

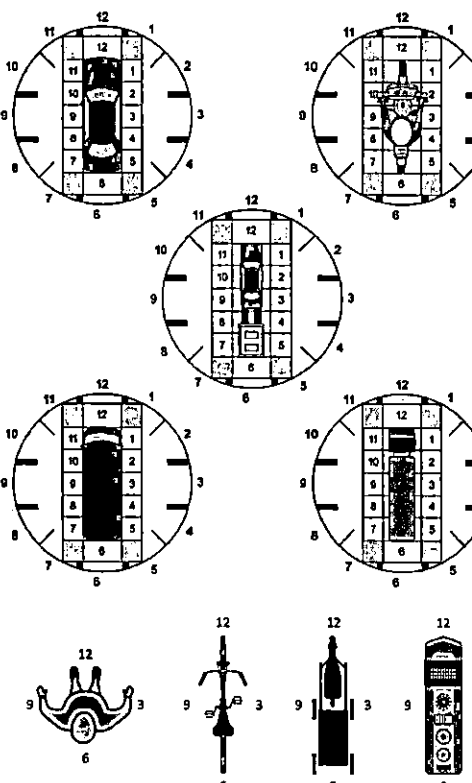


TRAFFIC CRASH REPORT

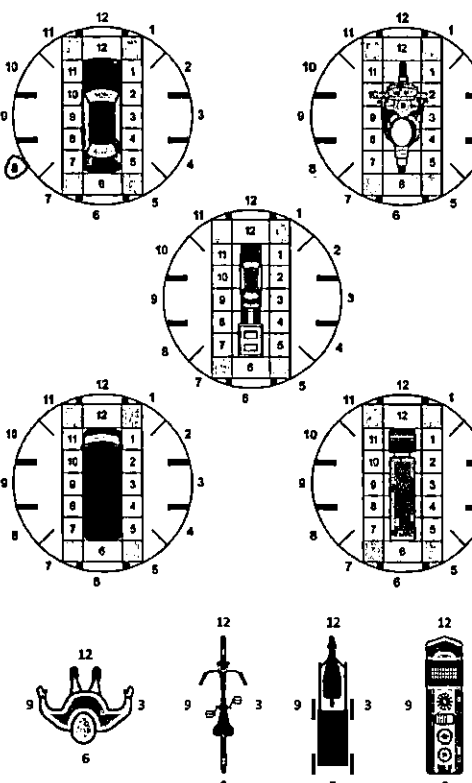
*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

☒ PHOTOS TAKEN ☐ SECONDARY CRASH		☐ OH-2 ☐ OH-3 ☐ OH-1P ☒ PRIVATE PROPERTY	LOCAL INFORMATION REPORTING AGENCY NAME* Fairfield Police Department		NCIC* 0,0,9,0,1	LOCAL REPORT NUMBER* 2,2,0,8,3,2,6,4	
COUNTY* 09	LOCALITY* 1-CITY 2-VILLAGE 3-TOWNSHIP	LOCATION: CITY, VILLAGE, TOWNSHIP* City of Fairfield				CRASH DATE / TIME* 2,2,0,8,3,2,6,4	
ROUTE TYPE 1-NORTH 2-SOUTH 3-EAST 4-WEST	ROUTE NUMBER 1 2 3	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME Danube		ROAD TYPE D, R	LATITUDE DECIMAL DEGREES 39.328601	
ROUTE TYPE 1-NORTH 2-SOUTH 3-EAST 4-WEST	ROUTE NUMBER 1 2 3	PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 119		ROAD TYPE D, R	LONGITUDE DECIMAL DEGREES -84.520591	
REFERENCE POINT 1-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 HW-HIGHWAY LA-LANE MP-MILEPOST OV-OVAL PK-PARKWAY PI-PIKE PL-PLACE RD-ROAD SQ-SQUARE ST-STREET TE-TERRACE TR-TRAIL VA-WAY		INTERSECTION RELATED ☐ WITHIN INTERSECTION OR ON APPROACH ☐ WITHIN INTERCHANGE AREA NUMBER OF APPROACHES		
DISTANCE FROM REFERENCE 1-MILES 2-Feet 3-YARDS		DISTANCE UNIT OF MEASURE 1-MILES 2-Feet 3-YARDS		ROADWAY ☐ ROADWAY DIVIDED			
LOCATION OF FIRST HARMFUL EVENT 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		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	
☐ WORK ZONE RELATED ☐ WORKERS PRESENT ☐ LAW ENFORCEMENT PRESENT ☐ 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 1-STRAIGHT LEVEL 2-STRAIGHT GRADE 3-CURVE LEVEL 4-CURVE GRADE 9-OTHER/UNKNOWN	
LIGHT CONDITION 9 1-DAYLIGHT 2-DAWN/DUSK 3-DARK - LIGHTED ROADWAY 4-DARK - ROADWAY NOT LIGHTED 5-DARK - UNKNOWN ROADWAY LIGHTING 9-OTHER / UNKNOWN		WEATHER 9,9 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		CONDITIONS 9 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	
NARRATIVE On 11/14/2022 at approximately 9:17 A.M. the owner of unit #2 stated that sometime between 11/10/2022 at 12:00 P.M. and 11/14/2022 at 9:00 A.M. unit #1 struck his vehicle that was parked in front of his residence. Unit #1 left the scene without leaving their information.							
CRASH REPORTED DATE / TIME 1,1,1,4,2,0,2,2,0,9,1,7		DISPATCH DATE / TIME 1,1,1,4,2,0,2,2,0,9,3,4		ARRIVAL DATE / TIME 1,1,1,4,2,0,2,2,0,9,3,7		SCENE CLEARED DATE / TIME 1,1,1,4,2,0,2,2,0,9,4,7	
TOTAL TIME ROADWAY CLOSED 1,3		OTHER INVESTIGATION TIME 7,6		OFFICER'S NAME* Doug Day		CHECKED BY OFFICER'S NAME* 1,0,3	
TOTAL MINUTES 1,3		OFFICER'S BADGE NUMBER* 7,6		CHECKED BY OFFICER'S BADGE NUMBER* 1,0,3		REPORT TAKEN BY ☒ POLICE AGENCY ☐ MOTORIST ☐ SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO DOPS)	

OWNER	UNIT # 01	OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)		
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE	
LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR
INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR
TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME
INTERLOCK DEVICE EQUIPPED	HIT/SKIP UNIT	#OCCUPANTS 01	HAZARDOUS MATERIAL MATERIAL RELEASED PLACARD
VEHICLE MAKE			
VEHICLE MODEL			
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 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			
# OF TRAILING UNITS			
WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - 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			
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			
CARGO BODY TYPE 1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS 3 - VEHICLE TOWING ANOTHER MOTORVEHICLE 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			
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			
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			
ACTION 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRUCK 4 - STRUCK PRE-CRASH ACTIONS 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			
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 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 - MOTORVEHICLE IN TRANSPORT 21 - PARKED MOTORVEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTORVEHICLE 24 - OTHER MOVABLE OBJECT			
COLLISION WITH FIXED OBJECT: STRUCK 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 BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN			
FIRST HARMFUL EVENT MOST HARMFUL EVENT			

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

OWNER	UNIT # 012	OWNER NAME: LAST, FIRST, MIDDLE () SAME AS DRIVER Dale, Sammy	OWNER PHONE: INCLUDE AREA CODE () SAME AS DRIVER			
	OWNER ADDRESS: STREET, CITY, STATE, ZIP () SAME AS DRIVER 119 Danube Dr. Fairfield, Ohio 45014					
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE				
VEHICLE	LP STATE OH	LICENSE PLATE # JEJ2558	VEHICLE IDENTIFICATION # 2C14R1C11C1G17C1R118119114	VEHICLE YEAR 2012	VEHICLE MAKE Chrysler	
	☒ INSURANCE VERIFIED	INSURANCE COMPANY Geico	INSURANCE POLICY # 4479012066	COLOR blue	VEHICLE MODEL Town & C	
	☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE		US DOT #	TOWED BY: COMPANY NAME		
	☐ INTERLOCK DEVICE EQUIPPED	☐ HIT/SKIP UNIT	#OCCUPANTS 0	VEHICLE WEIGHT GVWR/GCWR 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	HAZARDOUS MATERIAL ☐ MATERIAL RELEASED ☐ PLACARD CLASS # PLACARD ID #	
	UNIT TYPE		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 - PICKUP 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		WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - 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			
	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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EVENT(S)	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			
	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			
	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		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 - MOTORVEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTORVEHICLE 24 - OTHER MOVABLE OBJECT			
	COLLISION WITH FIXED OBJECT: STRUCK		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 BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN			
	FIRST HARMFUL EVENT		MOST HARMFUL EVENT			

LOCAL REPORT NUMBER 2 2 0 8 3 2 6 4	
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 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
UNIT / NON-MOTORIST DIRECTION FROM 4 TO 3 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 3 - UNDETERMINED
POSTED SPEED	

Motorist / Non-Motorist

LOCAL REPORT NUMBER									
2 2 0 8 3 2 6 4									
UNIT # 0 1		NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE 0	GENDER U
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 9 9	
								☐ DOT-COMPLIANT MC HELMET	
OL STATE		OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE		OFFENSE DESCRIPTION	
OL CLASS		ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY 9		ALCOHOL / DRUG SUSPECTED ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	
								CONDITION 9	
								ALCOHOL TEST STATUS TYPE VALUE	
								DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4	
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	
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OL STATE		OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE		OFFENSE DESCRIPTION	
OL CLASS		ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY		ALCOHOL / DRUG SUSPECTED ☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	
								CONDITION	
								ALCOHOL TEST STATUS TYPE VALUE	
								DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4	
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	
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OL STATE		OPERATOR LICENSE NUMBER		OFFENSE CHARGED		LOCAL CODE		OFFENSE DESCRIPTION	
OL CLASS		ENDORSEMENT SELECT UP TO 2		RESTRICTION SELECT UP TO 3		DRIVER DISTRACTED BY		ALCOHOL / DRUG SUSPECTED ☐ ALCOHOL ☐ MARIJUANA ☐ 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)	
1-FATAL		1-FRONT-LEFT SIDE (MOTORCYCLE DRIVER)		1-NOT DEPLOYED		1-CLASS A		1-ALCOHOL INTERLOCK DEVICE	
2-SUSPECTED SERIOUS INJURY		2-FRONT-MIDDLE		2-DEPLOYED FRONT		2-CLASS B		2-CDL INTRASTATE ONLY	
3-SUSPECTED MINOR INJURY		3-FRONT-RIGHT SIDE		3-DEPLOYED SIDE		3-CLASS C		3-CORRECTIVE LENSES	
4-POSSIBLE INJURY		4-SECOND-LEFT SIDE (MOTORCYCLE PASSENGER)		4-DEPLOYED BOTH FRONT / SIDE		4-REGULAR CLASS (OHIO-D)		4-FARM WAIVER	
5-NO APPARENT INJURY		5-SECOND-MIDDLE		5-NOT APPLICABLE		5-MIC MOPED ONLY		5-EXCEPT CLASS A BUS	
		6-SECOND-RIGHT SIDE		9-DEPLOYMENT UNKNOWN		6-NO VALID OL		6-EXCEPT CLASS A & CLASS B BUS	
INJURED TAKEN BY		7-THIRD-LEFT SIDE (MOTORCYCLE SIDE CAR)		EJECTION		OL ENDORSEMENT		7-EXCEPT TRACTOR-TRAILER	
1-NOT TRANSPORTED / TREATED AT SCENE		8-THIRD-MIDDLE		1-NOT EJECTED		H-HAZMAT		8-INTERMEDIATE LICENSE RESTRICTIONS	
2-EMS		9-THIRD-RIGHT SIDE		2-PARTIALLY EJECTED		M-MOTORCYCLE		9-LEARNER'S PERMIT RESTRICTIONS	
3-POLICE		10-SLEEPER SECTION OF TRUCK CAB		3-TOTALLY EJECTED		P-PASSENGER		10-LIMITED TO DAYLIGHT ONLY	
9-OTHER / UNKNOWN		11-PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		4-NOT APPLICABLE		N-TANKER		11-LIMITED TO EMPLOYMENT	
SAFETY EQUIPMENT		12-PASSENGER IN UNENCLOSED CARGO AREA		TRAPPED		Q-MOTOR SCOOTER		12-LIMITED-OTHER	
1-NONE USED		13-TRAILING UNIT		1-NOT TRAPPED		R-THREE-WHEEL MOTORCYCLE		13-MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	
2-SHOULDER BELT ONLY USED		14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		2-EXTRICATED BY MECHANICAL MEANS		S-SCHOOL BUS		14-MILITARY VEHICLES ONLY	
3-LAP BELT ONLY USED		15-NON-MOTORIST		3-FREED BY NON-MECHANICAL MEANS		T-DOUBLE & TRIPLE TRAILERS		15-MOTOR VEHICLES WITHOUT AIR BRAKES	
4-SHOULDER & LAP BELT USED		99-OTHER / UNKNOWN				X-TANKER / HAZMAT		16-OUTSIDE MIRROR	
5-CHILD RESTRAINT SYSTEM FORWARD FACING						G-GENDER		17-PROSTHETIC AID	
6-CHILD RESTRAINT SYSTEM REAR FACING						F-FEMALE		18-OTHER	
7-BOOSTER SEAT						M-MALE			
8-HELMET USED						U-OTHER / UNKNOWN			
9-PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)									
10-REFLECTIVE CLOTHING									
11-LIGHTING-PEDESTRIAN / BICYCLE ONLY									
99-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	
								ALCOHOL TEST TYPE	
								1-NONE	
								2-BLOOD	
								3-URINE	
								4-BREATH	
								5-OTHER	
								DRUG TEST TYPE	
								1-NONE	
								2-BLOOD	
								3-URINE	
								4-OTHER	
								DRUG TEST RESULT(S)	
								1-AMPHETAMINES	
								2-BARBITURATES	
								3-BENZODIAZEPINES	
								4-CANNABINOIDS	
								5-COCAINE	
								6-OPIATES / OPIOIDS	
								7-OTHER	
								8-NEGATIVE RESULTS	