

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 <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION				LOCAL REPORT NUMBER*		
		REPORTING AGENCY NAME* NCIC*				2 2 0 7 4 7 4 2		
		Fairfield Police Department 0 0 9 0 1				HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
						1 - SOLVED	0 2	98 - ANIMAL
						2 - UNSOLVED	0 1	99 - UNKNOWN
COUNTY* 0 9		LOCALITY* 1 - CITY 1 - VILLAGE 3 - TOWNSHIP	LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield				CRASH DATE / TIME* 10 13 2022 10 15	
LOCATION S R	ROUTE TYPE 4	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME			ROAD TYPE	LATITUDE DECIMAL DEGREES 3 9 3 3 2 7 6 9	
	ROUTE TYPE 4	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 5555			ROAD TYPE	LONGITUDE DECIMAL DEGREES -8 4 5 2 2 1 9 0	
REFERENCE POINT 3 - INTERSECTION 2 - MILE POST 3 - HOUSE #		DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	ROUTE TYPE IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS	ROAD TYPE HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE	INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA		
DISTANCE FROM REFERENCE		DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS				NUMBER OF APPROACHES ROADWAY <input type="checkbox"/> ROADWAY DIVIDED		
LOCATION OF FIRST HARMFUL EVENT 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	2	MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION 2 - BETWEEN 3 - TWO MOTOR VEHICLES IN 4 - TRANSPORT 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - REAR-END 10 - HEAD-ON 11 - 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 2 - ADVANCE WARNING SIGN 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	1	1 - BEFORE THE 1ST WORK ZONE 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA	CONTOUR 1 2 - STRAIGHT LEVEL 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/UNKNOWN	CONDITIONS 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN	SURFACE 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN
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 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				
<p>NARRATIVE</p> <p>On 10-13-22 at 10:15 a.m., Unit 1 and Unit 2 were stopped in traffic south on SR4 (Dixie Hwy) in the right through lane. Unit 1 started moving forward before Unit 2 and drove into the rear of Unit 2.</p> <p style="text-align: right;">SEE OH-2</p>								
<p style="text-align: right;">Indicate the north direction with an "N" on the compass diagram.</p>								
CRASH REPORTED DATE / TIME 10 13 2022 10 16		DISPATCH DATE / TIME 10 13 2022 10 19		ARRIVAL DATE / TIME 10 13 2022 10 25		SCENE CLEARED DATE / TIME 10 13 2022 11 04		REPORT TAKEN BY
TOTAL TIME ROADWAY CLOSED 1 0		OTHER INVESTIGATION TIME 3 0		TOTAL MINUTES 7 5		OFFICER'S NAME* P.O. J. DRAKE		<input checked="" type="checkbox"/> POLICE AGENCY
						CHECKED BY OFFICER'S NAME* P.O. C. Monroe		<input type="checkbox"/> MOTORIST
						OFFICER'S BADGE NUMBER* 8 8		<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)
						CHECKED BY OFFICER'S BADGE NUMBER* 1 3 6		

OWNER

UNIT # 0_1 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) MARTIN, ANGELA M OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
47 FAWN DR FAIRFIELD, OHIO 45014

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

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LP STATE <u>O_H</u>	LICENSE PLATE # <u>HJJ3673</u>	VEHICLE IDENTIFICATION # <u>1C4NJPB6HD207958</u>	VEHICLE YEAR <u>2017</u>	VEHICLE MAKE <u>JEEP</u>
<input checked="" type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY <u>ALL STATE</u>	INSURANCE POLICY # <u>992296544</u>	COLOR <u>RED</u>	VEHICLE MODEL <u>PATRIOT</u>
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME	
<input type="checkbox"/> INTERLOCK DEVICE EQUIPPED <input type="checkbox"/> HIT/SKIP UNIT		#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 <input type="checkbox"/> PLACARD	

<u>0_3</u> UNIT TYPE	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
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0 # OF TRAILING UNITS

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	9 - UNKNOWN
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<u>0_1</u> SPECIAL FUNCTION	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL	21 - MAIL CARRIER 99 - OTHER / UNKNOWN
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<u>0_1</u> 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
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<u>1</u> 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
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<u>1</u> NON-MOTORIST LOCATION AT IMPACT	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN
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<u>3</u> 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 99 - OTHER / UNKNOWN
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<u>1_3</u> 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
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SEQUENCE OF EVENTS

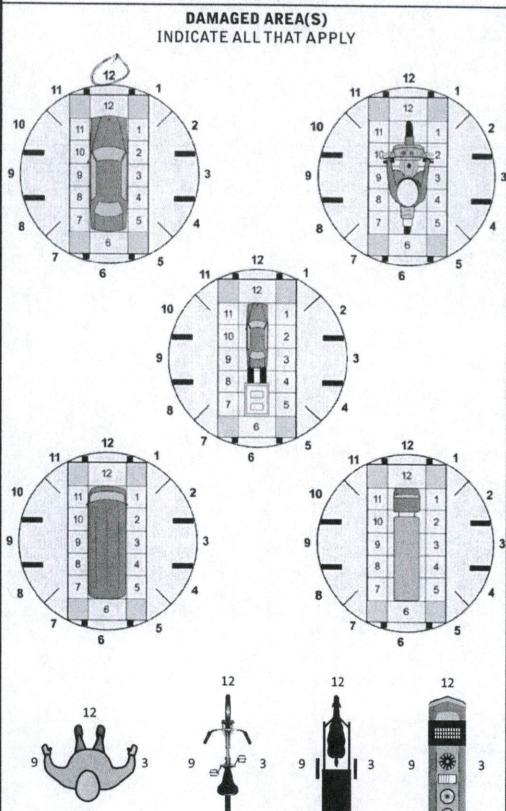
<u>1_2_0</u>	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 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 24 - OTHER MOBILE OBJECT
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<u>4</u>	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 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
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1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER
2 2 0 7 4 7 4 2

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



- 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 15 - VEHICLE NOT AT SCENE
DIAGRAM 99 - UNKNOWN
13 - TOP

TRAFFICWAY FLOW <u>2</u>	TRAFFIC CONTROL 1 - ONE-WAY 2 - TWO-WAY <u>6</u>
# OF THROUGH LANES ON ROAD <u>4</u>	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING <u>1</u>

UNIT / NON-MOTORIST DIRECTION FROM <u>1</u> TO <u>2</u>	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
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UNIT SPEED <u>1_0</u>	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED <u>1</u>
POSTED SPEED <u>3_5</u>	

UNIT # **012** OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
GENERAL SERVICES ADMINISTRATION

OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
3200 VINE ST CINCINNATI, OHIO 45220

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

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

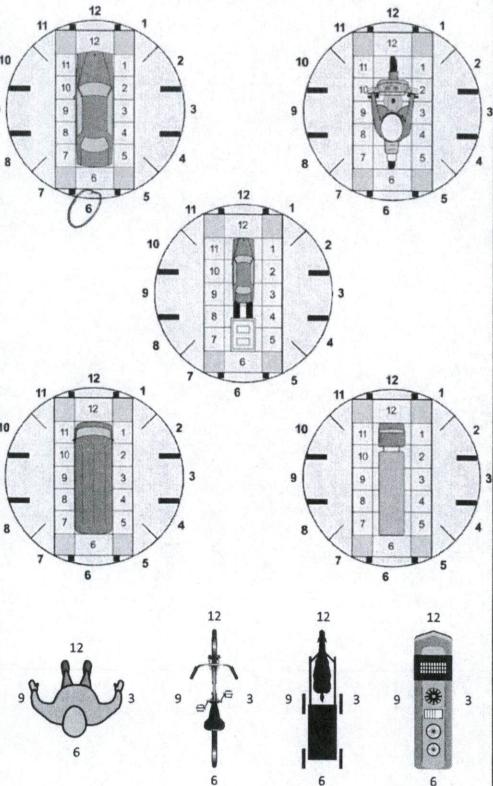
LOCAL REPORT NUMBER
2 2 0 7 4 7 4 2

DAMAGE

DAMAGE SCALE

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

DAMAGED AREA(S)
INDICATE ALL THAT APPLY



LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
O H	G130185V	KMHC1651C9KU159475	2019	HYUNDAI
<input type="checkbox"/> INSURANCE VERIFIED	INSURANCE COMPANY SELF INSURED	INSURANCE POLICY #	COLOR SILVER	VEHICLE MODEL ICONIC
TYPE OF USE <input type="checkbox"/> COMMERCIAL <input checked="" 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	VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	
UNIT TYPE 011 1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)		11 - ALL-TERRAIN VEHICLE (ATV/UTV)	HAZARDOUS MATERIAL <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD	
# OF TRAILING UNITS 0		CLASS # PLACARD ID #		
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2 1 - YES 2 - NO 9 - OTHER/UNKNOWN		AUTONOMOUS MODE LEVEL 0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION 3 - HIGH AUTOMATION 4 - FULL AUTOMATION	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	

SPECIAL FUNCTION 011 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
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CARGO BODY TYPE 011 1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS		3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING 5 - CARGO VAN/ENCLOSED BOX 6 - GRAIN/CHIPS/GRAVEL	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
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VEHICLE DEFECTS 011 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
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NON-MOTORIST LOCATION AT IMPACT 011 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
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ACTION 4 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 99 - OTHER/UNKNOWN
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CONTRIBUTING CIRCUMSTANCES 011 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
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SEQUENCE OF EVENTS		NON-COLLISION			
120	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION 3 - IMMERSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 12 - DOWNSHILL 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 MOBILE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK		COLLISION WITH FIXED OBJECT - STRUCK			
456	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 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 **1** MOST HARMFUL EVENT

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
2 6
TRAFFIC CONTROL
1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - WAIT SIGN 6 - NO CONTROL

OF THROUGH LANES ON ROAD
4 1
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 **1** TO **2**

UNIT SPEED
0 1
DETECTED SPEED
1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED
POSTED SPEED
3 5
PAGE 3 OF 5



MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER																	
2 2 0 7 4 7 4 2																	
DATE OF BIRTH AGE GENDER																	
1 0 1 8 1 9 9 0 3 1 F																	
CONTACT PHONE - INCLUDE AREA CODE																	
MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE															
	0 1	MARTIN, CHELSEA MARIE															
	ADDRESS: STREET, CITY, STATE, ZIP																
	610 WOODFORD ST HAMILTON, OHIO 45013																
	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			
	OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	<input checked="" type="checkbox"/>			OFFENSE DESCRIPTION			CITATION NUMBER			
	O H				331.13A						IMPROPER STARTING			254873			
	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST			DRUG TEST(S)					
	2	S	0 3		1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		1	1	1	1	1	1				
UNIT #	NAME: LAST, FIRST, MIDDLE																
0 2	PEDIGO, JENNIFER MARIE																
ADDRESS: STREET, CITY, STATE, ZIP										DATE OF BIRTH AGE GENDER							
5474 WALKERS CT LIBERTY TWP, OHIO 45011										0 9 1 6 1 9 7 6 4 6 F							
CONTACT PHONE - INCLUDE AREA CODE																	
MOTORIST / NON-MOTORIST	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			
	OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED		LOCAL CODE	<input type="checkbox"/>			OFFENSE DESCRIPTION			CITATION NUMBER			
	O H																
	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST			DRUG TEST(S)					
	4		0 3		1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		1	1	1	1	1	1				
	UNIT #	NAME: LAST, FIRST, MIDDLE															
	ADDRESS: STREET, CITY, STATE, ZIP										DATE OF BIRTH AGE GENDER						
	CONTACT PHONE - INCLUDE AREA CODE										0 0 0 0 0 0 0 0 0 0 0 0						
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MOTORIST / NON-MOTORIST	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"/>									
	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		CONDITION	ALCOHOL TEST			DRUG TEST(S)					
					1	<input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		1	1	1	1	1	1				
	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 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE	3 - TEST GIVEN, RESULTS KNOWN										
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 UNKNOWN	4 - TEST GIVEN, RESULTS UNKNOWN											
5 - NO APPARENT INJURY	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M/C MOPED ONLY	5 - EXCEPT CLASS A BUS	5 - TALKING ON HANDS-FREE COMMUNICATION DEVICE	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE											
INJURED TAKEN BY	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - TALKING ON HAND-HELD COMMUNICATION DEVICE	6 - OTHER											
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	7 - NOT EJECTED	7 - INTERMEDIATE LICENSE RESTRICTIONS	7 - EXCEPT TRACTOR-TRAILER	7 - NOT DISTRACTED	1 - NONE											
2 - EMS	8 - THIRD - MIDDLE	2 - PARTIALLY EJECTED	8 - LEARNER'S PERMIT RESTRICTIONS	8 - INTERMEDIATE LICENSE RESTRICTIONS	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2 - TEST REFUSED											
3 - POLICE	9 - THIRD - RIGHT SIDE	3 - TOTALLY EJECTED	9 - PASSENGER RESTRICTIONS	9 - LEARNER'S PERMIT RESTRICTIONS	3 - CORRECTIVE LENSES	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE											
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APPLICABLE	N - TANKER	10 - LIMITED TO DAYLIGHT ONLY	4 - FARM WAIVER	4 - TEST GIVEN, RESULTS KNOWN											
SAFETY EQUIPMENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOT TRAPPED	Q - MOTOR SCOOTER	11 - LIMITED TO EMPLOYMENT	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE											
1 - NONE USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	2 - EXTRICATED BY MECHANICAL MEANS	R - THREE-WHEEL MOTORCYCLE	12 - LIMITED - OTHER	6 - PASSENGER	6 - PASSENGER											
2 - SHOULDER BELT ONLY USED	13 - TRAILING UNIT	3 - FREED BY NON-MECHANICAL MEANS	S - SCHOOL BUS	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	7 - OTHER DISTRACTION INSIDE THE VEHICLE	7 - OTHER DISTRACTION INSIDE THE VEHICLE											
3 - LAP BELT ONLY USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	F - FEMALE	T - DOUBLE & TRIPLE TRAILERS	14 - MILITARY VEHICLES ONLY	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE											
4 - SHOULDER & LAP BELT USED	15 - NON-MOTORIST	M - MALE	X - TANKER / HAZMAT	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	9 - OTHER / UNKNOWN	9 - OTHER / UNKNOWN											
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	99 - OTHER / UNKNOWN	U - OTHER / UNKNOWN	GENDER	16 - OUTSIDE MIRROR	CONDITION	1 - APPARENTLY NORMAL											
6 - CHILD RESTRAINT SYSTEM - REAR FACING			F - FEMALE	17 - PROSTHETIC AID	2 - PHYSICAL IMPAIRMENT	2 - PHYSICAL IMPAIRMENT											
7 - BOOSTER SEAT			M - MALE	18 - OTHER	3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)											
8 - HELMET USED			U - OTHER / UNKNOWN		4 - ILLNESS	4 - ILLNESS											
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)					5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.											
10 - REFLECTIVE CLOTHING					6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL											
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY					7 - OTHER	7 - OTHER											
99 - OTHER / UNKNOWN					8 - NEGATIVE RESULTS	8 - NEGATIVE RESULTS											

LOCAL REPORT NUMBER 22-074742

REPORTING AGENCY FAIRFIELD P.D. 00901

DATE OF ACCIDENT
M 10 10 13, 1922

IN COUNTY OF

BUTLER

ACCIDENT LOCATION

SRY (PIXIE HWY) / 5555 DIXIE HWY

