



TRAFFIC CRASH REPORT

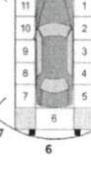
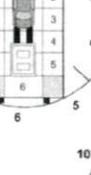
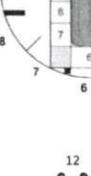
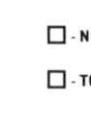
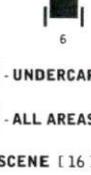
*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

				LOCAL REPORT NUMBER*		
<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input checked="" type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION		2 2 0 5 5 3 6 1		
		REPORTING AGENCY NAME*		NCIC* Fairfield Police Department 0 0 9 0 1		
COUNTY* 0 9		LOCALITY* 1-CITY 1 2-VILLAGE 3-TOWNSHIP		LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield		
ROUTE TYPE S R 4		ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST		LOCATION ROAD NAME		ROAD TYPE
ROUTE TYPE S R 4 B		PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)		ROAD TYPE
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 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
DISTANCE FROM REFERENCE		DISTANCE UNIT OF MEASURE 1-MILES 2-FEET 3-YARDS				
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				MANNER OF CRASH COLLISION/IMPACT 9-CROSSOVER 10-DRIVEWAY/ALLEY ACCESS 11-RAILWAY GRADE CROSSING 12-SHARED USE PATHS OR TRAILS 13-BIKE LANE 14-TOLL BOOTH 99-OTHER/ UNKNOWN		1- NOT COLLISION 2- BETWEEN 3- TWO MOTOR VEHICLES IN 4- TRANSPORT 5- BACKING 6- ANGLE 7- SIDESWIPE, SAME DIRECTION 8- SIDESWIPE, OPPOSITE DIRECTION 9- REAR-END 10- HEAD-ON 11- OTHER / UNKNOWN
<input type="checkbox"/> 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 SIGN 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA		DIRECTION OF TRAVEL 1-NORTH 2-SOUTH 3-EAST 4-WEST
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 0 1 1-CLEAR 2-CLOUDY 3-FOG, SMOG, SMOKE 4-RAIN 5-SLEET, HAIL		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		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
NARRATIVE On 8/2/22 at 3:29 P.M. Unit 1 was traveling northwest on State Route 4 at By Pass 4. Unit 2 was traveling northbound on Ross Road at Route 4. Unit 1 failed to obey traffic control devices and ran the red light as he entered the intersection and struck Unit 2 as Unit 2 entered the intersection. Unit 1 was cited additionally with No Valid Driver's license (F.C.O. 335.01a1) - UM				CONTOUR 1 CONDITIONS 1 SURFACE 2  Indicate the north direction with an "N" on the compass diagram. SEE OH-2		
				REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODS)		
CRASH REPORTED DATE / TIME 0 8 0 2 2 0 2 2 1 5 2 9		DISPATCH DATE / TIME 0 8 0 2 2 0 2 2 1 5 2 9		ARRIVAL DATE / TIME 0 8 0 2 2 0 2 2 1 5 3 4		SCENE CLEARED DATE / TIME 0 8 0 2 2 0 2 2 1 6 2 3
TOTAL TIME ROADWAY CLOSED 0 0		OTHER INVESTIGATION TIME 2 0		TOTAL MINUTES 7 4		OFFICER'S NAME* N. Davis OFFICER'S BADGE NUMBER* 1 6 9 CHECKED BY OFFICER'S NAME* B. Wells 1458 CHECKED BY OFFICER'S BADGE NUMBER* 1 7 8 1 1 1



UNIT

UNIT # 0 1	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 O H	LICENSE PLATE # JVS1245	VEHICLE IDENTIFICATION # J T K D E 1 7 7 8 7 0 2 0 0 2 3 5		
INSURANCE VERIFIED <input checked="" type="checkbox"/>	INSURANCE COMPANY Trexis	VEHICLE YEAR 2 0 0 7		
INSURANCE POLICY # 12188	COLOR Maroon	VEHICLE MAKE Toyota		
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #		
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/>	HIT/SKIP UNIT <input type="checkbox"/>	# OCCUPANTS 0 1	VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	
TOWED BY: COMPANY NAME		HAZARDOUS MATERIAL		
		MATERIAL RELEASED <input type="checkbox"/>	CLASS # PLACARD ID # <input type="checkbox"/> PLACARD	
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
UNIT TYPE 0 1	# OF TRAILING UNITS			
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - YES 2 - NO 9 - OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL 0	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN
SPECIAL FUNCTION 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT
CARGO BODY TYPE 0 1		1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL
VEHICLE DEFECTS 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP	21 - MAIL CARRIER 99 - OTHER / UNKNOWN
NON-MOTORIST LOCATION AT IMPACT 1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		1 - FIRE 2 - MILITARY 3 - POLICE 4 - PUBLIC UTILITY 5 - CONSTRUCTION EQUIPMENT	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 15 - DUMP	
NON-MOTORIST LOCATION AT IMPACT 1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK 9 - TRAVEL LANE - OTHER LOCATION	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	21 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN
ACTION 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN		1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE
ACTION 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN		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	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN
CONTRIBUTING CIRCUMSTANCES 1 - RAN RED LIGHT 2 - RAN STOP SIGN 3 - UNSAFE SPEED 4 - 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	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION
SEQUENCE OF EVENTS 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT		6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE
NON-COLLISION 1 - IMPACT ATTENUATOR / CRASH CUSHION 2 - BRIDGE OVERHEAD STRUCTURE 3 - BRIDGE PIER OR ABUTMENT 4 - BRIDGE PARAPET 5 - BRIDGE RAIL 6 - GUARDRAIL FACE		31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOBILE OBJECT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN
COLLISION WITH FIXED OBJECT - STRUCK 1 - GUARDRAIL END 2 - PORTABLE BARRIER 3 - MEDIAN CABLE BARRIER 4 - MEDIAN GUARDRAIL BARRIER 5 - MEDIAN CONCRETE BARRIER 6 - MEDIAN OTHER BARRIER		43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT		
1 - FIRST HARMFUL EVENT 1		1 - MOST HARMFUL EVENT 1		

LOCAL REPORT NUMBER											
2	2	0	5	5	3	6	1				
DAMAGE											
DAMAGE SCALE											
<u>4</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											
0 - NO DAMAGE						14 - UNDERCARRIAGE					
<u>1</u>		<u>2</u>		1-12 - REFER TO UNIT DIAGRAM		15 - VEHICLE NOT AT SCENE		99 - UNKNOWN			
13 - TOP											
TRAFFIC											
TRAFFICWAY FLOW						TRAFFIC CONTROL					
<u>1</u>		<u>2</u>		1 - ONE-WAY		1 - ROUNDABOUT		4 - STOP SIGN			
				2 - TWO-WAY		2 - SIGNAL		5 - YIELD SIGN			
						<u>2</u>		3 - FLASHER			
# OF THROUGH LANES ON ROAD						RAIL GRADE CROSSING					
<u>1</u>		<u>2</u>		4		<u>1</u>		1 - NOT INVOLVED			
								2 - INVOLVED-ACTIVE CROSSING			
								3 - INVOLVED-PASSIVE CROSSING			
UNIT / NON-MOTORIST DIRECTION											
FROM <u>7</u> TO <u>6</u>						1 - NORTH 5 - NORTHEAST					
						2 - SOUTH 6 - NORTHWEST					
						3 - EAST 7 - SOUTHEAST					
						4 - WEST 8 - SOUTHWEST					
						9 - OTHER / UNKNOWN					
UNIT SPEED						DETECTED SPEED					
<u>1</u>		<u>2</u>		<u>3</u>		<u>1</u>		1 - STATED / ESTIMATED SPEED			
								2 - CALCULATED / EDR			
								3 - UNDETERMINED			
POSTED SPEED											
<u>1</u>		<u>2</u>		<u>3</u>		<u>1</u>					
5 0											

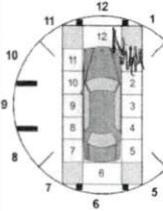
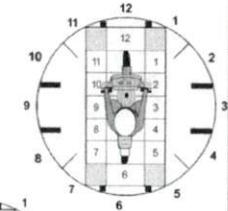
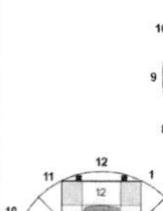
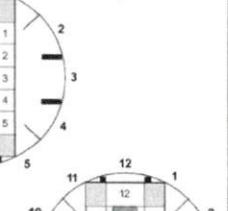
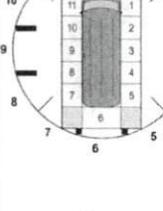
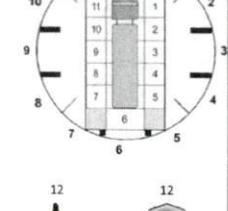
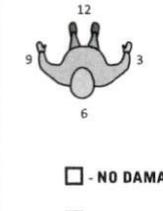
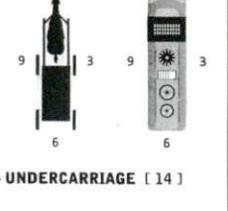
UNIT # **012** OWNER NAME: LAST, FIRST, MIDDLE SAME AS DRIVER
Toler, Douglas

OWNER PHONE: INCLUDE AREA CODE SAME AS DRIVER

OWNER ADDRESS: STREET, CITY, STATE, ZIP SAME AS DRIVER

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

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LOCAL REPORT NUMBER	
2 2 0 5 5 3 6 1	
DAMAGE	
DAMAGE SCALE	
4	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	
01	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 - ONE-WAY 4 - STOP SIGN 2 - TWO-WAY 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING
4	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	
5	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED	
2 5	

LP STATE O H	LICENSE PLATE # YOSKEE	VEHICLE IDENTIFICATION # 5F1RYD4H40GB045830	VEHICLE YEAR 2016	VEHICLE MAKE Acura
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY All State	INSURANCE POLICY # 826135781	COLOR Black	VEHICLE MODEL MDX
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 DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT #OCCUPANTS 0 4		VEHICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED CLASS # PLACARD ID # <input type="checkbox"/> PLACARD	

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 - MOVED 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
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0	# OF TRAILING UNITS			
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 1 - YES 2 - NO 9 - OTHER / UNKNOWN				
AUTONOMOUS MODE LEVEL				

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
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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
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01	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
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01	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
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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 - 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
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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
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120	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
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4516	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
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1	FIRST HARMFUL EVENT	MOST HARMFUL EVENT
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MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER													
2 2 0 5 5 3 6 1													
UNIT #		NAME: LAST, FIRST, MIDDLE											
0 1		Leon Simon, Isidro De											
ADDRESS: STREET, CITY, STATE, ZIP													
2039 Pater Ave. Hamilton, OH 45015													
INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED													
5						0 4		<input type="checkbox"/> DOT-Compliant MC HELMET					
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 1		ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		Failure to Obey Signals 255258			
UNIT #		NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH		AGE GENDER	
0 2		Toler, Kari E								0 3 0 2 1 9 7 6		4 6 F	
ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE			
844 Yorkhaven Rd. Cincinnati, OH 45240													
INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED													
5						0 4		<input type="checkbox"/> DOT-Compliant MC HELMET					
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 1		ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		ALCOHOL TEST 1 1 1 1		DRUG TEST(S) 1 1	
UNIT #		NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH		AGE GENDER	
0 1										0			
ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE			
844 Yorkhaven Rd. Cincinnati, OH 45240													
INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED													
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 1		ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		ALCOHOL TEST 1 1 1 1		DRUG TEST(S) 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-PASSINGER		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 HANDS-FREE 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-EXCEPT CLASS A & CLASS B BUS		5-TEST GIVEN, RESULTS UNKNOWN	
INJURED TAKEN BY		6-SECOND - RIGHT SIDE		6-DEPLOYMENT UNKNOWN		6-NO VALID OL		6-EXCEPT CLASS B & CLASS B BUS		6-EXCEPT TRACTOR-TRAILER		6-INTERMEDIATE LICENSE RESTRICTIONS	
1- NOT TRANSPORTED / TREATED AT SCENE		7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		7-NOT EJECTED		7-H - HAZMAT		7-LEARNER'S PERMIT RESTRICTIONS		7-PASSINGER		7-OTHER DISTRACTION INSIDE THE VEHICLE	
2- EMS		8-THIRD - MIDDLE		8-PARTIALLY EJECTED		8-M - MOTORCYCLE		8-N - TANKER		8-LIMITED TO DAYLIGHT ONLY		8-OTHER DISTRACTION OUTSIDE THE VEHICLE	
3- POLICE		9-THIRD - RIGHT SIDE		9-TOTALLY EJECTED		9-P - PASSENGER		9-Q - MOTOR SCOOTER		9-LIMITED TO EMPLOYMENT		9-OTHER / UNKNOWN	
9- OTHER / UNKNOWN		10-SLEEPER SECTION OF TRUCK CAB		4-NOT APPLICABLE		10-R - THREE-WHEEL MOTORCYCLE		10-S - SCHOOL BUS		10-T - DOUBLE & TRIPLE TRAILERS		10-X - TANKER / HAZMAT	
SAFETY EQUIPMENT		11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		11-NOT TRAPPED		11-F - FEMALE		11-M - MOTOR VEHICLES WITHOUT AIR BRAKES		11-15 - MILITARY VEHICLES ONLY		11-18 - OTHER	
1- NONE USED		12-PASSENGER IN UNENCLOSED CARGO AREA		12-EXTRICATED BY MECHANICAL MEANS		12-M - MALE		12-S - OUTSIDE MIRROR		12-16 - PROSTHETIC AID		12-17 - OTHER	
2- SHOULDER BELT ONLY USED		13-TRAILING UNIT		13-FREED BY NON-MECHANICAL MEANS		13-U - OTHER / UNKNOWN		13-16 - OUTSIDE MIRROR		13-17 - PROSTHETIC AID		13-18 - OTHER	
3- LAP BELT ONLY USED		14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		14-15 - MILITARY VEHICLES ONLY		14-F - FEMALE		14-16 - OUTSIDE MIRROR		14-17 - PROSTHETIC AID		14-18 - OTHER	
4- SHOULDER & LAP BELT USED		15-NON-MOTORIST		15-16 - OUTSIDE MIRROR		15-M - MALE		15-17 - PROSTHETIC AID		15-18 - OTHER		15-19 - OTHER / UNKNOWN	
5- CHILD RESTRAINT SYSTEM - FORWARD FACING		99-OTHER / UNKNOWN		16-17 - PROSTHETIC AID		16-U - OTHER / UNKNOWN		16-18 - OTHER		16-19 - OTHER / UNKNOWN		16-20 - OTHER	
6- CHILD RESTRAINT SYSTEM - REAR FACING				17-18 - OTHER		17-F - FEMALE		17-19 - OTHER / UNKNOWN		17-20 - OTHER		17-21 - OTHER	
7- BOOSTER SEAT				18-19 - OTHER		18-M - MALE		18-U - OTHER / UNKNOWN		18-20 - OTHER		18-21 - OTHER	
8- HELMET USED				19-20 - OTHER		19-U - OTHER / UNKNOWN		19-21 - OTHER / UNKNOWN		19-22 - OTHER		19-23 - OTHER	
9- PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)				20-21 - OTHER		20-U - OTHER / UNKNOWN		20-22 - OTHER / UNKNOWN		20-23 - OTHER / UNKNOWN		20-24 - OTHER / UNKNOWN	
10- REFLECTIVE CLOTHING				21-22 - OTHER		21-U - OTHER / UNKNOWN		21-23 - OTHER / UNKNOWN		21-24 - OTHER / UNKNOWN		21-25 - OTHER / UNKNOWN	
11- LIGHTING - PEDESTRIAN / BICYCLE ONLY				22-23 - OTHER		22-U - OTHER / UNKNOWN		22-24 - OTHER / UNKNOWN		22-25 - OTHER / UNKNOWN		22-26 - OTHER / UNKNOWN	
12- OTHER / UNKNOWN				23-24 - OTHER		23-U - OTHER / UNKNOWN		23-25 - OTHER / UNKNOWN		23-26 - OTHER / UNKNOWN		23-27 - OTHER / UNKNOWN	
13- OTHER / UNKNOWN				24-25 - OTHER		24-U - OTHER / UNKNOWN		24-26 - OTHER / UNKNOWN		24-27 - OTHER / UNKNOWN		24-28 - OTHER / UNKNOWN	
14- OTHER / UNKNOWN				25-26 - OTHER		25-U - OTHER / UNKNOWN		25-27 - OTHER / UNKNOWN		25-28 - OTHER / UNKNOWN		25-29 - OTHER / UNKNOWN	
15- OTHER / UNKNOWN				26-27 - OTHER		26-U - OTHER / UNKNOWN		26-28 - OTHER / UNKNOWN		26-29 - OTHER / UNKNOWN		26-30 - OTHER / UNKNOWN	
16- OTHER / UNKNOWN				27-28 - OTHER		27-U - OTHER / UNKNOWN		27-29 - OTHER / UNKNOWN		27-30 - OTHER / UNKNOWN		27-31 - OTHER / UNKNOWN	
17- OTHER / UNKNOWN				28-29 - OTHER		28-U - OTHER / UNKNOWN		28-30 - OTHER / UNKNOWN		28-31 - OTHER / UNKNOWN		28-32 - OTHER / UNKNOWN	
18- OTHER / UNKNOWN				29-30 - OTHER		29-U - OTHER / UNKNOWN		29-31 - OTHER / UNKNOWN		29-32 - OTHER / UNKNOWN		29-33 - OTHER / UNKNOWN	
19- OTHER / UNKNOWN				30-31 - OTHER		30-U - OTHER / UNKNOWN		30-32 - OTHER / UNKNOWN		30-33 - OTHER / UNKNOWN		30-34 - OTHER / UNKNOWN	
20- OTHER / UNKNOWN				31-32 - OTHER		31-U - OTHER / UNKNOWN		31-33 - OTHER / UNKNOWN		31-34 - OTHER / UNKNOWN		31-35 - OTHER / UNKNOWN	
21- OTHER / UNKNOWN				32-33 - OTHER		32-U - OTHER / UNKNOWN		32-34 - OTHER / UNKNOWN		32-35 - OTHER / UNKNOWN		32-36 - OTHER / UNKNOWN	
22- OTHER / UNKNOWN				33-34 - OTHER		33-U - OTHER / UNKNOWN		33-35 - OTHER / UNKNOWN		33-36 - OTHER / UNKNOWN		33-37 - OTHER / UNKNOWN	
23- OTHER / UNKNOWN				34-35 - OTHER		34-U - OTHER / UNKNOWN		34-36 - OTHER / UNKNOWN		34-37 - OTHER / UNKNOWN		34-38 - OTHER / UNKNOWN	
24- OTHER / UNKNOWN				35-36 - OTHER		35-U - OTHER / UNKNOWN		35-37 - OTHER / UNKNOWN		35-38 - OTHER / UNKNOWN		35-39 - OTHER / UNKNOWN	
25- OTHER / UNKNOWN				36-37 - OTHER		36-U - OTHER / UNKNOWN		36-38 - OTHER / UNKNOWN		36-39 - OTHER / UNKNOWN		36-40 - OTHER / UNKNOWN	
26- OTHER / UNKNOWN				37-38 - OTHER		37-U - OTHER / UNKNOWN		37-39 - OTHER / UNKNOWN		37-40 - OTHER / UNKNOWN		37-41 - OTHER / UNKNOWN	
27- OTHER / UNKNOWN				38-39 - OTHER		38-U - OTHER / UNKNOWN		38-40 - OTHER / UNKNOWN		38-41 - OTHER / UNKNOWN		38-42 - OTHER / UNKNOWN	
28- OTHER / UNKNOWN				39-40 - OTHER		39-U - OTHER / UNKNOWN		39-41 - OTHER / UNKNOWN		39-42 - OTHER / UNKNOWN		39-43 - OTHER / UNKNOWN	
29- OTHER / UNKNOWN				40-41 - OTHER		40-U - OTHER / UNKNOWN		40-42 - OTHER / UNKNOWN		40-43 - OTHER / UNKNOWN		40-44 - OTHER / UNKNOWN	
30- OTHER / UNKNOWN				41-42 - OTHER		41-U - OTHER / UNKNOWN		41-43 - OTHER / UNKNOWN		41-44 - OTHER / UNKNOWN		41-45 - OTHER / UNKNOWN	
31- OTHER / UNKNOWN				42-43 - OTHER		42-U - OTHER / UNKNOWN		42-44 - OTHER / UNKNOWN		42-45 - OTHER / UNKNOWN		42-46 - OTHER / UNKNOWN	
32- OTHER / UNKNOWN				43-44 - OTHER		43-U - OTHER / UNKNOWN		43-45 - OTHER / UNKNOWN		43-46 - OTHER / UNKNOWN		43-47 - OTHER / UNKNOWN	
33- OTHER / UNKNOWN				44-45 - OTHER		44-U - OTHER / UNKNOWN		44-46 - OTHER / UNKNOWN		44-47 - OTHER / UNKNOWN		44-48 - OTHER / UNKNOWN	
34- OTHER / UNKNOWN				45-46 - OTHER		45-U - OTHER / UNKNOWN		45-47 - OTHER / UNKNOWN		45-48 - OTHER / UNKNOWN		45-49 - OTHER / UNKNOWN	
35- OTHER / UNKNOWN				46-47 - OTHER		46-U - OTHER / UNKNOWN		46-48 - OTHER / UNKNOWN		46-49 - OTHER / UNKNOWN		46-50 - OTHER / UNKNOWN	
36- OTHER / UNKNOWN				47-48 - OTHER		47-U - OTHER / UNKNOWN		47-49 - OTHER / UNKNOWN		47-50 - OTHER / UNKNOWN		47-51 - OTHER / UNKNOWN	
37- OTHER / UNKNOWN				48-49 - OTHER		48-U - OTHER / UNKNOWN		48-50 - OTHER / UNKNOWN		48-51 - OTHER / UNKNOWN		48-52 - OTHER / UNKNOWN	
38- OTHER / UNKNOWN				49-50 - OTHER		49-U - OTHER / UNKNOWN		49-51 - OTHER / UNKNOWN		49-52 - OTHER / UNKNOWN		49-53 - OTHER / UNKNOWN	
39- OTHER / UNKNOWN				50-51 - OTHER		50-U - OTHER / UNKNOWN		50-52 - OTHER / UNKNOWN		50-53 - OTHER / UNKNOWN		50-54 - OTHER / UNKNOWN	
40- OTHER / UNKNOWN				51-52 - OTHER		51-U - OTHER / UNKNOWN		51-53 - OTHER / UNKNOWN		51-54 - OTHER / UNKNOWN		51-55 - OTHER / UNKNOWN	
41- OTHER / UNKNOWN				52-53 - OTHER		52-U - OTHER / UNKNOWN		52-54 - OTHER / UNKNOWN		52-55 - OTHER / UNKNOWN		52-56 - OTHER / UNKNOWN	
42- OTHER / UNKNOWN				53-54 - OTHER		53-U - OTHER / UNKNOWN		53-55 - OTHER / UNKNOWN		53-56 - OTHER / UNKNOWN		53-57 - OTHER / UNKNOWN	
43- OTHER / UNKNOWN				54-55 - OTHER		54-U - OTHER / UNKNOWN		54-56 - OTHER / UNKNOWN		54-57 - OTHER / UNKNOWN		54-58 - OTHER / UNKNOWN	
44- OTHER / UNKNOWN				55-56 - OTHER		55-U - OTHER / UNKNOWN		55-57 - OTHER / UNKNOWN		55-58 - OTHER / UNKNOWN		55-59 - OTHER / UNKNOWN	
45- OTHER / UNKNOWN				56-57 - OTHER		56-U - OTHER / UNKNOWN		56-58 - OTHER / UNKNOWN		56-59 - OTHER / UNKNOWN		56-60 - OTHER / UNKNOWN	
46- OTHER / UNKNOWN				57-58 - OTHER		57-U - OTHER / UNKNOWN		57-59 - OTHER / UNKNOWN		57-60 - OTHER / UNKNOWN		57-61 - OTHER / UNKNOWN	
47- OTHER / UNKNOWN				58-59 - OTHER		58-U - OTHER / UNKNOWN		58-60 - OTHER / UNKNOWN		58-61 - OTHER / UNKNOWN		58-62 - OTHER / UNKNOWN	
48- OTHER / UNKNOWN				59-60 - OTHER		59-U - OTHER / UNKNOWN		59-61 - OTHER / UNKNOWN		59-62 - OTHER / UNKNOWN		59-63 - OTHER / UNKNOWN	
49- OTHER / UNKNOWN				60-61 - OTHER		60-U - OTHER / UNKNOWN		60-62 - OTHER / UNKNOWN		60-63 - OTHER / UNKNOWN		60-64 - OTHER / UNKNOWN	
50- OTHER / UNKNOWN				61-62 - OTHER		61-U - OTHER / UNKNOWN		61-63 - OTHER / UNKNOWN		61-64 - OTHER / UNKNOWN		61-65 - OTHER / UNKNOWN	
51- OTHER / UNKNOWN				62-63 - OTHER		62-U - OTHER / UNKNOWN		62-64 - OTHER / UNKNOWN		62-65 - OTHER / UNKNOWN		62-66 - OTHER / UNKNOWN	
52- OTHER / UNKNOWN				63-64 - OTHER		63-U - OTHER / UNKNOWN		63-65 - OTHER / UNKNOWN		63-66 - OTHER / UNKNOWN		63-67 - OTHER / UNKNOWN	
53- OTHER / UNKNOWN				64-65 - OTHER		64-U - OTHER / UNKNOWN		64-66 - OTHER / UNKNOWN		64-67 - OTHER / UNKNOWN		64-68 - OTHER / UNKNOWN	
54- OTHER / UNKNOWN				65-66 - OTHER		65-U - OTHER / UNKNOWN		65-67 - OTHER / UNKNOWN		65-68 - OTHER / UNKNOWN		65-69 - OTHER / UNKNOWN	
55- OTHER / UNKNOWN				66-67 - OTHER		66-U - OTHER / UNKNOWN		66-68 - OTHER / UNKNOWN		66-69 - OTHER / UNKNOWN		66-70 - OTHER / UNKNOWN	
56- OTHER / UNKNOWN				67-68 - OTHER		67-U - OTHER / UNKNOWN		67-69 - OTHER / UNKNOWN		67-70 - OTHER / UNKNOWN		67-71 - OTHER / UNKNOWN	
57- OTHER / UNKNOWN				68-69 - OTHER		68-U - OTHER / UNKNOWN		68-70 - OTHER / UNKNOWN		68-71 - OTHER / UNKNOWN		68-72 - OTHER / UNKNOWN	
58- OTHER / UNKNOWN				69-70 - OTHER		69-U - OTHER / UNKNOWN		69-71 - OTHER / UNKNOWN		69-72 - OTHER / UNKNOWN		69-73 - OTHER / UNKNOWN	
59- OTHER / UNKNOWN				70-71 - OTHER		70-U - OTHER / UNKNOWN		70-72 - OTHER / UNKNOWN		70-73 - OTHER / UNKNOWN		70-74 - OTHER / UNKNOWN	
60- OTHER / UNKNOWN				71-72 - OTHER		71-U - OTHER / UNKNOWN		71-73 - OTHER / UNKNOWN		71-74 - OTHER / UNKNOWN		71-75 - OTHER / UNKNOWN	
61- OTHER / UNKNOWN				72-73 - OTHER		72-U - OTHER / UNKNOWN		72-74 - OTHER / UNKNOWN		72-75 - OTHER / UNKNOWN		72-76 - OTHER / UNKNOWN	
62- OTHER / UNKNOWN				73-74 - OTHER		73-U - OTHER / UNKNOWN		73-75 - OTHER / UNKNOWN		73-76 - OTHER / UNKNOWN		73-77 - OTHER / UNKNOWN	
63- OTHER / UNKNOWN				74-75 - OTHER		74-U - OTHER / UNKNOWN		74-76 - OTHER / UNKNOWN		74-77 - OTHER / UNKNOWN		74-78 - OTHER / UNKNOWN	
64- OTHER / UNKNOWN				75-76 - OTHER		75-U - OTHER / UNKNOWN		75-77 - OTHER / UNKNOWN		75-78 - OTHER / UNKNOWN		75-79 - OTHER / UNKNOWN	
65- OTHER / UNKNOWN				76-77 - OTHER		76-U - OTHER / UNKNOWN		76-78 - OTHER / UNKNOWN		76-79 - OTHER / UNKNOWN		76-80 - OTHER / UNKNOWN	
66- OTHER / UNKNOWN				77-78 - OTHER		77-U - OTHER / UNKNOWN		77-79 - OTHER / UNKNOWN		77-80 - OTHER / UNKNOWN		77-81 - OTHER / UNKNOWN	
67- OTHER / UNKNOWN				78-79 - OTHER		78-U - OTHER / UNKNOWN		78-80 - OTHER / UNKNOWN		78-81 - OTHER / UNKNOWN		78-82 - OTHER / UNKNOWN	
68- OTHER / UNKNOWN				79-80 - OTHER		79-U - OTHER / UNKNOWN		79-81 - OTHER / UNKNOWN		79-82 - OTHER / UNKNOWN		79-83 - OTHER / UNKNOWN	
69- OTHER / UNKNOWN				80-81 - OTHER		80-U - OTHER / UNKNOWN		80-82 - OTHER / UNKNOWN		80-83 - OTHER / UNKNOWN		80-84 - OTHER / UNKNOWN	
70- OTHER / UNKNOWN				81-82 - OTHER		81-U - OTHER / UNKNOWN		81-83 - OTHER / UNKNOWN		81-84 - OTHER / UNKNOWN		81-85 - OTHER / UNKNOWN	
71- OTHER / UNKNOWN				82-83 - OTHER		82-U - OTHER / UNKNOWN		82-84 - OTHER / UNKNOWN		82-85 - OTHER / UNKNOWN		82-86 - OTHER / UNKNOWN	
72- OTHER / UNKNOWN				83-84 - OTHER		83-U - OTHER / UNKNOWN		83-85 - OTHER / UNKNOWN		83-86 - OTHER / UNKNOWN		83-87 - OTHER / UNKNOWN	
73- OTHER / UNKNOWN				84-85 - OTHER		84-U - OTHER / UNKNOWN		84-86 - OTHER / UNKNOWN		84-87 - OTHER / UNKNOWN		84-88 - OTHER / UNKNOWN	
74- OTHER / UNKNOWN				85-86 - OTHER		85-U - OTHER / UNKNOWN		85-87 - OTHER / UNKNOWN		85-88 - OTHER / UNKNOWN		85-89 - OTHER / UNKNOWN	
75- OTHER / UNKNOWN				86-87 - OTHER		86-U - OTHER / UNKNOWN		86-88 - OTHER / UNKNOWN		86-89 - OTHER / UNKNOWN		86-90 - OTHER / UNKNOWN	
76- OTHER / UNKNOWN				87-88 - OTHER		87-U - OTHER / UNKNOWN		87-89 - OTHER / UNKNOWN		87-90 - OTHER / UNKNOWN		87-91 - OTHER / UNKNOWN	
77- OTHER / UNKNOWN				88-89 - OTHER		88-U - OTHER / UNKNOWN		88-90 - OTHER / UNKNOWN		88-91 - OTHER / UNKNOWN		88-92 - OTHER / UNKNOWN	
78- OTHER / UNKNOWN				89-90 - OTHER		89-U - OTHER / UNKNOWN		89-91 - OTHER / UNKNOWN		89-92 - OTHER / UNKNOWN			



OCCUPANT / WITNESS ADDENDUM

		LOCAL REPORT NUMBER							
		2 2 0 5 5 3 6 1			DATE OF BIRTH	AGE	GENDER		
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE 2 Toler, Douglas					0 9 2 7 1 9 7 7	4 4	M
	ADDRESS: STREET, CITY, STATE, ZIP 844 Yorkhaven Rd. Cincinnati, OH 45240					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 0 3 0 4 1 1 				
5				0 4					
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE 2 Toler, Kiyah					0 9 1 6 2 0 0 8	1 3	F
	ADDRESS: STREET, CITY, STATE, ZIP 844 Yorkhaven Rd. Cincinnati, OH 45240					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 0 4 0 4 1 1 				
5				0 4					
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE 2 Toler, Tamiyah					0 8 2 3 2 0 1 1	1 0	F
	ADDRESS: STREET, CITY, STATE, ZIP 844 Yorkhaven Rd. Cincinnati, OH 45240					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 0 6 0 4 1 1 				
5				0 4					
OCCUPANT	UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH	AGE	GENDER
						0	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 0 6 0 4 1 1 				
				0 4					
INJURIES		SAFETY EQUIPMENT USED		SEATING POSITION		AIR BAG USAGE			
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY		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 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN		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		1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN			
INJURED TAKEN BY		1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN		1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE		EJECTION			
GENDER		F - FEMALE M - MALE U - OTHER / UNKNOWN		1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS		TRAPPED			
WITNESS	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH	AGE	GENDER	
						0	0		
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE				
WITNESS	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH	AGE	GENDER	
						0	0		
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE				
WITNESS	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH	AGE	GENDER	
						0	0		
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE				



LOCAL REPORT NUMBER 22-055361	REPORTING AGENCY Fairfield Police Department	DATE OF CRASH M 08 D 2 Y 22
IN COUNTY OF Butler	CRASH LOCATION Dixie Highway/By Pass 4	

