



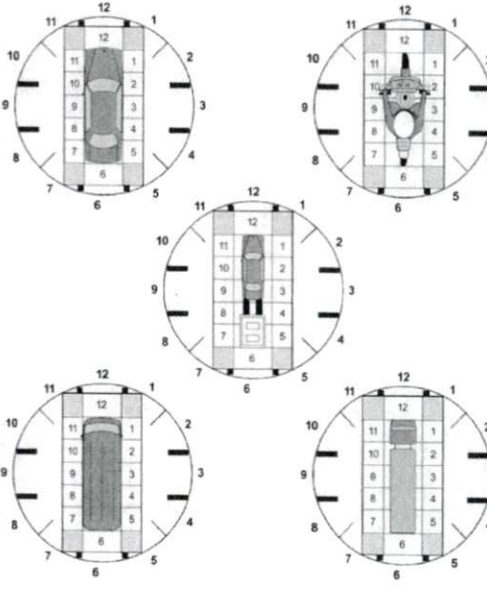
TRAFFIC CRASH REPORT

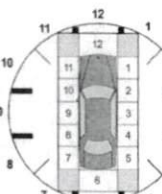
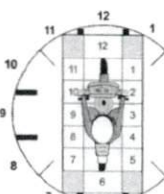
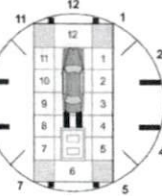
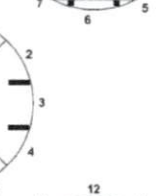
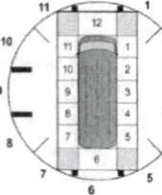
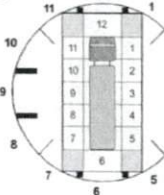
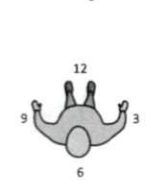
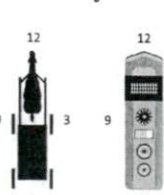
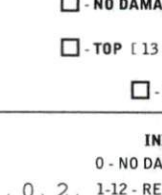
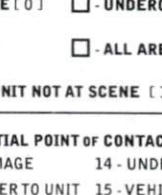
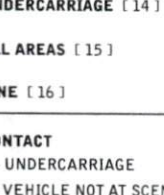

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*

| | | | | | | |
|---|--|--|---|---|---|---|
| <input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH | | <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> OH-1P <input checked="" type="checkbox"/> PRIVATE PROPERTY | LOCAL INFORMATION | | 2 2 0 6 0 2 8 9 | |
| REPORTING AGENCY NAME* Fairfield Police Department | | | NCIC* 0 0 9 0 1 | | HIT/SKIP 1 - SOLVED 2 - UNSOLVED | NUMBER OF UNITS 0 2 |
| COUNTY* 0 9 | LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP 1 | LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield | | CRASH DATE / TIME* 0 8 2 0 2 0 2 2 1 7 3 0 | | CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY 5 |
| ROUTE TYPE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | ROUTE NUMBER | PREFIX | LOCATION ROAD NAME Brittany | ROAD TYPE L A | LATITUDE DECIMAL DEGREES 3 9 . 3 2 0 2 5 0 | |
| ROUTE TYPE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | ROUTE NUMBER | PREFIX | REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 85 | ROAD TYPE | LONGITUDE DECIMAL DEGREES - 8 4 . 5 0 7 1 8 7 | |
| REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 3 | 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 PL - PLACE | ROAD TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE WA - WAY | INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES | |
| DISTANCE FROM REFERENCE | | DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS | | ROADWAY <input type="checkbox"/> ROADWAY DIVIDED | | |
| 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 0 6 | | MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 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 9 | | 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 |
| <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 WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA | | CONTOUR 2 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 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 9 | | 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 9 9 | | 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 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN 2 | | NARRATIVE Between 08-20-22 at 5:30 P.M. and 08-21-22 at 11:30 A.M. Unit 2 was parked in the parking lot of 85 Brittany Ln. Unit 1 struck Unit 2. After striking unit 2, Unit 1 drove away as a hit/skip unit. There was no evidence or debris left at the scene to indicate what kind of car Unit 1 was. There were no cameras in the area where the crash occurred. | | | | |
| CRASH REPORTED DATE / TIME 0 8 2 1 2 0 2 2 1 2 0 8 | | DISPATCH DATE / TIME 0 8 2 1 2 0 2 2 1 2 1 1 | | ARRIVAL DATE / TIME 0 8 2 1 2 0 2 2 1 2 2 7 | | SCENE CLEARED DATE / TIME 0 8 2 1 2 0 2 2 1 2 4 4 |
| TOTAL TIME ROADWAY CLOSED | OTHER INVESTIGATION TIME | TOTAL MINUTES 3 3 | OFFICER'S NAME* P.O. Gregg Lamb | CHECKED BY OFFICER'S NAME* S. J. Sprague | REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST | |
| | | OFFICER'S BADGE NUMBER* 6 5 | CHECKED BY OFFICER'S BADGE NUMBER* 8 4 | | SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OHPs) <input type="checkbox"/> | |

| | | | | | |
|---|--|---|---|---|--|
| OWNER | UNIT # 01 | OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) | 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 | | | |
| VEHICLE | LP STATE | LICENSE PLATE # | VEHICLE IDENTIFICATION # | VEHICLE YEAR | VEHICLE MAKE |
| | INSURANCE VERIFIED | INSURANCE COMPANY | INSURANCE POLICY # | COLOR | VEHICLE MODEL |
| | TYPE OF USE COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE <input type="checkbox"/> | | US DOT # | TOWED BY: COMPANY NAME | |
| | INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> | HIT/SKIP UNIT <input checked="" type="checkbox"/> | #OCCUPANTS | HAZARDOUS MATERIAL MATERIAL RELEASED <input type="checkbox"/> CLASS # PLACARD ID # | |
| | 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS) | | 7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV/UTV) | 12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME | 18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP |
| | # OF TRAILING UNITS | | | | |
| | WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 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 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 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 - GRAINCHIPS/GRAVEL 8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN | | |
| | VEHICLE DEFECTS 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS | | 4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 99 - OTHER / UNKNOWN | | |
| EVENT(S) | NON-MOTORIST LOCATION AT IMPACT 1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK | | 3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION | | 6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK 9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN |
| | ACTION 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN | | PRE-CRASH ACTIONS 1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN | | 7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS 13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN |
| | CONTRIBUTING CIRCUMSTANCES 1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN | | 7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING | | 13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY 17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/SPILLING 20 - IMPROPER CROSSING 21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION |
| | SEQUENCE OF EVENTS 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO/EQUIPMENT LOSS OR SHIFT | | NON-COLLISION 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT | | |
| | COLLISION WITH FIXED OBJECT - STRUCK 25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE | | 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN | | |
| | FIRST HARMFUL EVENT | | MOST HARMFUL EVENT | | |

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

| | |
|--|--|
| LOCAL REPORT NUMBER <div style="display: flex; justify-content: space-around; font-family: monospace; font-size: 1.2em;"> 22060289 </div> | |
| DAMAGE DAMAGE SCALE <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> 1 - NONE 2 - MINOR DAMAGE 9 - UNKNOWN </div> <div style="width: 45%;"> 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE </div> </div> | |
| DAMAGED AREA(S) INDICATE ALL THAT APPLY | |
| <div style="display: grid; grid-template-columns: 1fr 1fr; gap: 20px;">         </div> | |
| <div style="display: flex; justify-content: space-around; align-items: flex-end;"> <div style="text-align: center;">  <p>9 6 3</p> </div> <div style="text-align: center;">  <p>9 6 3</p> </div> <div style="text-align: center;">  <p>9 6 3</p> </div> <div style="text-align: center;">  <p>9 6 3</p> </div> </div> | |
| <div style="display: flex; justify-content: space-around;"> <div> <input type="checkbox"/> - NO DAMAGE [0] </div> <div> <input type="checkbox"/> - UNDERCARRIAGE [14] </div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div> <input type="checkbox"/> - TOP [13] </div> <div> <input type="checkbox"/> - ALL AREAS [15] </div> </div> <div style="text-align: center; margin-top: 10px;"> <input type="checkbox"/> - UNIT NOT AT SCENE [16] </div> | |
| INITIAL POINT OF CONTACT <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> 0 - NO DAMAGE 1-12 - REFER TO UNIT DIAGRAM 13 - TOP </div> <div style="width: 45%;"> 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN </div> </div> | |
| TRAFFIC | |
| TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY <div style="margin-top: 10px;"> # OF THROUGH LANES ON ROAD </div> | TRAFFIC CONTROL 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL |
| <div style="margin-top: 10px;"> # OF THROUGH LANES ON ROAD </div> | RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING |
| UNIT / NON-MOTORIST DIRECTION <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> FROM 1 TO 2 </div> <div style="width: 45%;"> 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN </div> </div> | |
| UNIT SPEED <div style="margin-top: 10px;"> 0 </div> | DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED |
| POSTED SPEED <div style="margin-top: 10px;"> 1 0 </div> | |



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER
2 2 0 6 0 2 8 9

| UNIT # | NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | AGE | GENDER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 0 1 | | | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ADDRESS: STREET, CITY, STATE, ZIP | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <table border="1"><thead><tr><th>INJURIES</th><th>SEATING POSITION</th><th>AIR BAG</th><th>OL CLASS</th><th>OL RESTRICTION(S)</th><th>DRIVER DISTRACTION</th><th>TEST STATUS</th></tr></thead><tbody><tr><td>1 - FATAL</td><td>1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)</td><td>1 - NOT DEPLOYED</td><td>1 - CLASS A</td><td>1 - ALCOHOL INTERLOCK DEVICE</td><td>1 - NOT DISTRACTED</td><td>1 - NONE GIVEN</td></tr><tr><td>2 - SUSPECTED SERIOUS INJURY</td><td>2 - FRONT - MIDDLE</td><td>2 - DEPLOYED FRONT</td><td>2 - CLASS B</td><td>2 - CDL INTRASTATE ONLY</td><td>2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)</td><td>2 - TEST REFUSED</td></tr><tr><td>3 - SUSPECTED MINOR INJURY</td><td>3 - FRONT - RIGHT SIDE</td><td>3 - DEPLOYED SIDE</td><td>3 - CLASS C</td><td>3 - CORRECTIVE LENSES</td><td>3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE</td><td>3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE</td></tr><tr><td>4 - POSSIBLE INJURY</td><td>4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)</td><td>4 - DEPLOYED BOTH FRONT / SIDE</td><td>4 - REGULAR CLASS (OHIO = D)</td><td>4 - FARM WAIVER</td><td>4 - TALKING ON HAND-HELD COMMUNICATION DEVICE</td><td>4 - TEST GIVEN, RESULTS KNOWN</td></tr><tr><td>5 - NO APPARENT INJURY</td><td>5 - SECOND - MIDDLE</td><td>5 - NOT APPLICABLE</td><td>5 - M/C MOPED ONLY</td><td>5 - EXCEPT CLASS A BUS</td><td>5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE</td><td>5 - TEST GIVEN, RESULTS UNKNOWN</td></tr><tr><td colspan="3">INJURED TAKEN BY</td><td colspan="3">ALCOHOL TEST TYPE</td><td></td></tr><tr><td>1 - NOT TRANSPORTED / TREATED AT SCENE</td><td>6 - SECOND - RIGHT SIDE</td><td colspan="2">EJECTION</td><td>6 - EXCEPT CLASS A & CLASS B BUS</td><td>6 - PASSENGER</td><td>1 - NONE</td></tr><tr><td>2 - EMS</td><td>7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)</td><td>1 - NOT EJECTED</td><td>OL ENDORSEMENT</td><td>7 - EXCEPT TRACTOR-TRAILER</td><td>7 - OTHER DISTRACTION INSIDE THE VEHICLE</td><td>2 - BLOOD</td></tr><tr><td>3 - POLICE</td><td>8 - THIRD - MIDDLE</td><td>2 - PARTIALLY EJECTED</td><td>H - HAZMAT</td><td>8 - INTERMEDIATE LICENSE RESTRICTIONS</td><td>8 - OTHER DISTRACTION OUTSIDE THE VEHICLE</td><td>3 - URINE</td></tr><tr><td>9 - OTHER / UNKNOWN</td><td>9 - THIRD - RIGHT SIDE</td><td>3 - TOTALLY EJECTED</td><td>M - MOTORCYCLE</td><td>9 - LEARNER'S PERMIT RESTRICTIONS</td><td>9 - OTHER / UNKNOWN</td><td>4 - BREATH</td></tr><tr><td colspan="3">SAFETY EQUIPMENT</td><td>P - PASSENGER</td><td>10 - LIMITED TO DAYLIGHT ONLY</td><td colspan="2">DRUG TEST TYPE</td></tr><tr><td>1 - NONE USED</td><td>10 - SLEEPER SECTION OF TRUCK CAB</td><td>4 - NOT APPLICABLE</td><td>N - TANKER</td><td>11 - LIMITED TO EMPLOYMENT</td><td colspan="2">1 - NONE</td></tr><tr><td>2 - SHOULDER BELT ONLY USED</td><td>11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)</td><td colspan="2">TRAPPED</td><td>12 - LIMITED - OTHER</td><td colspan="2">2 - BLOOD</td></tr><tr><td>3 - LAP BELT ONLY USED</td><td>12 - PASSENGER IN UNENCLOSED CARGO AREA</td><td>1 - NOT TRAPPED</td><td>Q - MOTOR SCOOTER</td><td>13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)</td><td colspan="2">3 - URINE</td></tr><tr><td>4 - SHOULDER & LAP BELT USED</td><td>13 - TRAILING UNIT</td><td>2 - EXTRICATED BY MECHANICAL MEANS</td><td>R - THREE-WHEEL MOTORCYCLE</td><td>14 - MILITARY VEHICLES ONLY</td><td colspan="2">4 - OTHER</td></tr><tr><td>5 - CHILD RESTRAINT SYSTEM - FORWARD FACING</td><td>14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)</td><td>3 - FREED BY NON-MECHANICAL MEANS</td><td>S - SCHOOL BUS</td><td>15 - MOTOR VEHICLES WITHOUT AIR BRAKES</td><td colspan="2">DRUG TEST RESULT(S)</td></tr><tr><td>6 - CHILD RESTRAINT SYSTEM - REAR FACING</td><td>15 - NON-MOTORIST</td><td></td><td>T - DOUBLE & TRIPLE TRAILERS</td><td>16 - OUTSIDE MIRROR</td><td colspan="2">1 - AMPHETAMINES</td></tr><tr><td>7 - BOOSTER SEAT</td><td>99 - OTHER / UNKNOWN</td><td></td><td>X - TANKER / HAZMAT</td><td>17 - PROSTHETIC AID</td><td colspan="2">2 - BARBITURATES</td></tr><tr><td>8 - HELMET USED</td><td></td><td></td><td></td><td>18 - OTHER</td><td colspan="2">3 - BENZODIAZEPINES</td></tr><tr><td>9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)</td><td></td><td></td><td>GENDER</td><td></td><td colspan="2">4 - CANNABINOIDS</td></tr><tr><td>10 - REFLECTIVE CLOTHING</td><td></td><td></td><td>F - FEMALE</td><td></td><td colspan="2">5 - COCAINE</td></tr><tr><td>11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY</td><td></td><td></td><td>M - MALE</td><td></td><td colspan="2">6 - OPIATES / OPIOIDS</td></tr><tr><td>99 - OTHER / UNKNOWN</td><td></td><td></td><td>U - OTHER / UNKNOWN</td><td></td><td colspan="2">7 - OTHER</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td colspan="2">8 - NEGATIVE RESULTS</td></tr></tbody></table> | | | | | | | | | | | | 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 | | | ALCOHOL TEST TYPE | | | | 1 - NOT TRANSPORTED / TREATED AT SCENE | 6 - SECOND - RIGHT SIDE | EJECTION | | 6 - EXCEPT CLASS A & CLASS B BUS | 6 - PASSENGER | 1 - NONE | 2 - EMS | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) | 1 - NOT EJECTED | OL ENDORSEMENT | 7 - EXCEPT TRACTOR-TRAILER | 7 - OTHER DISTRACTION INSIDE THE VEHICLE | 2 - BLOOD | 3 - POLICE | 8 - THIRD - MIDDLE | 2 - PARTIALLY EJECTED | H - HAZMAT | 8 - INTERMEDIATE LICENSE RESTRICTIONS | 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE | 3 - URINE | 9 - OTHER / UNKNOWN | 9 - THIRD - RIGHT SIDE | 3 - TOTALLY EJECTED | M - MOTORCYCLE | 9 - LEARNER'S PERMIT RESTRICTIONS | 9 - OTHER / UNKNOWN | 4 - BREATH | SAFETY EQUIPMENT | | | P - PASSENGER | 10 - LIMITED TO DAYLIGHT ONLY | DRUG TEST TYPE | | 1 - NONE USED | 10 - SLEEPER SECTION OF TRUCK CAB | 4 - NOT APPLICABLE | N - TANKER | 11 - LIMITED TO EMPLOYMENT | 1 - NONE | | 2 - SHOULDER BELT ONLY USED | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | TRAPPED | | 12 - LIMITED - OTHER | 2 - BLOOD | | 3 - LAP BELT ONLY USED | 12 - PASSENGER IN UNENCLOSED CARGO AREA | 1 - NOT TRAPPED | Q - MOTOR SCOOTER | 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) | 3 - URINE | | 4 - SHOULDER & LAP BELT USED | 13 - TRAILING UNIT | 2 - EXTRICATED BY MECHANICAL MEANS | R - THREE-WHEEL MOTORCYCLE | 14 - MILITARY VEHICLES ONLY | 4 - OTHER | | 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | 3 - FREED BY NON-MECHANICAL MEANS | S - SCHOOL BUS | 15 - MOTOR VEHICLES WITHOUT AIR BRAKES | DRUG TEST RESULT(S) | | 6 - CHILD RESTRAINT SYSTEM - REAR FACING | 15 - NON-MOTORIST | | T - DOUBLE & TRIPLE TRAILERS | 16 - OUTSIDE MIRROR | 1 - AMPHETAMINES | | 7 - BOOSTER SEAT | 99 - OTHER / UNKNOWN | | X - TANKER / HAZMAT | 17 - PROSTHETIC AID | 2 - BARBITURATES | | 8 - HELMET USED | | | | 18 - OTHER | 3 - BENZODIAZEPINES | | 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) | | | GENDER | | 4 - CANNABINOIDS | | 10 - REFLECTIVE CLOTHING | | | F - FEMALE | | 5 - COCAINE | | 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY | | | M - MALE | | 6 - OPIATES / OPIOIDS | | 99 - OTHER / UNKNOWN | | | U - OTHER / UNKNOWN | | 7 - OTHER | | | | | | | 8 - NEGATIVE RESULTS | |
| 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 | | | ALCOHOL TEST TYPE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 - NOT TRANSPORTED / TREATED AT SCENE | 6 - SECOND - RIGHT SIDE | EJECTION | | 6 - EXCEPT CLASS A & CLASS B BUS | 6 - PASSENGER | 1 - NONE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 - EMS | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) | 1 - NOT EJECTED | OL ENDORSEMENT | 7 - EXCEPT TRACTOR-TRAILER | 7 - OTHER DISTRACTION INSIDE THE VEHICLE | 2 - BLOOD | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 - POLICE | 8 - THIRD - MIDDLE | 2 - PARTIALLY EJECTED | H - HAZMAT | 8 - INTERMEDIATE LICENSE RESTRICTIONS | 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE | 3 - URINE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 - OTHER / UNKNOWN | 9 - THIRD - RIGHT SIDE | 3 - TOTALLY EJECTED | M - MOTORCYCLE | 9 - LEARNER'S PERMIT RESTRICTIONS | 9 - OTHER / UNKNOWN | 4 - BREATH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SAFETY EQUIPMENT | | | P - PASSENGER | 10 - LIMITED TO DAYLIGHT ONLY | DRUG TEST TYPE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 - NONE USED | 10 - SLEEPER SECTION OF TRUCK CAB | 4 - NOT APPLICABLE | N - TANKER | 11 - LIMITED TO EMPLOYMENT | 1 - NONE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 - SHOULDER BELT ONLY USED | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | TRAPPED | | 12 - LIMITED - OTHER | 2 - BLOOD | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 - LAP BELT ONLY USED | 12 - PASSENGER IN UNENCLOSED CARGO AREA | 1 - NOT TRAPPED | Q - MOTOR SCOOTER | 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) | 3 - URINE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 - SHOULDER & LAP BELT USED | 13 - TRAILING UNIT | 2 - EXTRICATED BY MECHANICAL MEANS | R - THREE-WHEEL MOTORCYCLE | 14 - MILITARY VEHICLES ONLY | 4 - OTHER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | 3 - FREED BY NON-MECHANICAL MEANS | S - SCHOOL BUS | 15 - MOTOR VEHICLES WITHOUT AIR BRAKES | DRUG TEST RESULT(S) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 - CHILD RESTRAINT SYSTEM - REAR FACING | 15 - NON-MOTORIST | | T - DOUBLE & TRIPLE TRAILERS | 16 - OUTSIDE MIRROR | 1 - AMPHETAMINES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 - BOOSTER SEAT | 99 - OTHER / UNKNOWN | | X - TANKER / HAZMAT | 17 - PROSTHETIC AID | 2 - BARBITURATES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 - HELMET USED | | | | 18 - OTHER | 3 - BENZODIAZEPINES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.) | | | GENDER | | 4 - CANNABINOIDS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 - REFLECTIVE CLOTHING | | | F - FEMALE | | 5 - COCAINE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY | | | M - MALE | | 6 - OPIATES / OPIOIDS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 99 - OTHER / UNKNOWN | | | U - OTHER / UNKNOWN | | 7 - OTHER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | 8 - NEGATIVE RESULTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |