER 12 - MOTOR VEHICLE IN TRANSPORT 13 - PARKED MOTOR VEHICLE 14 - WORK ZONE MAINTENANCE EQUIPMENT 15 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 16 - OTHER MOBILE OBJECT 17 - CURB 18 - DITCH 19 - EMBANKMENT 20 - FENCE 21 - BUILDING 22 - TUNNEL 23 - TREE 24 - OTHER FIXED OBJECT 25 - FIRE HYDRANT		
COLLISION WITH FIXED OBJECT - STRUCK <u>1</u> 1 - IMPACT ATTENUATOR / CRASH CUSHION 2 - BRIDGE OVERHEAD STRUCTURE 3 - BRIDGE PIER OR ABUTMENT 4 - BRIDGE PARAPET 5 - BRIDGE RAIL 6 - GUARDRAIL FACE		1 - IMPROPER START FROM A PARKED POSITION 2 - ENTERING TRAFFIC LANE 3 - LEAVING TRAFFIC LANE 4 - PARKED 5 - SLOWING OR STOPPED IN TRAFFIC 6 - DRIVING 7 - DRIVING 8 - DRIVING 9 - DRIVING 10 - DRIVING 11 - DRIVING 12 - DRIVING 13 - DRIVING 14 - DRIVING 15 - DRIVING 16 - DRIVING 17 - DRIVING 18 - DRIVING 19 - DRIVING 20 - DRIVING 21 - DRIVING 22 - DRIVING 23 - DRIVING 24 - DRIVING 25 - DRIVING 26 - DRIVING 27 - DRIVING 28 - DRIVING 29 - DRIVING 30 - DRIVING 31 - DRIVING 32 - DRIVING 33 - DRIVING 34 - DRIVING 35 - DRIVING 36 - DRIVING 37 - DRIVING 38 - DRIVING 39 - DRIVING 40 - DRIVING 41 - DRIVING 42 - DRIVING 43 - DRIVING 44 - DRIVING 45 - DRIVING 46 - DRIVING 47 - DRIVING 48 - DRIVING 49 - DRIVING		
FIRST HARMFUL EVENT <u>1</u>		MOST HARMFUL EVENT <u>1</u>		

LOCAL REPORT NUMBER <u>2 2 0 5 5 2 7 6</u>	
DAMAGE DAMAGE SCALE 2 - NONE 2 - MINOR 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 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP	
TRAFFIC TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY <u>2</u>	
TRAFFIC CONTROL 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL <u>6</u>	
# OF THROUGH LANES ON ROAD <u>4</u>	
RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING	
UNIT / NON-MOTORIST DIRECTION 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN FROM <u>6</u> TO <u>7</u>	
UNIT SPEED <u>1 0</u>	
DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED <u>1</u>	
POSTED SPEED <u>3 5</u>	



# MOTORIST / Non-MOTORIST

MOTORIST / NON-MOTORIST		LOCAL REPORT NUMBER													
		2 2 0 5 5 2 7 6					DATE OF BIRTH		AGE	GENDER					
UNIT #	NAME: LAST, FIRST, MIDDLE														
0 1	Rai, Nari, Maya														
ADDRESS: STREET, CITY, STATE, ZIP		5489 Chateau Way, Fairfield, OH, 45014													
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			
3	2	Fairfield EMS	Mercy Fairfield			0 4	<input type="checkbox"/>		0 1	1	1	1			
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION				CITATION NUMBER				
O H															
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)						
D			1	<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA	1	1	1	1	1	1				
UNIT #	NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH		AGE	GENDER	
0 2	Sutton, Margaret										0 6 3 0 1 9 4 7		7 5	F	
ADDRESS: STREET, CITY, STATE, ZIP		9309 Dockside Way, West Chester, OH, 45069										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			
3	2	Fairfield EMS	Mercy Fairfield			0 4	<input type="checkbox"/>		0 1	1	1	1			
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION				CITATION NUMBER				
O H															
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)						
D			1	<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA	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	DOT-COMPLIANT MC HELMET		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
							<input type="checkbox"/>								
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION				CITATION NUMBER				
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)						
			1	<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA	1	1	1	1	1	1				
<b>INJURIES</b>	<b>SEATING POSITION</b>	<b>AIR BAG</b>	<b>DL CLASS</b>	<b>DL RESTRICTION(S)</b>	<b>DRIVER DISTRACTION</b>	<b>TEST STATUS</b>									
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-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										
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										
5-NO APPARENT INJURY	5-SECOND - MIDDLE	5-NOT APPLICABLE	5-MIC MOPED ONLY	5-EXCEPT CLASS A BUS	5-TEST GIVEN, RESULTS UNKNOWN										
	6-SECOND - RIGHT SIDE	9-DEPLOYMENT UNKNOWN	6-NO VALID DL	6-EXCEPT CLASS A & CLASS B BUS											
	7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7-EXCEPT TRACTOR-TRAILER											
	8-THIRD - MIDDLE	1-NOT EJECTED	H-HAZMAT	8-INTERMEDIATE LICENSE RESTRICTIONS	1-NONE										
	9-THIRD - RIGHT SIDE	2-PARTIALLY EJECTED	M-MOTORCYCLE	9-LEARNER'S PERMIT RESTRICTIONS	2-BLOOD										
	10-SLEEPER SECTION OF TRUCK CAB	3-TOTALLY EJECTED	P-PASSENGER	10-LIMITED TO DAYLIGHT ONLY	3-URINE										
		4-NOT APPLICABLE	N-TANKER	11-LIMITED TO EMPLOYMENT	4-BREATH										
	11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1-NOT TRAPPED	Q-MOTOR SCOOTER	12-LIMITED - OTHER	5-OTHER										
	12-PASSENGER IN UNENCLOSED CARGO AREA	2-EXTRICATED BY MECHANICAL MEANS	R-THREE-WHEEL MOTORCYCLE	13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)											
	13-TRAILING UNIT	3-FREED BY NON-MECHANICAL MEANS	S-SCHOOL BUS	14-MILITARY VEHICLES ONLY											
	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		T-DOUBLE & TRIPLE TRAILERS	15-MOTOR VEHICLES WITHOUT AIR BRAKES											
	15-NON-MOTORIST		X-TANKER / HAZMAT	16-OUTSIDE MIRROR											
	99-OTHER / UNKNOWN			17-PROSTHETIC AID											
				18-OTHER											
<b>INJURED TAKEN BY</b>	<b>EJECTION</b>	<b>OL ENDORSEMENT</b>	<b>CONDITION</b>	<b>DRUG TEST TYPE</b>											
1-NOT TRANSPORTED /TREATED AT SCENE	1-NOT EJECTED	H-HAZMAT	1-APPARENTLY NORMAL	1-NONE											
2-EMS	2-PARTIALLY EJECTED	M-MOTORCYCLE	2-PHYSICAL IMPAIRMENT	2-BLOOD											
3-POLICE	3-TOTALLY EJECTED	P-PASSENGER	3-EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	3-URINE											
9-OTHER / UNKNOWN	4-NOT APPLICABLE	N-TANKER	4-ILLNESS	4-OTHER											
		Q-MOTOR SCOOTER	5-FELL ASLEEP, FAINTED, FATIGUED, ETC.												
	11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	R-THREE-WHEEL MOTORCYCLE	6-UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL												
	12-PASSENGER IN UNENCLOSED CARGO AREA	S-SCHOOL BUS	7-OTHER												
	13-TRAILING UNIT	T-DOUBLE & TRIPLE TRAILERS	8-OTHER / UNKNOWN												
	14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	X-TANKER / HAZMAT	9-AMPHETAMINES												
	15-NON-MOTORIST		2-BARBITURATES												
	99-OTHER / UNKNOWN		3-BENZODIAZEPINES												
			4-CANNABINOID												
			5-COCAIN												
			6-OPIATES / OPIOIDS												
			7-OTHER												
			8-NEGATIVE RESULTS												
<b>SAFETY EQUIPMENT</b>	<b>TRAPPED</b>	<b>GENDER</b>	<b>DRUG TEST RESULT(S)</b>												
1-NONE USED	1-NOT TRAPPED	F-FEMALE	1-AMPHETAMINES												
2-SHOULDER BELT ONLY USED	2-EXTRICATED BY MECHANICAL MEANS	M-MALE	2-BARBITURATES												
3-LAP BELT ONLY USED	3-FREED BY NON-MECHANICAL MEANS	U-OTHER / UNKNOWN	3-BENZODIAZEPINES												
4-SHOULDER & LAP BELT USED			4-CANNABINOID												
5-CHILD RESTRAINT SYSTEM - FORWARD FACING			5-COCAIN												
6-CHILD RESTRAINT SYSTEM - REAR FACING			6-OPIATES / OPIOIDS												
7-BOOSTER SEAT			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															