



TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN		<input type="checkbox"/> OH-2	<input type="checkbox"/> OH-3	LOCAL INFORMATION		LOCAL REPORT NUMBER*		
		<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME*		NCIC*	2 2 0 6 1 5 3 6	
		<input type="checkbox"/> PRIVATE PROPERTY		Fairfield Police Department		0 0 9 0 1	HIT/SKIP	
COUNTY*		LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*		0 0 9 0 1		NUMBER OF UNITS	
0 9		1-CITY 2-VILLAGE 3-TOWNSHIP	City of Fairfield		0 0 9 0 1		UNIT IN ERROR	
					0 8 2 6 2 0 2 2 0 7 4 5		98 - ANIMAL 99 - UNKNOWN	
							5	
REFERENCE	ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME	ROAD TYPE	CRASH DATE / TIME*		CRASH SEVERITY
				N. Gilmore	R D	0 8 2 6 2 0 2 2 0 7 4 5		1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY
ROUTE TYPE	ROUTE NUMBER	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LATITUDE DECIMAL DEGREES		LONGITUDE DECIMAL DEGREES	
			8790		3 9 3 3 6 9 6 6		8 4 5 2 0 9 5 0	
REFERENCE POINT	DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE	INTERSECTION RELATED				
1 - INTERSECTION 3 - MILE POST 3 - HOUSE #	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	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	<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH	<input type="checkbox"/> WITHIN INTERCHANGE AREA	NUMBER OF APPROACHES
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	ROUTE TYPE	ROAD TYPE	ROADWAY				
	1 - MILES 2 - FEET 3 - YARDS			<input type="checkbox"/> ROADWAY DIVIDED				
LOCATION OF FIRST HARMFUL EVENT			MANNER OF CRASH COLLISION/IMPACT	DIRECTION OF TRAVEL	MEDIAN TYPE			
0 1	1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP	9 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED USE PATHS OR TRAILS 13 - BIKE LANE 14 - TOLL BOOTH 99 - OTHER / UNKNOWN	1 - NOT COLLISION 2 - TWO MOTOR VEHICLES IN TRANSPORT 3 - REAR-END 4 - HEAD-ON	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	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			
<input type="checkbox"/> WORK ZONE RELATED	WORK ZONE TYPE		LOCATION OF CRASH IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE		
<input type="checkbox"/> WORKERS PRESENT	1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER		1 - BEFORE THE 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	1	1	2		
<input type="checkbox"/> LAW ENFORCEMENT PRESENT				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		
<input type="checkbox"/> ACTIVE SCHOOL ZONE								
LIGHT CONDITION		WEATHER						
1	1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	0 1	1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL	6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN				
NARRATIVE			Indicate the north direction with an "N" on the compass diagram.					
On 08/26/2022 unit 1 was traveling southbound on N. Gilmore Rd. at about 5 MPH, when it failed to stop within the assured clear distance ahead, and in so doing, collided with the rear of unit 2 which was stopped in southbound traffic in front of 8790 N. Gilmore Rd.			SEE OH-2					
The driver of unit 1 was also charged with No Operator's License, 335.01A1, of the Fairfield Codified Ordinances.								
CRASH REPORTED DATE / TIME		DISPATCH DATE / TIME		ARRIVAL DATE / TIME		SCENE CLEARED DATE / TIME	REPORT TAKEN BY	
0 8 2 6 2 0 2 2 0 7 5 2		0 8 2 6 2 0 2 2 0 7 5 2		0 8 2 6 2 0 2 2 0 8 0 4		0 8 2 6 2 0 2 2 0 8 3 0	<input checked="" type="checkbox"/> POLICE AGENCY	
TOTAL TIME ROADWAY CLOSED		OTHER INVESTIGATION TIME		TOTAL MINUTES		OFFICER'S NAME*	<input type="checkbox"/> MOTORIST	
						C. Singleton		
						OFFICER'S BADGE NUMBER*	<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODS)	
						8 9	103	
CHECKED BY OFFICER'S NAME*								
CHECKED BY OFFICER'S BADGE NUMBER*								



UNIT

OWNER 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 # JJAT7882	VEHICLE IDENTIFICATION # K M 8 N U 4 C C 2 B U 1 5 1 1 0 0	VEHICLE YEAR 2 0 1 1	VEHICLE MAKE Hyundai
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY National General	INSURANCE POLICY # 2014700182	COLOR White	VEHICLE MODEL Veracruz
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
INTERLOCK <input type="checkbox"/> DEVICE EQUIPPED		# OCCUPANTS 0 1	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED CLASS # <input type="checkbox"/> PLACARD ID # <input type="checkbox"/> PLACARD	
UNIT TYPE 0 1 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		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)	
# OF TRAILING UNITS		2 - MOTORCYCLE 3-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
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 2 1 - YES 2 - NO 9 - OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL 0 2	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION 9 - UNKNOWN	
SPECIAL FUNCTION 0 1 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		1 - NONE 2 - TAXI 3 - BUS - SHUTTLE 4 - LOGGING	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 0 1 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 15 - OTHER / UNKNOWN
VEHICLE DEFECTS 0 1 1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 99 - OTHER / UNKNOWN
NON-MOTORIST LOCATION AT IMPACT 0 1 1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK		3 - INTERSECTION - OTHER CROSSWALK 4 - MIDDLEBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS 12 - FIRST RESPONDER AT INCIDENT SCENE 13 - APPROACHING OR LEAVING VEHICLE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/SPILLING 20 - IMPROPER CROSSING 99 - OTHER / UNKNOWN
ACTION 0 3 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN		1 - NON-CONTACT 2 - NON-COLLISION 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN	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 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 24 - OTHER MOVABLE OBJECT 99 - OTHER / UNKNOWN
CONTRIBUTING CIRCUMSTANCES 0 8 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 24 - OTHER MOVABLE OBJECT 99 - OTHER / UNKNOWN
SEQUENCE OF EVENTS 0 1 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 MOVABLE OBJECT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN
COLLISION WITH FIXED OBJECT - STRUCK 0 1 25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE		31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL SUPPORT 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN
1 FIRST HARMFUL EVENT 0 1		1 MOST HARMFUL EVENT		

LOCAL REPORT NUMBER 2 2 0 6 1 5 3 6	
DAMAGE	
DAMAGE SCALE 2 - NONE 2 - MINOR DAMAGE 9 - UNKNOWN	
DAMAGED AREA(S) INDICATE ALL THAT APPLY	
<input type="checkbox"/> - NO DAMAGE [0] <input type="checkbox"/> - UNDERCARRIAGE [14] <input type="checkbox"/> - TOP [13] <input type="checkbox"/> - ALL AREAS [15] <input type="checkbox"/> - UNIT NOT AT SCENE [16]	
INITIAL POINT OF CONTACT 0 - NO DAMAGE 1 - 12 - REFER TO UNIT DIAGRAM 13 - TOP	
TRAFFIC	
TRAFFICWAY FLOW 2	TRAFFIC CONTROL 6
# OF THROUGH LANES ON ROAD 2	RAIL GRADE CROSSING 1
UNIT / NON-MOTORIST DIRECTION 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 9 - OTHER / UNKNOWN	
FROM 1 TO 2	
UNIT SPEED 5	DETECTED SPEED 1
POSTED SPEED	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
2 0	

UNIT # 0 2 **OWNER NAME:** LAST, FIRST, MIDDLE (SAME AS DRIVER) **OWNER PHONE:** _____

Tipton, Leander

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

2695 John Jacob Ct. Hamilton, Ohio 45011

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

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE O H **LICENSE PLATE #** PMN9790 **VEHICLE IDENTIFICATION #** 1FTRX14W37NA80186 **VEHICLE YEAR** 2007 **VEHICLE MAKE** Ford

INSURANCE VERIFIED **INSURANCE COMPANY** Liberty Mutual **INSURANCE POLICY #** AOV28183779240 **COLOR** Red **VEHICLE MODEL** F150

TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE **US DOT #** **TOWED BY:** COMPANY NAME

INTERLOCK EQUIPPED **DEVICE EQUIPPED** **HIT/SKIP UNIT** **#OCCUPANTS** 0 1 **VEHICLE WEIGHT GVWR/GCWR**
 1 - ≤10K LBS. **HAZARDOUS MATERIAL** MATERIAL RELEASED **CLASS #** **PLACARD ID #**
 2 - 10,001 - 26K LBS. **PLACARD**
 3 - >26K LBS.

UNIT TYPE 0 4 **1 - PASSENGER CAR** **7 - MOTORCYCLE 2-WHEELED** **12 - GOLF CART** **18 - LIMO (LIVERY VEHICLE)** **23 - PEDESTRIAN / SKATER**
2 - PASSENGER VAN (MINIVAN) **8 - MOTORCYCLE 3-WHEELED** **13 - SNOWMOBILE** **19 - BUS (16+ PASSENGERS)** **24 - WHEELCHAIR (ANY TYPE)**
3 - SPORT UTILITY VEHICLE **9 - AUTOCYCLE** **14 - SINGLE UNIT TRUCK** **20 - OTHER VEHICLE** **25 - OTHER NON-MOTORIST**
4 - PICK UP **10 - MOPED OR MOTORIZED** **15 - SEMI-TRACTOR** **21 - HEAVY EQUIPMENT** **26 - BICYCLE**
5 - CARGO VAN **11 - BICYCLE** **16 - FARM EQUIPMENT** **22 - ANIMAL WITH RIDER OR** **27 - TRAIN**
6 - VAN (9-15 SEATS) **17 - MOTORHOME** **23 - ANIMAL DRAWN VEHICLE** **99 - UNKNOWN OR HIT/SKIP**

OF TRAILING UNITS _____

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 2 **1 - YES** **2 - NO** **9 - OTHER / UNKNOWN** **AUTONOMOUS MODE LEVEL**
 0 - NO AUTOMATION **3 - CONDITIONAL AUTOMATION** 9 - UNKNOWN
 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION
 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

SPECIAL FUNCTION 0 1 **1 - NONE** **6 - BUS - CHARTER/TOUR** **11 - FIRE** **16 - FARM** **21 - MAIL CARRIER**
2 - TAXI **7 - BUS - INTERCITY** **12 - MILITARY** **17 - MOWING** **99 - OTHER / UNKNOWN**
3 - ELECTRONIC RIDE SHARING **8 - BUS - SHUTTLE** **13 - POLICE** **18 - SNOW REMOVAL**
4 - SCHOOL TRANSPORT **9 - BUS - OTHER** **14 - PUBLIC UTILITY** **19 - TOWING**
5 - BUS - TRANSIT/COMMUTER **10 - AMBULANCE** **15 - CONSTRUCTION EQUIPMENT** **20 - SAFETY SERVICE PATROL**

CARGO BODY TYPE 0 1 **1 - NO CARGO BODY TYPE** **3 - VEHICLE TOWING ANOTHER** **5 - INTERMODAL CONTAINER** **8 - POLE** **12 - CONCRETE MIXER**
/NOT APPLICABLE **MOTOR VEHICLE** **CHASSIS** **9 - CARGO TANK** **13 - AUTO TRANSPORTER**
2 - BUS **4 - LOGGING** **6 - CARGO VAN/ENCLOSED BOX** **10 - FLAT BED** **14 - GARBAGE/REFUSE**
7 - GRAIN/CHIPS/GRAVEL **11 - DUMP** **15 - OTHER / UNKNOWN**

VEHICLE DEFECTS **1 - TURN SIGNALS** **4 - BRAKES** **7 - WORN OR SLICK TIRES** **9 - MOTOR TROUBLE** **99 - OTHER / UNKNOWN**
2 - HEAD LAMPS **5 - STEERING** **8 - TRAILER EQUIPMENT** **10 - DISABLED FROM PRIOR**
3 - TAIL LAMPS **6 - TIRE BLOWOUT** **DEFECTIVE** **ACCIDENT**

NON-MOTORIST LOCATION AT IMPACT **1 - INTERSECTION - MARKED CROSSWALK** **3 - INTERSECTION - OTHER** **6 - BICYCLE LANE** **9 - MEDIAN/CROSSING ISLAND** **12 - FIRST RESPONDER**
2 - INTERSECTION - UNMARKED CROSSWALK **4 - MIDBLOCK - MARKED CROSSWALK** **7 - SHOULDER / ROADSIDE** **10 - DRIVEWAY ACCESS** **AT INCIDENT SCENE**
5 - TRAVEL LANE - OTHER LOCATION **8 - SIDEWALK** **11 - SHARED USE PATHS OR TRAILS** **99 - OTHER / UNKNOWN**

ACTION 0 4 **1 - NON-CONTACT** **1 - STRAIGHT AHEAD** **7 - MAKING U-TURN** **13 - NEGOTIATING A CURVE** **18 - APPROACHING OR LEAVING VEHICLE**
2 - NON-COLLISION **2 - BACKING** **8 - ENTERING TRAFFIC LANE** **14 - ENTERING OR CROSSING SPECIFIED LOCATION** **19 - STANDING**
3 - STRIKING **1 - 1 - 3 - CHANGING LANES** **9 - LEAVING TRAFFIC LANE** **10 - PARKED** **15 - WALKING, RUNNING, JOGGING, PLAYING** **20 - OTHER NON-MOTORIST**
4 - STRUCK **PRE-CRASH ACTIONS** **4 - OVERTAKING/PASSING** **11 - SLOWING OR STOPPED IN TRAFFIC** **16 - WORKING** **21 - STANDING OUTSIDE DISABLED VEHICLE**
5 - BOTH STRIKING & STRUCK **5 - MAKING RIGHT TURN** **6 - MAKING LEFT TURN** **12 - DRIVERLESS** **17 - PUSHING VEHICLE** **99 - OTHER / UNKNOWN**

CONTRIBUTING CIRCUMSTANCES 0 1 **1 - NONE** **7 - LEFT OF CENTER** **13 - IMPROPER START FROM A PARKED POSITION** **17 - VISION OBSTRUCTION** **21 - LYING IN ROADWAY**
2 - FAILURE TO YIELD **8 - FOLLOWING TOO CLOSE / ACDA** **14 - STOPPED OR PARKED ILLEGALLY** **18 - OPERATING DEFECTIVE EQUIPMENT** **22 - NOT DISCERNIBLE**
3 - RAN RED LIGHT **9 - IMPROPER LANE CHANGE** **15 - SWERVING TO AVOID** **19 - LOAD SHIFTING/FALLING/SPILLING** **23 - OPENING DOOR INTO ROADWAY**
4 - RAN STOP SIGN **10 - IMPROPER PASSING** **16 - WRONG WAY** **20 - IMPROPER CROSSING** **99 - OTHER IMPROPER ACTION**
5 - UNSAFE SPEED **11 - DROVE OFF ROAD**
6 - IMPROPER TURN **12 - IMPROPER BACKING**

SEQUENCE OF EVENTS

1 2 0 **1 - OVERTURN/ROLLOVER** **6 - EQUIPMENT FAILURE** **11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL** **16 - RAILWAY VEHICLE** **22 - WORK ZONE MAINTENANCE EQUIPMENT**
2 - FIRE/EXPLOSION **7 - SEPARATION OF UNITS** **12 - DOWNHILL RUNAWAY** **17 - ANIMAL - FARM** **23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION**
3 - IMMERSION **8 - RAN OFF ROAD RIGHT** **13 - OTHER NON-COLLISION** **18 - ANIMAL - DEER** **24 - BY A MOTOR VEHICLE**
4 - JACKKNIFE **9 - RAN OFF ROAD LEFT** **10 - CROSS MEDIAN** **19 - OTHER - OTHER** **25 - TRANSPORT**
5 - CARGO/EQUIPMENT LOSS OR SHIFT **14 - PEDESTRIAN** **15 - PEDALCYCLE** **20 - MOTOR VEHICLE IN** **26 - OTHER MOBILE OBJECT**

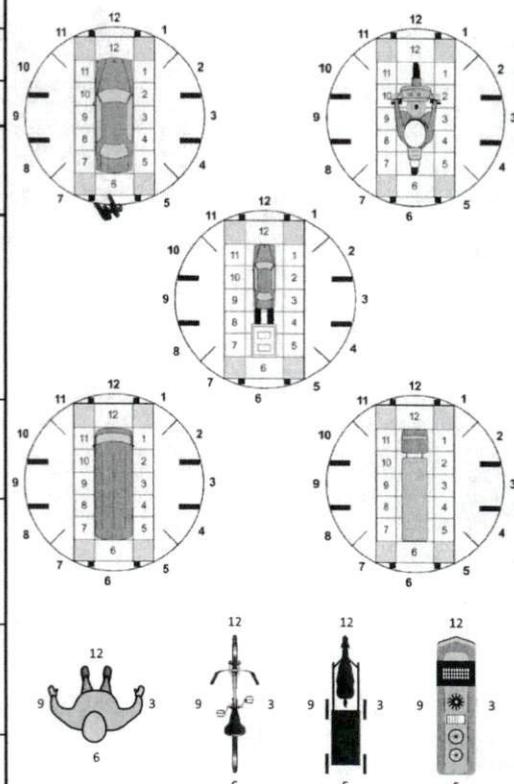
4 1 **25 - IMPACT ATTENUATOR / CRASH CUSHION** **31 - GUARDRAIL END** **37 - TRAFFIC SIGN POST** **43 - CURB** **50 - WORK ZONE MAINTENANCE EQUIPMENT**
26 - BRIDGE OVERHEAD STRUCTURE **32 - PORTABLE BARRIER** **38 - OVERHEAD SIGN POST** **44 - DITCH** **51 - WALL**
33 - MEDIAN CABLE BARRIER **39 - LIGHT / LUMINARIES** **45 - EMBANKMENT** **52 - BUILDING**
34 - MEDIAN GUARDRAIL SUPPORT **40 - UTILITY POLE** **46 - FENCE** **53 - TUNNEL**
27 - BRIDGE PIER OR ABUTMENT BARRIER **35 - MEDIAN CONCRETE BARRIER** **41 - OTHER POST, POLE OR SUPPORT** **47 - MAILBOX** **54 - TREE**
28 - BRIDGE PARAPET **36 - MEDIAN OTHER BARRIER** **42 - CULVERT** **48 - FIRE HYDRANT** **55 - OTHER / UNKNOWN**

1 **FIRST HARMFUL EVENT** **1** **MOST HARMFUL EVENT**

LOCAL REPORT NUMBER
 2 2 0 6 1 5 3 6

DAMAGE
DAMAGE SCALE
 1 - NONE 3 - FUNCTIONAL DAMAGE
 2 - MINOR DAMAGE 4 - DISABLING DAMAGE
 9 - UNKNOWN

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY



□ - NO DAMAGE **[0]** **□ - UNDERCARRIAGE** **[14]**

□ - TOP **[13]** **□ - ALL AREAS** **[15]**

□ - UNIT NOT AT SCENE **[16]**

INITIAL POINT OF CONTACT
 0 - NO DAMAGE 14 - UNDERCARRIAGE
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
 13 - TOP 99 - UNKNOWN

TRAFFIC
TRAFFICWAY FLOW **[2]** **TRAFFIC CONTROL**
 1 - ONE-WAY 4 - STOP SIGN
 2 - TWO-WAY 5 - YIELD SIGN
 3 - FLASHER 6 - NO CONTROL

OF THROUGH LANES ON ROAD **[2]** **RAIL GRADE CROSSING**
 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING
 2 - INVOLVED-PASSIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION
 1 - NORTH 5 - NORTHEAST
 2 - SOUTH 6 - NORTHWEST
 3 - EAST 7 - SOUTHEAST
 4 - WEST 8 - SOUTHWEST
 9 - OTHER / UNKNOWN

UNIT SPEED **[0]** **DETECTED SPEED**
 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR
POSTED SPEED 3 - UNDETERMINED
 2 0



MOTORIST / Non-MOTORIST

MOTORIST / NON-MOTORIST	LOCAL REPORT NUMBER											
	2 2 0 6 1 5 3 6					DATE OF BIRTH		AGE	GENDER			
UNIT #	NAME: LAST, FIRST, MIDDLE 0 1 Alvarez Reyes, Claudia											
ADDRESS: STREET, CITY, STATE, ZIP	2702 Tylersville Rd. #49 Hamilton, Ohio 45015											
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5						0 4	<input type="checkbox"/>		0 1	1	1	1
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER			
				333.03A		X	ACDA		251361			
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)		
6				1	<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA	1	1	1	1	1	RESULT SELECT UP TO 4
<input type="checkbox"/>	NAME: LAST, FIRST, MIDDLE 0 2 King Jr., Kevin											
ADDRESS: STREET, CITY, STATE, ZIP	2695 John Jacob Ct. Hamilton, Ohio 45011											
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5						0 4	<input type="checkbox"/>		0 1	1	1	1
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER			
O H												
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)		
4				1	<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA	1	1	1	1	1	RESULT SELECT UP TO 4
UNIT #	NAME: LAST, FIRST, MIDDLE											
ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE											
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
							<input type="checkbox"/>					
DL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	OFFENSE DESCRIPTION		CITATION NUMBER			
DL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST		DRUG TEST(S)		
				1	<input type="checkbox"/> ALCOHOL	<input type="checkbox"/> MARIJUANA	1	1	1	1	1	RESULT SELECT UP TO 4
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 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS								
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7 - EXCEPT TRACTOR-TRAILER								
2 - EMS	8 - THIRD - MIDDLE	1 - NOT EJECTED	H - HAZMAT	8 - INTERMEDIATE LICENSE RESTRICTIONS	1 - NONE							
3 - POLICE	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED	M - MOTORCYCLE	2 - BLOOD								
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED	P - PASSENGER	3 - URINE								
SAFETY EQUIPMENT		4 - NOT APPLICABLE	N - TANKER	4 - BREATH								
1 - NONE USED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOT TRAPPED	Q - MOTOR SCOOTER	5 - OTHER								
2 - SHOULDER BELT ONLY USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	2 - EXTRICATED BY MECHANICAL MEANS	R - THREE-WHEEL MOTORCYCLE									
3 - LAP BELT ONLY USED	13 - TRAILING UNIT	3 - FREED BY NON-MECHANICAL MEANS	S - SCHOOL BUS									
4 - SHOULDER & LAP BELT USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		T - DOUBLE & TRIPLE TRAILERS									
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	15 - NON-MOTORIST		X - TANKER / HAZMAT									
6 - CHILD RESTRAINT SYSTEM - REAR FACING	99 - OTHER / UNKNOWN											
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	OL ENDORSEMENT											
1 - NOT EJECTED	H - HAZMAT											
2 - PARTIALLY EJECTED	M - MOTORCYCLE											
3 - TOTALLY EJECTED	P - PASSENGER											
4 - NOT APPLICABLE	N - TANKER											
TRAPPED												
1 - NOT TRAPPED	Q - MOTOR SCOOTER											
2 - EXTRICATED BY MECHANICAL MEANS	R - THREE-WHEEL MOTORCYCLE											
3 - FREED BY NON-MECHANICAL MEANS	S - SCHOOL BUS											
GENDER												
F - FEMALE												
M - MALE												
U - OTHER / UNKNOWN												
CONDITION												
1 - APPARENTLY NORMAL												
2 - PHYSICAL IMPAIRMENT												
3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)												
4 - ILLNESS												
5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.												
6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL												
9 - OTHER / UNKNOWN												
DRUG TEST TYPE												
1 - NONE												
2 - BLOOD												
3 - URINE												
4 - BREATH												
DRUG TEST RESULT(S)												
1 - AMPHETAMINES												
2 - BARBITURATES												
3 - BENZODIAZEPINES												
4 - CANNABINOID												
5 - COCAINE												
6 - OPIATES / OPIOIDS												
7 - OTHER												
8 - NEGATIVE RESULTS												

OHIO TRAFFIC ACCIDENT - DIAGRAM / NARRATIVE CONTINUATION

OH-2 (Rev. 1/82)

LOCAL REPORT NUMBER	22-061536	REPORTING AGENCY	Fairfield Police Department	DATE OF ACCIDENT	8/26/22
IN COUNTY OF	Butler	ACCIDENT LOCATION	8790 N. Gilmore Rd.		
			OFFICER'S SIGNATURE	C. Singleton	
				BADGE NO 89	