

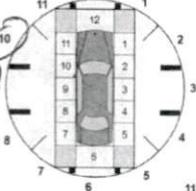
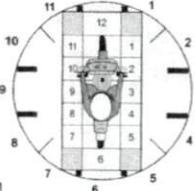
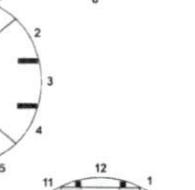
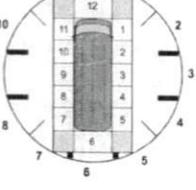
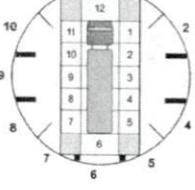
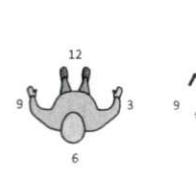
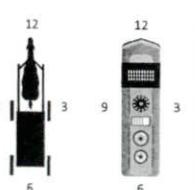
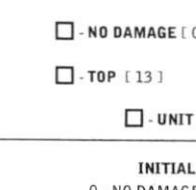
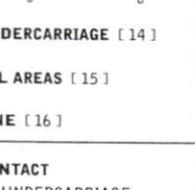


TRAFFIC CRASH REPORT

*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"/> SECONDARY CRASH		<input type="checkbox"/> OH-1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME*		NCIC*	2 2 0 6 3 2 9 6		
				Fairfield Police Department		0 0 9 0 1	HIT/SKIP	NUMBER OF UNITS	
							1 - SOLVED	0 2	
							2 - UNSOLVED		
COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*					CRASH DATE / TIME*		
0 9	1 - CITY 2 - VILLAGE 3 - TOWNSHIP	City of Fairfield					0 9 0 1 2 0 2 2 1 2 5 2		
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DECIMAL DEGREES		
				SEWARD		R D	3 9 3 3 9 6 2 2		
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)		ROAD TYPE	LONGITUDE DECIMAL DEGREES		
				8700			- 8 4 4 9 1 8 5 5		
REFERENCE POINT	DIRECTION FROM REFERENCE	ROUTE TYPE		ROAD TYPE		CRASH SEVERITY			
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		1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY			
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	1 - MILES 2 - FEET 3 - YARDS		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			
LOCATION OF FIRST HARMFUL EVENT				MANNER OF CRASH COLLISION/IMPACT			INTERSECTION RELATED		
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	6	1 - NOT COLLISION 2 - MOTOR VEHICLES IN TRANSPORT 3 - REAR-END 4 - HEAD-ON	4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN	<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA		NUMBER OF APPROACHES	
							ROADWAY		
							<input type="checkbox"/> ROADWAY DIVIDED		
							DIRECTION OF TRAVEL		MEDIAN TYPE
							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	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						9 - OTHER/UNKNOWN			
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	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									
<p>On 09-01-22 at 12:52 p.m., Unit 1 and Unit 2 were traveling north on Seward Rd. Unit 2 slowed down to make a turn onto the private drive of 8700 Seward Rd, when the driver of Unit 1 dropped his cell phone and then after retrieving the phone attempted to stop before striking Unit 2. Unit 1 ultimately slid into the passenger side of Unit 2.</p> <p>Unit 2 was pulling a 1987 Duracraft Trailer (MI:C288083)</p>									
<p>* NOT TO SCALE</p>									
CRASH REPORTED DATE / TIME		DISPATCH DATE / TIME		ARRIVAL DATE / TIME		SCENE CLEARED DATE / TIME		REPORT TAKEN BY	
0 9 0 1 2 0 2 2 1 2 5 3		0 9 0 1 2 0 2 2 1 3 0 4		0 9 0 1 2 0 2 2 1 3 1 2		0 9 0 1 2 0 2 2 1 3 5 4		<input checked="" type="checkbox"/> POLICE AGENCY	
TOTAL TIME ROADWAY CLOSED		OTHER INVESTIGATION TIME		TOTAL MINUTES		OFFICER'S NAME*		<input type="checkbox"/> MOTORIST	
1 0		3 0		8 0		P. O. J. DRAKE		<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODS)	
						CHECKED BY OFFICER'S NAME*			
						1 0 3			
						CHECKED BY OFFICER'S BADGE NUMBER*			
HSY7001 OH1 1/19 [760-0820]									
PAGE 1 OF 4									

OWNER	UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (<input checked="" type="checkbox"/> SAME AS DRIVER)		OWNER PHONE: INCLUDE AREA CODE (<input checked="" type="checkbox"/> SAME AS DRIVER)	
	0 1				
	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	VEHICLE MAKE
	O H	HJD7533	J M 1 D K F B 7 5 J 0 3 1 2 3 2 5	2 0 1 8	MAZDA
	<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY PROGRESSIVE	INSURANCE POLICY # 911265461	COLOR BLACK	VEHICLE MODEL CX-3
	TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
	INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT		#OCCUPANTS 0 1	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	
	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	
1 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED 11 - ALL TERRAIN VEHICLE (ATV / UTV)		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	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP		
UNIT TYPE 0 1		# OF TRAILING UNITS			
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 - 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			
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			
0 1 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 15 - DUMP			
1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS		4 - BRAKES 5 - STEERING 6 - TRAILER EQUIPMENT DEFECTIVE 7 - WORN OR SLICK TIRES 8 - DEFECTIVE 9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 99 - OTHER / UNKNOWN			
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			
0 3 ACTION 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN		1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS 13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE 18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 22 - LYING IN ROADWAY 23 - NOT DISCERNIBLE EQUIPMENT 24 - OPENING DOOR INTO ROADWAY 25 - LOAD SHIFTING/FALLING/SPILLING 26 - WORKING 27 - SWERVING TO AVOID 28 - DRIVING ON ROAD 29 - DRIVING OFF ROAD 30 - DRIVING ON ROAD 31 - DRIVING ON ROAD 32 - DRIVING ON ROAD 33 - DRIVING ON ROAD 34 - DRIVING ON ROAD 35 - DRIVING ON ROAD 36 - DRIVING ON ROAD 37 - DRIVING ON ROAD 38 - DRIVING ON ROAD 39 - DRIVING ON ROAD 40 - DRIVING ON ROAD 41 - DRIVING ON ROAD 42 - DRIVING ON ROAD 43 - DRIVING ON ROAD 44 - DRIVING ON ROAD 45 - DRIVING ON ROAD 46 - DRIVING ON ROAD 47 - DRIVING ON ROAD 48 - DRIVING ON ROAD 49 - DRIVING ON ROAD			
9 9 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 - WORK ZONE MAINTENANCE EQUIPMENT 22 - ANIMAL - FARM 23 - ANIMAL - DEER 24 - ANIMAL - OTHER 25 - MOTOR VEHICLE IN TRANSPORT 26 - PEDESTRIAN 27 - RAILWAY VEHICLE 28 - ANIMAL - OTHER 29 - ANYTHING SET IN MOTION BY A MOTOR VEHICLE 30 - PERSON 31 - PERSON 32 - PERSON 33 - PERSON 34 - PERSON 35 - PERSON 36 - PERSON 37 - PERSON 38 - PERSON 39 - PERSON 40 - PERSON 41 - PERSON 42 - PERSON 43 - PERSON 44 - PERSON 45 - PERSON 46 - PERSON 47 - PERSON 48 - PERSON 49 - PERSON			
SEQUENCE OF EVENTS 1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT		6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT			
4 - IMPACT ATTENUATOR / CRASH CUSHION 5 - BRIDGE/OVERHEAD STRUCTURE 6 - BRIDGE PIER OR ABUTMENT 7 - BRIDGE PARAPET 8 - BRIDGE RAIL 9 - GUARDRAIL FACE		10 - GUARDRAIL END 11 - PORTABLE BARRIER 12 - MEDIAN CABLE BARRIER 13 - MEDIAN GUARDRAIL 14 - BARRIER 15 - MEDIAN CONCRETE BARRIER 16 - MEDIAN OTHER BARRIER 17 - TRAFFIC SIGN POST 18 - OVERHEAD SIGN POST 19 - LIGHT / LUMINARIES SUPPORT 20 - UTILITY POLE 21 - OTHER POST, POLE OR SUPPORT 22 - CULVERT 23 - CURB 24 - DITCH 25 - EMBANKMENT 26 - FENCE 27 - MAILBOX 28 - TREE 29 - OTHER FIXED OBJECT 30 - FIRE HYDRANT 31 - WALL 32 - BUILDING 33 - TUNNEL 34 - FLASHER 35 - NO CONTROL			
1 - FIRST HARMFUL EVENT		1 - MOST HARMFUL EVENT			

LOCAL REPORT NUMBER 2 2 0 6 3 2 9 6	
DAMAGE	
DAMAGE SCALE 3 - NONE 2 - MINOR DAMAGE 1 - UNKNOWN 3 - FUNCTIONAL DAMAGE 2 - 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 1 - REFER TO UNIT DIAGRAM 13 - TOP	
14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN	
TRAFFIC	
TRAFFIC WAY FLOW 1 - ONE WAY 2 - TWO WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL
# OF THROUGH LANES ON ROAD 2	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
FROM 2 TO 1	
UNIT SPEED 3 5	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED 3 5	



UNIT

OWNER

UNIT # 012 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
STONE TRANSPORT

OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
3495 HACK RD SAGINAW, MI 48601COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
STONE TRANSPORT, 3495 HACK RD SAGINAW, MI 48601LOCAL REPORT NUMBER
2 2 0 6 3 2 9 6LP STATE M LICENSE PLATE # RB60453 VEHICLE IDENTIFICATION # 3A K J G E D R 4 J S K D 1 4 5 1 VEHICLE YEAR 2018 VEHICLE MAKE FREIGHTLINERINSURANCE VERIFIED INSURANCE COMPANY ZURICH INSURANCE POLICY # TRK00801079 COLOR RED VEHICLE MODEL CASCADIATYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE US DOT # 3 0 0 9 6 0 TOWED BY: COMPANY NAMEINTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS 0 1 VEHICLE WEIGHT GVWR/GCWR 3

1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.

HAZARDOUS MATERIAL MATERIAL RELEASED CLASS # PLACARD ID # PLACARD

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 BICYCLE 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN
6 - VAN (9-15 SEATS) 11 - ALL-TERRAIN VEHICLE (ATV / UTV) 17 - MOTORHOME ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP

UNIT TYPE

1 # OF TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?
2 1-YES 2-NO 9-OTHER/UNKNOWN AUTONOMOUS MODE LEVEL0 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 PATROL1 4 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
CARGO BODY TYPE 7 - GRAIN/CHIPS/GRAVEL 10 - FLAT BED 14 - GARBAGE/REFUSE 11 - DUMP 99 - OTHER/UNKNOWN1 - 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 BLOWOUT1 - INTERSECTION - MARKED CROSSWALK 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER
2 - INTERSECTION - UNMARKED CROSSWALK 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS AT INCIDENT SCENE
NON-MOTORIST LOCATION AT IMPACT CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS 99 - OTHER/UNKNOWN0 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 3 - CHANGING LANES 9 - LEAVING TRAFFIC LANE 10 - PARKED 15 - WALKING, RUNNING, JOGGING, PLAYING 20 - OTHER NON-MOTORIST
ACTION 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
9 - OTHER/UNKNOWN0 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 / ACCDA 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 12 - IMPROPER BACKING

SEQUENCE OF EVENTS

NON-COLLISION		COLLISION WITH FIXED OBJECT - STRUCK	
1 2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL
2	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	16 - RAILWAY VEHICLE
3	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	17 - ANIMAL - FARM EQUIPMENT
4	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	18 - ANIMAL - DEER
5	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	19 - ANIMAL - OTHER SHIFTING CARGO OR ANYTHING SET IN MOTION
6	6 - IMPROPER TURN	11 - PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT BY A MOTOR VEHICLE
7	7 - IMPACT ATTENUATOR / CRASH CUSHION	12 - PEDALCYCLE	21 - PARKED MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT
8	8 - BRIDGE OVERHEAD STRUCTURE	13 - GUARDRAIL END	37 - TRAFFIC SIGN POST
9	9 - BRIDGE PIER OR ABUTMENT	32 - PORTABLE BARRIER	43 - CURB
10	10 - BRIDGE PARAPET	33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST
11	11 - BRIDGE RAIL	34 - MEDIAN GUARDRAIL BARRIER	44 - DITCH
12	12 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER	45 - EMBANKMENT
13	13 - GUARDRAIL SUPPORT	36 - MEDIAN OTHER BARRIER	46 - FENCE
14	14 - GUARDRAIL SUPPORT	37 - GUARDRAIL SUPPORT	47 - MAILBOX
15	15 - GUARDRAIL SUPPORT	38 - GUARDRAIL SUPPORT	48 - TREE
16	16 - GUARDRAIL SUPPORT	39 - GUARDRAIL SUPPORT	49 - FIRE HYDRANT
17	17 - GUARDRAIL SUPPORT	40 - GUARDRAIL SUPPORT	50 - WORK ZONE MAINTENANCE EQUIPMENT
18	18 - GUARDRAIL SUPPORT	41 - GUARDRAIL SUPPORT	51 - WALL
19	19 - GUARDRAIL SUPPORT	42 - GUARDRAIL SUPPORT	52 - BUILDING
20	20 - GUARDRAIL SUPPORT	43 - GUARDRAIL SUPPORT	53 - TUNNEL
21	21 - GUARDRAIL SUPPORT	44 - GUARDRAIL SUPPORT	54 - OTHER FIXED OBJECT
22	22 - GUARDRAIL SUPPORT	45 - GUARDRAIL SUPPORT	99 - OTHER / UNKNOWN

1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER
2 2 0 6 3 2 9 6

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

DAMAGED AREA(S)
INDICATE ALL THAT APPLY

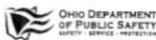
1 - NO DAMAGE [0] 2 - UNDERCARRIAGE [14]
3 - TOP [13] 4 - ALL AREAS [15]
5 - UNIT NOT AT SCENE [16]

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

TRAFFIC
TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY
OF THROUGH LANES ON ROAD 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING

RAIL GRADE CROSSING
1 - NORTH 5 - NORTHEAST
2 - SOUTH 6 - NORTHWEST
3 - EAST 7 - SOUTHEAST
4 - WEST 8 - SOUTHWEST
9 - OTHER / UNKNOWN

UNIT / NON-MOTORIST DIRECTION
FROM 2 TO 3
UNIT SPEED 1 - STATED/ESTIMATED SPEED
2 - CALCULATED/EDR
3 - UNDETERMINED
POSTED SPEED
3 - 5



MOTORIST / Non-MOTORIST

MOTORIST / NON-MOTORIST	LOCAL REPORT NUMBER											
	2 2 0 6 3 2 9 6					DATE OF BIRTH		AGE	GENDER			
UNIT #	NAME: LAST, FIRST, MIDDLE 0 1 BOYLE, PATRICK ELIOT											
ADDRESS: STREET, CITY, STATE, ZIP 5688 FARMERSVILLE RD FARMERSVILLE, OHIO 45325										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 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
DL STATE O H	OPERATOR LICENSE NUMBER			OFFENSE CHARGED 331.34C		LOCAL CODE <input checked="" type="checkbox"/>	OFFENSE DESCRIPTION FULL TIME ATTENTION			CITATION NUMBER 254858		
DL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY 5	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST STATUS 1 TYPE 1 VALUE .		DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4			
UNIT # 0 2	NAME: LAST, FIRST, MIDDLE SCHLOSSER, RANDY JAY										DATE OF BIRTH 0 8 1 3 1 9 6 3	
ADDRESS: STREET, CITY, STATE, ZIP 134 TRACY LANE SOUTHGATE, KY 41071										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 0 1	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
DL STATE K Y	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION			CITATION NUMBER		
DL CLASS 1	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 1 TYPE 1 VALUE .		DRUG TEST(S) STATUS 1 TYPE 1 RESULT SELECT UP TO 4			
UNIT #	NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH 0	
ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	<input type="checkbox"/> DOT-COMPLIANT <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	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		DL CLASS	DL 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 - MIC MOPED ONLY	5 - EXCEPT CLASS A BUS	5 - TEST GIVEN, RESULTS UNKNOWN							
INJURED TAKEN BY		6 - SECOND - RIGHT SIDE	6 - DEPLOYMENT UNKNOWN	6 - EXCEPT CLASS A & CLASS B BUS								
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	7 - THIRD - MIDDLE	7 - THIRD - RIGHT SIDE	7 - EXCEPT TRACTOR-TRAILER								
2 - EMS	8 - THIRD - MIDDLE	9 - THIRD - RIGHT SIDE	10 - SLEEPER SECTION OF TRUCK CAB	8 - INTERMEDIATE LICENSE RESTRICTIONS	1 - NONE							
3 - POLICE	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	12 - PASSENGER IN UNENCLOSED CARGO AREA	13 - TRAILING UNIT	9 - LEARNER'S PERMIT RESTRICTIONS	2 - BLOOD							
9 - OTHER / UNKNOWN	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	15 - NON-MOTORIST	16 - NOT EJECTED	10 - LIMITED TO DAYLIGHT ONLY	3 - URINE							
SAFETY EQUIPMENT		17 - BOOSTER SEAT	18 - OTHER / UNKNOWN	11 - LIMITED TO EMPLOYMENT	4 - BREATH							
1 - NONE USED	19 - HELMET USED	20 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	21 - REFLECTIVE CLOTHING	12 - LIMITED - OTHER	5 - OTHER							
2 - SHOULDER BELT ONLY USED	22 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	23 - CHILD RESTRAINT SYSTEM - FORWARD FACING	24 - CHILD RESTRAINT SYSTEM - REAR FACING	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	6 - DRUG TEST TYPE							
3 - LAP BELT ONLY USED	25 - HELMET USED	26 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	27 - CHILD RESTRAINT SYSTEM - FORWARD FACING	14 - MILITARY VEHICLES ONLY	1 - NONE							
4 - SHOULDER & LAP BELT USED	28 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	29 - CHILD RESTRAINT SYSTEM - FORWARD FACING	30 - CHILD RESTRAINT SYSTEM - REAR FACING	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	2 - BLOOD							
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	31 - HELMET USED	32 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	33 - CHILD RESTRAINT SYSTEM - FORWARD FACING	16 - OUTSIDE MIRROR	3 - URINE							
6 - CHILD RESTRAINT SYSTEM - REAR FACING	34 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	35 - CHILD RESTRAINT SYSTEM - FORWARD FACING	36 - CHILD RESTRAINT SYSTEM - REAR FACING	17 - PROSTHETIC AID	4 - OTHER							
7 - BOOSTER SEAT	37 - HELMET USED	38 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	39 - CHILD RESTRAINT SYSTEM - FORWARD FACING	18 - OTHER	DRUG TEST RESULT(S)							
8 - HELMET USED	40 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	41 - CHILD RESTRAINT SYSTEM - FORWARD FACING	42 - CHILD RESTRAINT SYSTEM - REAR FACING	43 - APPARENTLY NORMAL	1 - AMPHETAMINES							
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	43 - HELMET USED	44 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	45 - CHILD RESTRAINT SYSTEM - FORWARD FACING	2 - PHYSICAL IMPAIRMENT	2 - BARBITURATES							
10 - REFLECTIVE CLOTHING	46 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	47 - CHILD RESTRAINT SYSTEM - FORWARD FACING	48 - CHILD RESTRAINT SYSTEM - REAR FACING	3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	3 - BENZODIAZEPINES							
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	49 - HELMET USED	50 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)	51 - CHILD RESTRAINT SYSTEM - FORWARD FACING	4 - ILLNESS	4 - CANNABINOID							
99 - OTHER / UNKNOWN	52 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	53 - CHILD RESTRAINT SYSTEM - FORWARD FACING	54 - CHILD RESTRAINT SYSTEM - REAR FACING	5 - COCAINE								
				55 - OTHER / UNKNOWN	6 - OPIATES / OPIOIDS							
					7 - OTHER							
					8 - NEGATIVE RESULTS							