



# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

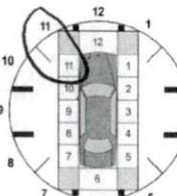
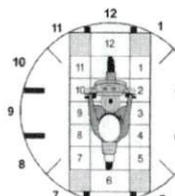
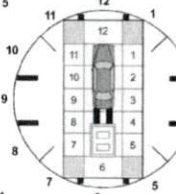
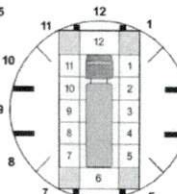
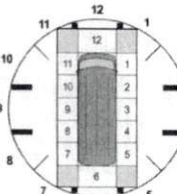
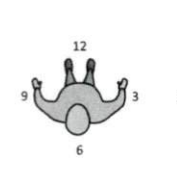



LOCAL REPORT NUMBER\*

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH		<input checked="" type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY	LOCAL INFORMATION		2 2 0 6 2 0 0 4	
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* 08 27 2022 18 55		UNIT IN ERROR 0 1 98 - ANIMAL 99 - UNKNOWN
ROUTE TYPE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	ROUTE NUMBER	PREFIX	LOCATION ROAD NAME Mack	ROAD TYPE R D	LATITUDE DECIMAL DEGREES 39.311632	CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY
ROUTE TYPE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	ROUTE NUMBER	PREFIX	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Crestview	ROAD TYPE A V	LONGITUDE DECIMAL DEGREES -84.530371	
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 1	DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 4	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 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	INTERSECTION RELATED <input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES 3		
DISTANCE FROM REFERENCE 2 0	DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS 2	MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN		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 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	CONDITIONS 1	SURFACE 2
LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN 4		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 0 1		1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN		
NARRATIVE On 08/27/22 at 8:55 P.M. Unit 2 was traveling West on Mack Rd. near Crestview Ave. Unit 1 was stopped at the stop sign on Crestview Ave. to turn right on Mack Rd. Unit 1 failed to yield to the right of way of Unit 2. Unit 2 struck Unit 1 on the front driver's side.  See OH-2						
CRASH REPORTED DATE / TIME 08 27 2022 20 55		DISPATCH DATE / TIME 08 27 2022 21 04		ARRIVAL DATE / TIME 08 27 2022 21 08		SCENE CLEARED DATE / TIME 08 27 2022 21 53
TOTAL TIME ROADWAY CLOSED 0	OTHER INVESTIGATION TIME 3 0	TOTAL MINUTES 7 9	OFFICER'S NAME* D. Miller	CHECKED BY OFFICER'S NAME* D. Pott		
OFFICER'S BADGE NUMBER* 1 6 7			CHECKED BY OFFICER'S BADGE NUMBER* 1 3 0			
<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST			<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO USPS)			



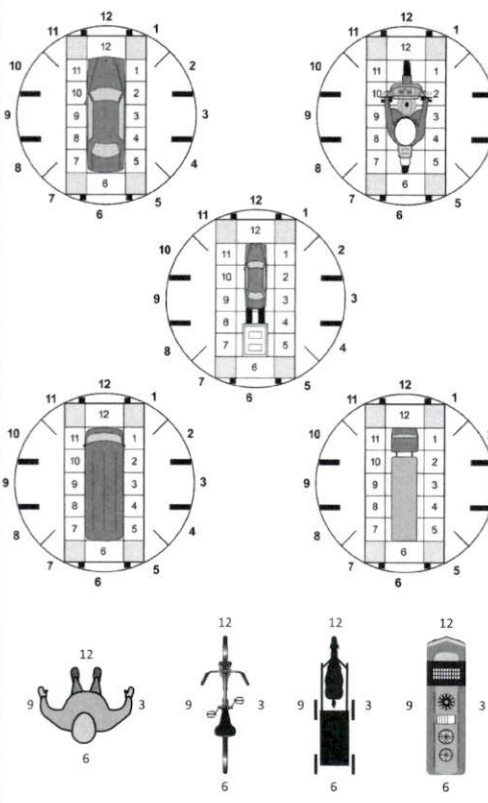
<b>OWNER</b>	UNIT # <div style="border: 1px solid black; padding: 2px;">01</div>	OWNER NAME: LAST, FIRST, MIDDLE, <input checked="" type="checkbox"/> SAME AS DRIVER		OWNER PHONE: INCLUDE AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER	
	OWNER ADDRESS: STREET, CITY, STATE, ZIP <input checked="" type="checkbox"/> SAME AS DRIVER				
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP				COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	

LP STATE <div style="border: 1px solid black; padding: 2px;">OH</div>	LICENSE PLATE # HW1253	VEHICLE IDENTIFICATION # <div style="border: 1px solid black; padding: 2px;">1G1ZC5E09AF216649</div>	VEHICLE YEAR <div style="border: 1px solid black; padding: 2px;">2010</div>	VEHICLE MAKE Chevy
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY Progressive	INSURANCE POLICY # 953218311	COLOR Blue	VEHICLE MODEL Malibu
<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT # <div style="border: 1px solid black; padding: 2px;"> </div>	TOWED BY: COMPANY NAME Wayne's	
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS <div style="border: 1px solid black; padding: 2px;">01</div>	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED    CLASS #    PLACARD ID # <input type="checkbox"/> PLACARD <div style="border: 1px solid black; padding: 2px;"> </div>	
UNIT TYPE		VEHICLE WEIGHT GVWR/GCWR		
<div style="border: 1px solid black; padding: 2px;">01</div> 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	
<div style="border: 1px solid black; padding: 2px;">0</div> # OF TRAILING UNITS		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		
<div style="border: 1px solid black; padding: 2px;">2</div> WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - YES 2 - NO 9 - OTHER / UNKNOWN		AUTONOMOUS MODE LEVEL <div style="border: 1px solid black; padding: 2px;">0</div> 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION		
<div style="border: 1px solid black; padding: 2px;">01</div> 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		
<div style="border: 1px solid black; padding: 2px;">01</div> 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 - GRAIN/CHIPS/GRAVEL 8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP 12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN		
<div style="border: 1px solid black; padding: 2px;"> </div> 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		
<div style="border: 1px solid black; padding: 2px;"> </div> 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		
<div style="border: 1px solid black; padding: 2px;">4</div> ACTION 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN		<div style="border: 1px solid black; padding: 2px;">05</div> PRE-CRASH ACTIONS 1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN		
<div style="border: 1px solid black; padding: 2px;">02</div> 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				
<div style="border: 1px solid black; padding: 2px;">120</div> 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT				
<div style="border: 1px solid black; padding: 2px;"> </div> 6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN				
<div style="border: 1px solid black; padding: 2px;"> </div> 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE				
<div style="border: 1px solid black; padding: 2px;"> </div> 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE				
<div style="border: 1px solid black; padding: 2px;"> </div> 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				
<div style="border: 1px solid black; padding: 2px;"> </div> 25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE				
<div style="border: 1px solid black; padding: 2px;"> </div> 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER				
<div style="border: 1px solid black; padding: 2px;"> </div> 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT				
<div style="border: 1px solid black; padding: 2px;"> </div> 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT				
<div style="border: 1px solid black; padding: 2px;"> </div> 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN				
<div style="border: 1px solid black; padding: 2px;">1</div> FIRST HARMFUL EVENT				

LOCAL REPORT NUMBER	
<div style="border-bottom: 1px solid black; display: flex; justify-content: space-around; width: 100%;"> <span>2</span><span>2</span><span>0</span><span>6</span><span>2</span><span>0</span><span>0</span><span>4</span> </div>	
DAMAGE	
DAMAGE SCALE	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>1 - NONE</p> <p>2 - MINOR DAMAGE</p> <p>9 - UNKNOWN</p> </div> <div style="width: 45%;"> <p>3 - FUNCTIONAL DAMAGE</p> <p>4 - DISABLING DAMAGE</p> </div> </div>	
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p>4</p> </div>	
DAMAGED AREA(S)	
INDICATE ALL THAT APPLY	
<div style="display: flex; flex-wrap: wrap; justify-content: space-around;">          </div>	
<div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p><input type="checkbox"/> - NO DAMAGE [ 0 ]</p> <p><input type="checkbox"/> - TOP [ 13 ]</p> </div> <div style="width: 45%;"> <p><input type="checkbox"/> - UNDERCARRIAGE [ 14 ]</p> <p><input type="checkbox"/> - ALL AREAS [ 15 ]</p> </div> </div>	
<p><input type="checkbox"/> - UNIT NOT AT SCENE [ 16 ]</p>	
INITIAL POINT OF CONTACT	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>0 - NO DAMAGE</p> <p>1-12 - REFER TO UNIT DIAGRAM</p> <p>13 - TOP</p> </div> <div style="width: 45%;"> <p>14 - UNDERCARRIAGE</p> <p>15 - VEHICLE NOT AT SCENE</p> <p>99 - UNKNOWN</p> </div> </div>	
TRAFFIC	
<p style="font-weight: bold;">TRAFFICWAY FLOW</p> <p>1 - ONE-WAY</p> <p>2 - TWO-WAY</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>2</p> </div>	<p style="font-weight: bold;">TRAFFIC CONTROL</p> <p>1 - ROUNDABOUT</p> <p>2 - SIGNAL</p> <p>3 - FLASHER</p> <p>4 - STOP SIGN</p> <p>5 - YIELD SIGN</p> <p>6 - NO CONTROL</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>4</p> </div>
<p style="font-weight: bold;"># OF THROUGH LANES ON ROAD</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>2</p> </div>	<p style="font-weight: bold;">RAIL GRADE CROSSING</p> <p>1 - NOT INVOLVED</p> <p>2 - INVOLVED-ACTIVE CROSSING</p> <p>3 - INVOLVED-PASSIVE CROSSING</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>1</p> </div>
UNIT / NON-MOTORIST DIRECTION	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>1 - NORTH</p> <p>2 - SOUTH</p> <p>3 - EAST</p> <p>4 - WEST</p> </div> <div style="width: 45%;"> <p>5 - NORTHEAST</p> <p>6 - NORTHWEST</p> <p>7 - SOUTHEAST</p> <p>8 - SOUTHWEST</p> <p>9 - OTHER / UNKNOWN</p> </div> </div>	
<div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <p style="font-weight: bold;">UNIT SPEED</p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>1 0</p> </div> </div> <div style="width: 45%;"> <p style="font-weight: bold;">DETECTED SPEED</p> <p>1 - STATED / ESTIMATED SPEED</p> <p>2 - CALCULATED / EDR</p> <p>3 - UNDETERMINED</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>1</p> </div> </div> </div>	
<p style="font-weight: bold;">POSTED SPEED</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>3 5</p> </div>	



OWNER	UNIT # 02	OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE (X SAME AS DRIVER)			
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE				
VEHICLE	LP STATE OH	LICENSE PLATE # CN39UG	VEHICLE IDENTIFICATION # 1G1ZG5ST4KF207927	VEHICLE YEAR 2019	VEHICLE MAKE Chevy	
	<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY State Farm	INSURANCE POLICY # C964001-C0335A	COLOR White	VEHICLE MODEL Malibu	
	TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME Marcell's		
	<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED	<input type="checkbox"/> HIT/SKIP UNIT	#OCCUPANTS 01	VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD CLASS # PLACARD ID #	
	UNIT TYPE 01		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 BICYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE 5 - CARGO VAN 11 - ALL-TERRAIN VEHICLE (ATV / UTV) 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP			
	# OF TRAILING UNITS 0		WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - YES 2 - NO 9 - OTHER / UNKNOWN			
	AUTONOMOUS MODE LEVEL 0		0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION			
	SPECIAL FUNCTION 01		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 01		1 - NO CARGO BODY TYPE / NOT APPLICABLE 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER 2 - BUS 4 - LOGGING 6 - CARGO VAN / ENCLOSED BOX 9 - CARGO TANK 13 - AUTO TRANSPORTER 7 - GRAIN / CHIPS / GRAVEL 11 - DUMP 14 - GARBAGE / REFUSE 99 - 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 DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT 3 - TAIL LAMPS 6 - TIRE BLOWOUT			
EVENT(S)	NON-MOTORIST LOCATION AT IMPACT 0	1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN / CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE 2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN 5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS				
	ACTION 3	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 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST 4 - STRUCK PRE-CRASH ACTIONS 4 - OVERTAKING / PASSING 10 - PARKED 16 - WORKING 21 - STANDING OUTSIDE DISABLED VEHICLE 5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED IN TRAFFIC 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN 6 - MAKING LEFT TURN 12 - DRIVERLESS				
	CONTRIBUTING CIRCUMSTANCES 01	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 24 - OTHER IMPROPER ACTION 5 - UNSAFE SPEED 11 - DROVE OFF ROAD 6 - IMPROPER TURN 12 - IMPROPER BACKING				
	SEQUENCE OF EVENTS	NON-COLLISION 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 BY A MOTOR VEHICLE 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE 21 - PARKED MOTOR VEHICLE				
	COLLISION WITH FIXED OBJECT - STRUCK 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 27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 45 - EMBANKMENT 52 - BUILDING 28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 40 - UTILITY POLE 46 - FENCE 53 - TUNNEL 29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 41 - OTHER POST, POLE OR SUPPORT 47 - MAILBOX 54 - OTHER FIXED OBJECT 30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT 48 - TREE 99 - OTHER / UNKNOWN 49 - FIRE HYDRANT					
	FIRST HARMFUL EVENT 1		MOST HARMFUL EVENT 1			

LOCAL REPORT NUMBER 22062004	
DAMAGE DAMAGE SCALE 4 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN	
DAMAGED AREA(S) INDICATE ALL THAT APPLY  <input type="checkbox"/> NO DAMAGE [0] <input type="checkbox"/> UNDERCARRIAGE [14] <input type="checkbox"/> TOP [13] <input type="checkbox"/> ALL AREAS [15] <input type="checkbox"/> UNIT NOT AT SCENE [16]	
INITIAL POINT OF CONTACT 0 - NO DAMAGE 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN 13 - TOP	
TRAFFIC TRAFFICWAY FLOW 2 1 - ONE-WAY 2 2 - TWO-WAY TRAFFIC CONTROL 6 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL	
# OF THROUGH LANES ON ROAD 2	RAIL GRADE CROSSING 1 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION FROM 3 TO 4 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
UNIT SPEED 3 5	DETECTED SPEED 1 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED 3 5	





# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
2 2 0 6 2 0 0 4

UNIT # 0 1	NAME: LAST, FIRST, MIDDLE Rodriguez, Veronica	DATE OF BIRTH 0 1 0 2 2 0 0 0		AGE 2 2	GENDER F					
ADDRESS: STREET, CITY, STATE, ZIP 11419 Rose Lane., Cincinnati, OH 45246		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 MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 2	EJECTION 1	TRAPPED 1	
OL STATE O H	OPERATOR LICENSE NUMBER		OFFENSE CHARGED 331.19 a	LOCAL CODE <input checked="" type="checkbox"/>	OFFENSE DESCRIPTION Stop Signs		CITATION NUMBER 254792			
OL 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 1	ALCOHOL TEST STATUS TYPE VALUE 1 1		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4 1 1	

UNIT # 0 2	NAME: LAST, FIRST, MIDDLE Grosser, Crystal	DATE OF BIRTH 0 5 1 7 1 9 8 1		AGE 4 1	GENDER F					
ADDRESS: STREET, CITY, STATE, ZIP 12140 Regency Run Ct. Apt. 1, Cincinnati, OH 45240		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 MC HELMET	SEATING POSITION 0 1	AIR BAG USAGE 2	EJECTION 1	TRAPPED 1	
OL STATE O H	OPERATOR LICENSE NUMBER		OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER			
OL 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 1	ALCOHOL TEST STATUS TYPE VALUE 1 1		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4 1 1	

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH		AGE 0	GENDER					
ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE								
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
OL STATE	OPERATOR LICENSE NUMBER		OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION		CITATION NUMBER			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		CONDITION	ALCOHOL TEST STATUS TYPE VALUE		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4	

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
	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER	
	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE	
	8 - THIRD - MIDDLE			8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	
	9 - THIRD - RIGHT SIDE			9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	
	10 - SLEEPER SECTION OF TRUCK CAB			10 - LIMITED TO DAYLIGHT ONLY		
	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)			11 - LIMITED TO EMPLOYMENT		
	12 - PASSENGER IN UNENCLOSED CARGO AREA			12 - LIMITED - OTHER		
	13 - TRAILING UNIT			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		
	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			14 - MILITARY VEHICLES ONLY		
	15 - NON-MOTORIST			15 - MOTOR VEHICLES WITHOUT AIR BRAKES		
	99 - OTHER / UNKNOWN			16 - OUTSIDE MIRROR		
				17 - PROSTHETIC AID		
				18 - OTHER		

EJECTION	OL ENDORSEMENT	TRAPPED	GENDER
1 - NOT EJECTED	H - HAZMAT	1 - NOT TRAPPED	F - FEMALE
2 - PARTIALLY EJECTED	M - MOTORCYCLE	2 - EXTRICATED BY MECHANICAL MEANS	M - MALE
3 - TOTALLY EJECTED	P - PASSENGER	3 - FREED BY NON-MECHANICAL MEANS	U - OTHER / UNKNOWN
4 - NOT APPLICABLE	N - TANKER		
	Q - MOTOR SCOOTER		
	R - THREE-WHEEL MOTORCYCLE		
	S - SCHOOL BUS		
	T - DOUBLE & TRIPLE TRAILERS		
	X - TANKER / HAZMAT		

CONDITION	DRUG TEST TYPE
1 - APPARENTLY NORMAL	1 - NONE
2 - PHYSICAL IMPAIRMENT	2 - BLOOD
3 - EMOTIONAL (E.G. DEPRESSED, ANGRY, DISTURBED)	3 - URINE
4 - ILLNESS	4 - BREATH
5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	5 - OTHER
6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	
9 - OTHER / UNKNOWN	

DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

LOCAL REPORT NUMBER <b>PD-22-062004</b>	REPORTING AGENCY <b>Fairfield Police Department</b>	DATE OF ACCIDENT <b>8/27/22</b>
IN COUNTY OF <b>Butler</b>	ACCIDENT LOCATION <b>Mack Rd.// Crestview Ave.</b>	

Stop Sign

1

2

N

NOT TO SCALE

OFFICER'S SIGNATURE  
**D. Miller**

BADGE NO.  
**167**