

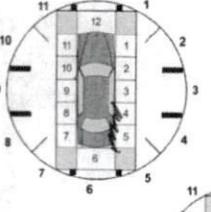
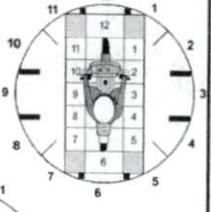
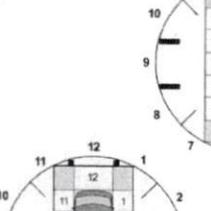
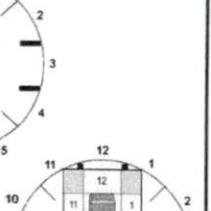
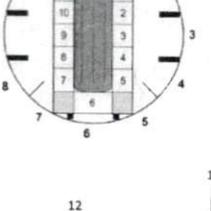
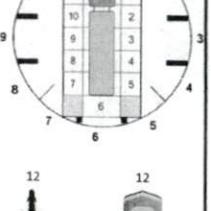
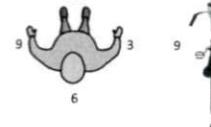
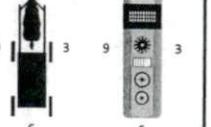
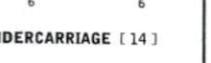
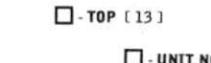
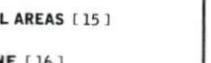


## TRAFFIC CRASH REPORT

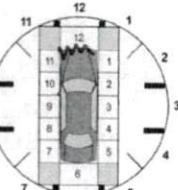
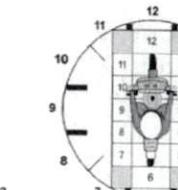
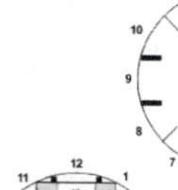
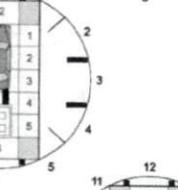
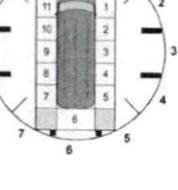
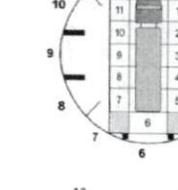
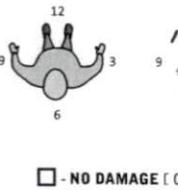
\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION			LOCAL REPORT NUMBER*			
		REPORTING AGENCY NAME* Fairfield Police Department NCIC* 00901			22061529			
COUNTY* 09		LOCALITY* 1-CITY 1 2-VILLAGE 1 3-TOWNSHIP 1 City of Fairfield			HIT/SKIP 1-SOLVED 0 2	NUMBER OF UNITS 0 2	UNIT IN ERROR 0 1 98-ANIMAL 0 1 99-UNKNOWN	
LOCATION	ROUTE TYPE S R	ROUTE NUMBER 4	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME	ROAD TYPE	LATITUDE 39.332598	CRASH DATE / TIME* 08262022 0715	
	ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) South Gilmore	ROAD TYPE R D	LONGITUDE 84.521724	CRASH SEVERITY 5 1-FATAL 2-SERIOUS INJURY SUSPECTED 3-MINOR INJURY SUSPECTED 4-INJURY POSSIBLE 5-PROPERTY DAMAGE ONLY	
REFERENCE POINT	DIRECTION FROM REFERENCE 1-INTERSECTION 1-NORTH 2-MILE POST 2-SOUTH 3-HOUSE # 3-EAST 4-WEST 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 HW - HIGHWAY RD - ROAD AV - AVENUE LA - LANE SQ - SQUARE BL - BOULEVARD MP - MILEPOST ST - STREET CR - CIRCLE OV - OVAL TE - TERRACE CT - COURT PK - PARKWAY TL - TRAIL DR - DRIVE PI - PIKE WA - WAY HE - HEIGHTS PL - PLACE	INTERSECTION RELATED <input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH 4 <input type="checkbox"/> WITHIN INTERCHANGE AREA			NUMBER OF APPROACHES	
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE 1-MILES 1 2-FEET 2 3-YARDS 3			ROADWAY <input type="checkbox"/> ROADWAY DIVIDED				
LOCATION OF FIRST HARMFUL EVENT 0 1 1-ON ROADWAY 9-CROSSOVER 2-ON SHOULDER 10-DRIVeway/ALLEY ACCESS 3-IN MEDIAN 11-RAILWAY GRADE CROSSING 4-ON ROADSIDE 12-SHARED USE PATHS OR TRAILS 5-ON GORE 13-BIKE LANE 6-OUTSIDE TRAFFIC WAY 14-TOLL BOOTH 7-ON RAMP 99-OTHER/ UNKNOWN			MANNER OF CRASH COLLISION/IMPACT 6 1-NOT COLLISION 4-REAR-TO-REAR BETWEEN 5-BACKING TWO MOTOR 6-ANGLE VEHICLES IN 7-SIDESWIPE, SAME DIRECTION TRANSPORT 2-REAR-END 8-SIDESWIPE, OPPOSITE DIRECTION 3-HEAD-ON 9-OTHER/ UNKNOWN			DIRECTION OF TRAVEL 1-NORTH 1 2-SOUTH 2 3-EAST 3 4-WEST 4	MEDIAN TYPE 1-DIVIDED FLUSH MEDIAN (<4 FEET) 1 2-DIVIDED FLUSH MEDIAN (>4 FEET) 2 3-DIVIDED, DEPRESSED MEDIAN 3 4-DIVIDED, RAISED MEDIAN (ANY TYPE) 4 9-OTHER/UNKNOWN 9	
<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 1	CONDITIONS 1	SURFACE 2
LIGHT CONDITION 1 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 6-SNOW 2-CLOUDY 7-SEVERE CROSSWINDS 3-FOG, SMOG, SMOKE 8-BLOWING SAND, SOIL, DIRT, SNOW 4-RAIN 9-FREEZING RAIN OR FREEZING DRIZZLE 5-SLEET, HAIL 99-OTHER / UNKNOWN			1-STRAIGHT LEVEL 2-STRAIGHT GRADE 3-CURVE LEVEL 4-CURVE GRADE 9-OTHER/UNKNOWN	1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN	1-CONCRETE 2-BLACKTOP, BITUMINOUS, ASPHALT 3-BRICK/BLOCK 4-SLAG, GRAVEL, STONE 5-DIRT 9-OTHER/UNKNOWN
<p>NARRATIVE</p> <p>On August 26, 2022 at about 7:15 A.M. Unit #1 was traveling south Holden Blvd at approximately 20 m.p.h. and when at South Gilmore Road attempted to turn left to travel south on State Route 4 and in so doing, failed to yield to yield the right of way to oncoming traffic and collided with Unit #2 which was traveling north on South Gilmore Road.</p> <p>See OH-2 Diagram</p>								
CRASH REPORTED DATE / TIME 08262022 0718		DISPATCH DATE / TIME 08262022 0719		ARRIVAL DATE / TIME 08262022 0720		SCENE CLEARED DATE / TIME 08262022 0821		REPORT TAKEN BY
TOTAL TIME ROADWAY CLOSED 3 0		OTHER INVESTIGATION TIME 1 0		TOTAL MINUTES 7 2		OFFICER'S NAME* E. Knizner		<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP)
						CHECKED BY OFFICER'S NAME* S. J. Spreng		
						CHECKED BY OFFICER'S BADGE NUMBER* 8 4		

OWNER	UNIT # <u>01</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>HDY5855</u>	VEHICLE IDENTIFICATION # <u>2T3ZFREV2GW309957</u>	VEHICLE YEAR <u>2016</u>
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY <u>Geico Insurance</u>	INSURANCE POLICY # <u>605 0348 181</u>	VEHICLE MAKE <u>Toyota</u>
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME <u>Marcell's Towing</u>
INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT <input type="checkbox"/> #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 CLASS # <u>PLACARD ID #</u> <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)		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	
# OF TRAILING UNITS <u>0</u>		7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED 11 - ALL TERRAIN VEHICLE (ATV / UTV)	
1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	
1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	
1 - YES 2 - NO 9 - OTHER / UNKNOWN		WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	
1 - YES 2 - NO 9 - OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL	
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	
1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT 16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - MAIL CARRIER 21 - AUTO TRANSPORTER 22 - GARBAGE/REFUSE 23 - SAFETY SERVICE PATROL	
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	
1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS		8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 15 - SAFETY SERVICE PATROL	
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING	
1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		20 - MAIL CARRIER 21 - AUTO TRANSPORTER 22 - GARBAGE/REFUSE 23 - SAFETY SERVICE PATROL	
1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		24 - PEDESTRIAN / SKATER 25 - WHEELCHAIR (ANY TYPE) 26 - OTHER NON-MOTORIST 27 - BICYCLE 28 - TRAIN	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING <u>0 6</u> 4 - STRUCK PRE-CRASH 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 12 - DRIVERLESS	
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING <u>0 6</u> 4 - STRUCK PRE-CRASH 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN		13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	
1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN		18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - OTHER / UNKNOWN	
1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN		13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	
1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN		17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/SPILLING 20 - IMPROPER CROSSING	
1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN		21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	
1 - SEQUENCE OF EVENTS		11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - SWERVING TO AVOID 16 - PEDALCYCLE 17 - ANIMAL - DEER 18 - ANIMAL - OTHER 19 - OTHER MOVABLE OBJECT	
1 - SEQUENCE OF EVENTS		11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - SWERVING TO AVOID 16 - PEDALCYCLE 17 - ANIMAL - DEER 18 - ANIMAL - OTHER 19 - OTHER MOVABLE OBJECT	
1 - SEQUENCE OF EVENTS		20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE	
1 - SEQUENCE OF EVENTS		22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	
1 - SEQUENCE OF EVENTS		25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	
1 - SEQUENCE OF EVENTS		31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL 35 - MEDIAN CONCRETE 36 - MEDIAN OTHER BARRIER	
1 - SEQUENCE OF EVENTS		37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	
1 - SEQUENCE OF EVENTS		43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	
1 - SEQUENCE OF EVENTS		50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	
1 - FIRST HARMFUL EVENT		1 - MOST HARMFUL EVENT	

LOCAL REPORT NUMBER <u>2 2 0 6 1 5 2 9</u>	
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 <u>0</u> <input type="checkbox"/> - UNDERCARRIAGE <u>14</u> <input type="checkbox"/> - TOP <u>13</u> <input type="checkbox"/> - ALL AREAS <u>15</u> <input type="checkbox"/> - UNIT NOT AT SCENE <u>16</u>	
INITIAL POINT OF CONTACT	
0 - NO DAMAGE <u>0</u> 14 - UNDERCARRIAGE 1 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 2 - DRIVeway ACCESS 99 - UNKNOWN 3 - SHARED USE PATHS OR TRAILS 13 - TOP	
TRAFFIC	
TRAFFIC WAY FLOW <u>2</u>	TRAFFIC CONTROL <u>2</u> 1 - ONE-WAY 2 - TWO-WAY
# OF THROUGH LANES ON ROAD <u>4</u>	RAIL GRADE CROSSING <u>1</u> 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION	
1 - NORTH <u>5</u> - NORTHEAST 2 - SOUTH <u>6</u> - NORTHWEST 3 - EAST <u>7</u> - SOUTHEAST 4 - WEST <u>8</u> - SOUTHWEST 9 - OTHER / UNKNOWN	
FROM <u>1</u> TO <u>3</u>	
UNIT SPEED <u>2 0</u>	
DETECTED SPEED <u>1</u> 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED	
POSTED SPEED <u>3 5</u>	

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER)		OWNER PHONE: INCLUDE AREA CODE ( <input checked="" type="checkbox"/> SAME AS DRIVER)		
0 2	Vaughn, William E.				
OWNER ADDRESS: STREET, CITY, STATE, ZIP ( <input checked="" type="checkbox"/> SAME AS DRIVER)					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP			COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE		
LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR		
O H	HDH4249	J H M C R 6 F 5 1 H C 0 2 0 4 6 7	2 0 1 7		
INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	VEHICLE MAKE		
	State Farm Ins.	807 8355-A22-351	Honda		
TYPE OF USE		US DOT #	TOWED BY: COMPANY NAME		
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GOVERNMENT	<input type="checkbox"/> IN EMERGENCY RESPONSE	Fox Towing		
INTERLOCK DEVICE EQUIPPED		#OCCUPANTS	HAZARDOUS MATERIAL		
		0 1	<input type="checkbox"/> MATERIAL RELEASED	CLASS #	PLACARD ID #
			<input type="checkbox"/> PLACARD		
VEHICLE WEIGHT GVWR/GCWR					
1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.					
1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)					
7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED 11 - ALL-TERRAIN VEHICLE (ATV / UTV)					
12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME					
18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP					
# OF TRAILING UNITS					
1 - YES 2 - NO 9 - OTHER / UNKNOWN					
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?					
1 - NO AUTOMATION 2 - DRIVER ASSISTANCE 3 - PARTIAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN					
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 21 - MAIL CARRIER 22 - OTHER / UNKNOWN					
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 - TRAILER EQUIPMENT 9 - DUMP					
12 - POLE 13 - AUTO TRANSPORTER 14 - GARBAGE / REFUSE 15 - CONCRETE MIXER 16 - CARGO TANK 17 - FLAT BED 18 - AUTO TRANSPORTER 19 - GARBAGE / REFUSE 20 - SAFETY SERVICE PATROL					
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS					
4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT 7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT 9 - DEFECTIVE 10 - MOTOR TROUBLE 11 - DEFECTIVE 12 - ACCIDENT 13 - DISABLED FROM PRIOR 14 - ACCIDENT					
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 - STANDING 14 - WALKING, RUNNING, JOGGING, PLAYING 15 - STANDING OUTSIDE DISABLED VEHICLE 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 24 - OTHER IMPROPER ACTION					
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRIKING 5 - BOTH STRIKING & STRUCK 6 - STRUCK 7 - STRUCK 8 - 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 12 - DRIVING 13 - NEUTRAL 14 - REVERSE 15 - FORWARD 16 - TURN 17 - NEGOTIATING A CURVE 18 - ENTERING OR CROSSING SPECIFIED LOCATION 19 - LEAVING TRAFFIC LANE 20 - WALKING, RUNNING, JOGGING, PLAYING 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					
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 - SWERVING TO AVOID 20 - LOAD SHIFTING / FALLING / SPILLING 21 - IMPROPER CROSSING 22 - LYING IN ROADWAY 23 - NOT DISCERNIBLE 24 - OPENING DOOR INTO ROADWAY 25 - NOT DISCERNIBLE 26 - NOT DISCERNIBLE 27 - NOT DISCERNIBLE 28 - NOT DISCERNIBLE 29 - NOT DISCERNIBLE 30 - NOT DISCERNIBLE 31 - NOT DISCERNIBLE 32 - NOT DISCERNIBLE 33 - NOT DISCERNIBLE 34 - NOT DISCERNIBLE 35 - NOT DISCERNIBLE 36 - NOT DISCERNIBLE 37 - NOT DISCERNIBLE 38 - NOT DISCERNIBLE 39 - NOT DISCERNIBLE 40 - NOT DISCERNIBLE 41 - NOT DISCERNIBLE 42 - NOT DISCERNIBLE 43 - NOT DISCERNIBLE 44 - NOT DISCERNIBLE 45 - NOT DISCERNIBLE 46 - NOT DISCERNIBLE 47 - NOT DISCERNIBLE 48 - NOT DISCERNIBLE 49 - NOT DISCERNIBLE					
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 EQUIPMENT 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					
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					
COLLISION WITH FIXED OBJECT - STRUCK					
1 - FIRST HARMFUL EVENT 2 - MOST HARMFUL EVENT					

LOCAL REPORT NUMBER	
2 2 0 6 1 5 2 9	
DAMAGE	
DAMAGE SCALE	
4	1 - NONE 2 - MINOR DAMAGE 9 - UNKNOWN
3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE	
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	
TRAFFIC WAY FLOW	TRAFFIC CONTROL
1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 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 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
UNIT SPEED	DETECTED SPEED
3 5	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED	
3 5	



# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER									
2 2 0 6 1 5 2 9									
DATE OF BIRTH AGE GENDER									
0 3 2 6 1 9 7 5 4 7 F									

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE McKee, Tomjo Renee								DATE OF BIRTH			
	0 1									0 3 2 6 1 9 7 5	4 7	F	
ADDRESS: STREET, CITY, STATE, ZIP 3953 Kirkup Avenue Cincinnati, Ohio 45213										CONTACT PHONE - INCLUDE AREA CODE			
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	0 4	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
DL STATE O H	OPERATOR LICENSE NUMBER			OFFENSE CHARGED 331.17A		LOCAL CODE	<input checked="" type="checkbox"/>	OFFENSE DESCRIPTION Right of Way/Left Turn		CITATION NUMBER 251694			
DL CLASS 4	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	CONDITION	ALCOHOL TEST	DRUG TEST(S)			
UNIT # 0 2	NAME: LAST, FIRST, MIDDLE Vaughn, Joan Marie								DATE OF BIRTH 0 9 1 1 1 9 5 8	AGE 6 3	GENDER F		
ADDRESS: STREET, CITY, STATE, ZIP 5840 Emerald Lake Drive Fairfield, 45014										CONTACT PHONE - INCLUDE AREA CODE			
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	0 4	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
DL STATE O H	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	<input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER			
DL CLASS 4	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	CONDITION	ALCOHOL TEST	DRUG TEST(S)			
UNIT #	NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH 0	AGE	GENDER F		
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 <input type="checkbox"/> MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	<input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER			
DL 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	CONDITION	ALCOHOL TEST	DRUG TEST(S)			
INJURIES SEATING POSITION AIR BAG DL 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 - 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 - M/C MOPED ONLY	5 - EXCEPT CLASS A BUS	5 - TEST GIVEN, RESULTS UNKNOWN								
INJURED TAKEN BY										6 - NO VALID DL	6 - EXCEPT CLASS A & CLASS B BUS		
1 - NOT TRANSPORTED / TREATED AT SCENE	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	7 - EXCEPT TRACTOR-TRAILER	7 - EXCEPT TRACTOR-TRAILER									
2 - EMS	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	9 - DEPLOYMENT UNKNOWN	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE									
3 - POLICE	8 - THIRD - MIDDLE	10 - SLEEPER SECTION OF TRUCK CAB	9 - LEARNER'S PERMIT RESTRICTIONS	6 - PASSENGER									
9 - OTHER / UNKNOWN	9 - THIRD - RIGHT SIDE	11 - NOT EJECTED	10 - LIMITED TO DAYLIGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE									
SAFETY EQUIPMENT										11 - LIMITED TO EMPLOYMENT	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE		
1 - NONE USED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	12 - PASSENGER IN UNENCLOSED CARGO AREA	13 - TRAILING UNIT	12 - LIMITED - OTHER	9 - OTHER / UNKNOWN								
2 - SHOULDER BELT ONLY USED	12 - EXTRICATED BY MECHANICAL MEANS	13 - FREED BY NON-MECHANICAL MEANS	14 - MILITARY VEHICLES ONLY	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)									
3 - LAP BELT ONLY USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	15 - MOTOR VEHICLES WITHOUT AIR BRAKES										
4 - SHOULDER & LAP BELT USED	15 - NON-MOTORIST	16 - OUTSIDE MIRROR	16 - OUTSIDE MIRROR										
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	99 - OTHER / UNKNOWN	17 - PROSTHETIC AID	17 - PROSTHETIC AID										
6 - CHILD RESTRAINT SYSTEM - REAR FACING		18 - OTHER	18 - OTHER										
7 - BOOSTER SEAT													
8 - HELMET USED													
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)													
10 - REFLECTIVE CLOTHING													
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY													
99 - OTHER / UNKNOWN													
EJECTION TRAPPED										CONDITION	DRUG TEST TYPE		
F - FEMALE	M - MALE	U - OTHER / UNKNOWN	1 - APPARENTLY NORMAL	1 - NONE									
M - MALE	F - FEMALE	U - OTHER / UNKNOWN	2 - PHYSICAL IMPAIRMENT	2 - BLOOD									
U - OTHER / UNKNOWN	U - OTHER / UNKNOWN	U - OTHER / UNKNOWN	3 - URINE	3 - URINE									
GENDER										4 - BREATH			
DRUG TEST RESULT(S)										5 - OTHER			
1 - AMPHETAMINES	2 - BARBITURATES	3 - BENZODIAZEPINES	4 - CANNABINOID	5 - COCAINE									
6 - OPIATES / OPIOIDS	7 - OTHER	8 - NEGATIVE RESULTS	9 - OTHER / UNKNOWN	10 - OTHER									

LOCAL REPORT NUMBER  
22-061529

IN COUNTY OF  
BUTLER

REPORTING AGENCY

FAIRFIELD P.D.

CRASH LOCATION

S.R. 4 AND S. GILMORE Rd.

DATE OF CRASH  
M 08 D 26 Y 22

