

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER \*  
2024000000084

|   |  |  |  |  |  |   |  |   |  |  |  |   |  |
|---|--|--|--|--|--|---|--|---|--|--|--|---|--|
| <input checked="" type="checkbox"/> PHOTOS TAKEN<br><input type="checkbox"/> SECONDARY CRASH  |  | <input type="checkbox"/> OH -2<br><input type="checkbox"/> OH -1P<br><input type="checkbox"/> PRIVATE PROPERTY   |  | LOCAL INFORMATION<br>REPORTING AGENCY NAME *<br>MADISON COUNTY SHERIFF   |  | NCIC *<br>04900   |  | HIT/SKIP<br>1 - SOLVED<br>2 - UNSOLVED  |  | NUMBER OF UNITS<br>1   |  | UNIT IN ERROR<br>98 - ANIMAL<br>99 - UNKNOWN  |  |
| COUNTY*<br>49   |  | LOCALITY*<br>1 - CITY<br>2 - VILLAGE<br>3 - TOWNSHIP<br>1  |  | LOCATION: CITY, VILLAGE, TOWNSHIP*<br>OAK RUN (TOWNSHIP OF)  |  | CRASH DATE / TIME*<br>01/18/2024 21:41  |  | CRASH SEVERITY<br>1 - FATAL<br>2 - SERIOUS INJURY SUSPECTED<br>3 - MINOR INJURY SUSPECTED<br>4 - INJURY POSSIBLE<br>5 - PROPERTY DAMAGE ONLY                                      |  |  |  |   |  |
| ROUTE TYPE<br>SR  |  | ROUTE NUMBER<br>56   |  | PREFIX<br>1 - NORTH<br>2 - SOUTH<br>3 - EAST<br>4 - WEST   |  | LOCATION ROAD NAME<br>REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)<br>BIG PLAIN-CIRCLEVILLE SE   |  | ROAD TYPE<br>RD   |  | LATITUDE DECIMAL DEGREES<br>39.855190  |  | LONGITUDE DECIMAL DEGREES<br>-83.396727   |  |
| REFERENCE POINT<br>1 - INTERSECTION<br>2 - MILE POST<br>3 - HOUSE #   |  | DIRECTION FROM REFERENCE<br>1 - NORTH<br>2 - SOUTH<br>3 - EAST<br>4 - WEST   |  | ROUTE TYPE<br>IR - INTERSTATE ROUTE (TP)<br>US - FEDERAL US ROUTE<br>SR - STATE ROUTE<br>CR - NUMBERED COUNTY ROUTE<br>TR - NUMBERED TOWNSHIP ROUTE              |  | ROAD TYPE<br>AL - ALLEY<br>AV - AVENUE<br>BL - BOULEVARD<br>CR - CIRCLE<br>CT - COURT<br>DR - DRIVE<br>HE - HEIGHTS                               |  | HW - HIGHWAY<br>LA - LANE<br>MP - MILEPOST<br>OV - OVAL<br>PK - PARKWAY<br>PI - PIKE<br>PL - PLACE  |  | RD - ROAD<br>SQ - SQUARE<br>ST - STREET<br>TE - TERRACE<br>TL - TRAIL<br>WA - WAY  |  | INTERSECTION RELATED<br><input checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH<br><input type="checkbox"/> WITHIN INTERCHANGE AREA              |  |
| DISTANCE FROM REFERENCE<br>500.00   |  | DISTANCE UNIT OF MEASURE<br>1 - MILES<br>2 - FEET<br>3 - YARDS   |  | NUMBER OF APPROACHES<br>3  |  | ROADWAY<br><input type="checkbox"/> ROADWAY DIVIDED   |  | LOCATION OF FIRST HARMFUL EVENT<br>1 - ON ROADWAY<br>2 - ON SHOULDER<br>3 - IN MEDIAN<br>4 - ON ROADSIDE<br>5 - ON GORE<br>6 - OUTSIDE TRAFFIC WAY<br>7 - ON RAMP<br>8 - OFF RAMP |  | MANNER OF CRASH COLLISION/IMPACT<br>1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT<br>2 - REAR-END<br>3 - HEAD-ON |  | 4 - REAR-TO-REAR<br>5 - BACKING<br>6 - ANGLE<br>7 - SIDESWIPE, SAME DIRECTION<br>8 - SIDESWIPE, OPPOSITE DIRECTION<br>9 - OTHER / UNKNOWN                       |  |
| DIRECTION OF TRAVEL<br>1 - NORTH<br>2 - SOUTH<br>3 - EAST<br>4 - WEST   |  | MEDIAN TYPE<br>1 - DIVIDED FLUSH MEDIAN (<4 FEET)<br>2 - DIVIDED FLUSH MEDIAN (≥4 FEET)<br>3 - DIVIDED, DEPRESSED MEDIAN<br>4 - DIVIDED, RAISED MEDIAN (ANY TYPE)<br>9 - OTHER / UNKNOWN |  | WORK ZONE RELATED<br><input type="checkbox"/> WORKERS PRESENT<br><input type="checkbox"/> LAW ENFORCEMENT PRESENT<br><input type="checkbox"/> ACTIVE SCHOOL ZONE |  | WORK ZONE TYPE<br>1 - LANE CLOSURE<br>2 - LANE SHIFT/ CROSSOVER<br>3 - WORK ON SHOULDER OR MEDIAN<br>4 - INTERMITTENT OR MOVING WORK<br>5 - OTHER |  | LOCATION OF CRASH IN WORK ZONE<br>1 - BEFORE THE 1ST WORK ZONE WARNING SIGN<br>2 - ADVANCE WARNING AREA<br>3 - TRANSITION AREA<br>4 - ACTIVITY AREA<br>5 - TERMINATION AREA       |  | CONTOUR<br>1 - STRAIGHT LEVEL<br>2 - STRAIGHT GRADE<br>3 - CURVE LEVEL<br>4 - CURVE GRADE<br>9 - OTHER /UNKNOWN              |  | CONDITIONS<br>1 - DRY<br>2 - WET<br>3 - SNOW<br>4 - ICE<br>5 - SAND, MUD, DIRT, OIL, GRAVEL<br>6 - WATER (STANDING, MOVING)<br>7 - SLUSH<br>9 - OTHER / UNKNOWN |  |
| SURFACE<br>1 - CONCRETE<br>2 - BLACKTOP, BITUMINOUS, ASPHALT<br>3 - BRICK/BLOCK<br>4 - SLAG, GRAVEL, STONE<br>5 - DIRT<br>9 - OTHER / UNKNOWN |  | LIGHT CONDITION<br>1 - DAYLIGHT<br>2 - DAWN/DUSK<br>3 - DARK - LIGHTED ROADWAY<br>4 - DARK - ROADWAY NOT LIGHTED<br>5 - DARK - UNKNOWN ROADWAY LIGHTING<br>9 - OTHER / UNKNOWN           |  | WEATHER<br>1 - CLEAR<br>2 - CLOUDY<br>3 - FOG, SMOG, SMOKE<br>4 - RAIN<br>5 - SLEET, HAIL  |  | 6 - SNOW<br>7 - SEVERE CROSSWINDS<br>8 - BLOWING SAND, SOIL, DIRT, SNOW<br>9 - FREEZING RAIN OR FREEZING DRIZZLE<br>99 - OTHER / UNKNOWN          |  | NARRATIVE<br>Unit 1 was traveling south bound on State Route 56 while approaching a curve and struck the guard rail.  |  |  |  |   |  |
| CRASH REPORTED DATE / TIME<br>01/18/2024 21:41  |  | DISPATCH DATE / TIME<br>01/18/2024 21:43   |  | ARRIVAL DATE / TIME<br>01/18/2024 21:52  |  | SCENE CLEARED DATE / TIME<br>01/18/2024 22:50   |  | REPORT TAKEN BY<br><input checked="" type="checkbox"/> POLICE AGENCY<br><input type="checkbox"/> MOTORIST   |  |  |  |   |  |
| TOTAL TIME ROADWAY CLOSED<br>30   |  | OTHER INVESTIGATION TIME<br>0  |  | TOTAL MINUTES<br>67  |  | OFFICER'S NAME*<br>BALDWIN, CORY A  |  | CHECKED BY OFFICER'S NAME*<br>WINEBRENNER, TIMOTHY D  |  |  |  |   |  |
|   |  |  |  | OFFICER'S BADGE NUMBER*<br>000045  |  | CHECKED BY OFFICER'S BADGE NUMBER*<br>000008  |  | <input type="checkbox"/> SUPPLEMENT<br>(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)  |  |  |  |   |  |

|  |   |   |
|--|---|---|
| <b>UNIT #</b><br>1   | <b>OWNER NAME:</b> LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER )<br>JAMES, CHRISTOPHER, LEE | <b>OWNER PHONE:</b> INCLUDE AREA CODE ( <input type="checkbox"/> SAME AS DRIVER ) |
| <b>OWNER ADDRESS:</b> STREET, CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER )<br>152 VILLA DR, CIRCLEVILLE, OH, 43113 |   |   |
| <b>COMMERCIAL CARRIER:</b> NAME, ADDRESS, CITY, STATE, ZIP   |   | <b>COMMERCIAL CARRIER PHONE:</b> INCLUDE AREA CODE                                |

|  |   |   |  |                               |
|--|---|---|--|-------------------------------|
| <b>LP STATE</b><br>OH  | <b>LICENSE PLATE #</b><br>JTX5831             | <b>VEHICLE IDENTIFICATION #</b><br>1FTFW1ET8EFB59189  | <b>VEHICLE YEAR</b><br>2014  | <b>VEHICLE MAKE</b><br>FORD   |
| <input checked="" type="checkbox"/> <b>INSURANCE VERIFIED</b>  | <b>INSURANCE COMPANY</b><br>SONNENBERG MUTUAL | <b>INSURANCE POLICY #</b><br>SSV34025636570   | <b>COLOR</b><br>SIL  | <b>VEHICLE MODEL</b><br>F-150 |
| <b>TYPE OF USE</b><br><input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE |   | <b>US DOT #</b>   | <b>TOWED BY:</b> COMPANY NAME<br>SHARK TOOTH TOWING & RECOV  |                               |
| <input type="checkbox"/> <b>INTERLOCK DEVICE EQUIPPED</b>  | <input type="checkbox"/> <b>HIT/SKIP UNIT</b> | <b>VEHICLE WEIGHT GVWR/GCWR</b><br>1 - ≤10K LBS.<br>2 - 10.001 - 26K LBS.<br>3 - > 26K LBS. | <b>HAZARDOUS MATERIAL</b><br><input type="checkbox"/> MATERIAL CLASS # <input type="checkbox"/> RELEASED <input type="checkbox"/> PLACARD PLACARD ID # |                               |
| <b>UNIT TYPE</b><br>4  |   | <b># OCCUPANTS</b><br>1   |  |                               |
| <b># of TRAILING UNITS</b>   |   |   |  |                               |

|  |   |                                 |                                   |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
|--|---|---------------------------------|-----------------------------------|----------------------|---|------------------------|-------------------------|-------------------|----------------------|----------------|----------------------------------|---------------------------------|-----------------------------------|----------------------|--|----------------------------|----------------|-----------------------|--|----------------------|-----------------|---------------------|---------------------|--|----------------------------|----------------|--------------------------|----------------------------|--|
| <b>VEHICLE MODE</b><br>2                 | <b>WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?</b><br>0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - OTHER/UNKNOWN<br>1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION   |                                 |                                   |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
| <b>SPECIAL FUNCTION</b><br>1             | <table border="0"> <tr> <td>1 - NONE</td> <td>6 - BUS - CHARTER/TOUR</td> <td>11 - FIRE</td> <td>16 - FARM</td> <td>21 - MAIL CARRIER</td> </tr> <tr> <td>2 - TAXI</td> <td>7 - BUS - INTERCITY</td> <td>12 - MILITARY</td> <td>17 - MOWING</td> <td>99 - OTHER / UNKNOWN</td> </tr> <tr> <td>3 - ELECTRONIC RIDE SHARING</td> <td>8 - BUS - SHUTTLE</td> <td>13 - POLICE</td> <td>18 - SNOW REMOVAL</td> <td></td> </tr> <tr> <td>4 - SCHOOL TRANSPORT</td> <td>9 - BUS - OTHER</td> <td>14 - PUBLIC UTILITY</td> <td>19 - TOWING</td> <td></td> </tr> <tr> <td>5 - BUS - TRANSIT/COMMUTER</td> <td>10 - AMBULANCE</td> <td>15 - CONSTRUCTION EQUIP.</td> <td>20 - SAFETY SERVICE PATROL</td> <td></td> </tr> </table> |                                 |                                   |                      | 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 EQUIP. | 20 - SAFETY SERVICE PATROL |  |
| 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 EQUIP.        | 20 - SAFETY SERVICE PATROL        |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
| <b>CARGO BODY TYPE</b><br>1              | <table border="0"> <tr> <td>1 - NO CARGO BODY TYPE / NOT APPLICABLE</td> <td>4 - LOGGING</td> <td>7 - GRAIN/CHIPS/GRAVEL</td> <td>11 - DUMP</td> <td>99 - OTHER / UNKNOWN</td> </tr> <tr> <td>2 - BUS</td> <td>5 - INTERMODAL CONTAINER CHASSIS</td> <td>8 - POLE</td> <td>12 - CONCRETE MIXER</td> <td></td> </tr> <tr> <td>3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE</td> <td>6 - CARGOVAN /ENCLOSED BOX</td> <td>9 - CARGO TANK</td> <td>13 - AUTO TRANSPORTER</td> <td></td> </tr> <tr> <td></td> <td></td> <td>10 - FLAT BED</td> <td>14 - GARBAGE/REFUSE</td> <td></td> </tr> </table>   |                                 |                                   |                      | 1 - NO CARGO BODY TYPE / NOT APPLICABLE | 4 - LOGGING            | 7 - GRAIN/CHIPS/GRAVEL  | 11 - DUMP         | 99 - OTHER / UNKNOWN | 2 - BUS        | 5 - INTERMODAL CONTAINER CHASSIS | 8 - POLE                        | 12 - CONCRETE MIXER               |                      | 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE | 6 - CARGOVAN /ENCLOSED BOX | 9 - CARGO TANK | 13 - AUTO TRANSPORTER |  |                      |                 | 10 - FLAT BED       | 14 - GARBAGE/REFUSE |  |                            |                |                          |                            |  |
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| 2 - BUS                                  | 5 - INTERMODAL CONTAINER CHASSIS  | 8 - POLE                        | 12 - CONCRETE MIXER               |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
| 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE | 6 - CARGOVAN /ENCLOSED BOX  | 9 - CARGO TANK                  | 13 - AUTO TRANSPORTER             |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
|  |   | 10 - FLAT BED                   | 14 - GARBAGE/REFUSE               |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
| <b>VEHICLE DEFECTS</b>                   | <table border="0"> <tr> <td>1 - TURN SIGNALS</td> <td>4 - BRAKES</td> <td>7 - WORN OR SLICK TIRES</td> <td>9 - MOTOR TROUBLE</td> <td>99 - OTHER / UNKNOWN</td> </tr> <tr> <td>2 - HEAD LAMPS</td> <td>5 - STEERING</td> <td>8 - TRAILER EQUIPMENT DEFECTIVE</td> <td>10 - DISABLED FROM PRIOR ACCIDENT</td> <td></td> </tr> <tr> <td>3 - TAIL LAMPS</td> <td>6 - TIRE BLOWOUT</td> <td></td> <td></td> <td></td> </tr> </table>  |                                 |                                   |                      | 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           |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
| 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  |                                 |                                   |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |

|  |   |  |   |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
|--|---|--|---|--|-------------------------------------|---------------------------------|--|---|--|---------------------------------------|----------------------------------|----------------------------------|--------------------------------------|----------------------------|--------------------------|-----------------------|------------------------------------|--|--|-------------------|------------------------|-----------------|-------------------------------------|--|----------------------------|-----------------------|--------------------------|----------------------|--|---------------------|----------------------|--|-------------------------|--|--------------------|-------------------|--|--|--|--|---------------------------|--|--|--|
| <b>NON-MOTORIST LOCATION</b><br>3      | <table border="0"> <tr> <td>1 - INTERSECTION - MARKED CROSSWALK</td> <td>4 - MIDBLOCK - MARKED CROSSWALK</td> <td>7 - SHOULDER/ROADSIDE</td> <td>10 - DRIVEWAY ACCESS</td> <td>99 - OTHER / UNKNOWN</td> </tr> <tr> <td>2 - INTERSECTION - UNMARKED CROSSWALK</td> <td>5 - TRAVEL LANE - OTHER LOCATION</td> <td>8 - SIDEWALK</td> <td>11 - SHARED USE PATHS OR TRAILS</td> <td></td> </tr> <tr> <td>3 - INTERSECTION - OTHER</td> <td>6 - BICYCLE LANE</td> <td>9 - MEDIAN/CROSSING ISLAND</td> <td>12 - FIRST RESPONDER AT INCIDENT SCENE</td> <td></td> </tr> </table>   |  |   |  | 1 - INTERSECTION - MARKED CROSSWALK | 4 - MIDBLOCK - MARKED CROSSWALK | 7 - SHOULDER/ROADSIDE                      | 10 - DRIVEWAY ACCESS                    | 99 - OTHER / UNKNOWN                   | 2 - INTERSECTION - UNMARKED CROSSWALK | 5 - TRAVEL LANE - OTHER LOCATION | 8 - SIDEWALK                     | 11 - SHARED USE PATHS OR TRAILS      |                            | 3 - INTERSECTION - OTHER | 6 - BICYCLE LANE      | 9 - MEDIAN/CROSSING ISLAND         | 12 - FIRST RESPONDER AT INCIDENT SCENE |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
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| 2 - INTERSECTION - UNMARKED CROSSWALK  | 5 - TRAVEL LANE - OTHER LOCATION  | 8 - SIDEWALK   | 11 - SHARED USE PATHS OR TRAILS         |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 3 - INTERSECTION - OTHER               | 6 - BICYCLE LANE  | 9 - MEDIAN/CROSSING ISLAND   | 12 - FIRST RESPONDER AT INCIDENT SCENE  |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| <b>ACTION</b><br>3                     | <b>PRE-CRASH ACTIONS</b><br>13  | <table border="0"> <tr> <td>1 - NON-CONTACT</td> <td>1 - STRAIGHT AHEAD</td> <td>9 - LEAVING TRAFFIC LANE</td> <td>15 - WALKING, RUNNING, JOGGING, PLAYING</td> <td>21 - STANDING OUTSIDE DISABLED VEHICLE</td> </tr> <tr> <td>2 - NON-COLLISION</td> <td>2 - BACKING</td> <td>10 - PARKED</td> <td>16 - WORKING</td> <td>99 - OTHER / UNKNOWN</td> </tr> <tr> <td>3 - STRIKING</td> <td>3 - CHANGING LANES</td> <td>11 - SLOWING OR STOPPED IN TRAFFIC</td> <td>17 - PUSHING VEHICLE</td> <td></td> </tr> <tr> <td>4 - STRUCK</td> <td>4 - OVERTAKING/PASSING</td> <td>12 - DRIVERLESS</td> <td>18 - APPROACHING OR LEAVING VEHICLE</td> <td></td> </tr> <tr> <td>5 - BOTH STRIKING &amp; STRUCK</td> <td>5 - MAKING RIGHT TURN</td> <td>13 - NEGOTIATING A CURVE</td> <td>19 - STANDING</td> <td></td> </tr> <tr> <td>9 - OTHER / UNKNOWN</td> <td>6 - MAKING LEFT TURN</td> <td>14 - ENTERING OR CROSSING SPECIFIED LOCATION</td> <td>20 - OTHER NON-MOTORIST</td> <td></td> </tr> <tr> <td></td> <td>7 - MAKING U-TURN</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>8 - ENTERING TRAFFIC LANE</td> <td></td> <td></td> <td></td> </tr> </table> |   |  | 1 - NON-CONTACT                     | 1 - STRAIGHT AHEAD              | 9 - LEAVING TRAFFIC LANE                   | 15 - WALKING, RUNNING, JOGGING, PLAYING | 21 - STANDING OUTSIDE DISABLED VEHICLE | 2 - NON-COLLISION                     | 2 - BACKING                      | 10 - PARKED                      | 16 - WORKING                         | 99 - OTHER / UNKNOWN       | 3 - STRIKING             | 3 - CHANGING LANES    | 11 - SLOWING OR STOPPED IN TRAFFIC | 17 - PUSHING VEHICLE                   |  | 4 - STRUCK        | 4 - OVERTAKING/PASSING | 12 - DRIVERLESS | 18 - APPROACHING OR LEAVING VEHICLE |  | 5 - BOTH STRIKING & STRUCK | 5 - MAKING RIGHT TURN | 13 - NEGOTIATING A CURVE | 19 - STANDING        |  | 9 - OTHER / UNKNOWN | 6 - MAKING LEFT TURN | 14 - ENTERING OR CROSSING SPECIFIED LOCATION | 20 - OTHER NON-MOTORIST |  |                    | 7 - MAKING U-TURN |  |  |  |  | 8 - ENTERING TRAFFIC LANE |  |  |  |
| 1 - NON-CONTACT                        | 1 - STRAIGHT AHEAD  | 9 - LEAVING TRAFFIC LANE   | 15 - WALKING, RUNNING, JOGGING, PLAYING | 21 - STANDING OUTSIDE DISABLED VEHICLE |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 2 - NON-COLLISION                      | 2 - BACKING   | 10 - PARKED  | 16 - WORKING                            | 99 - OTHER / UNKNOWN                   |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 3 - STRIKING                           | 3 - CHANGING LANES  | 11 - SLOWING OR STOPPED IN TRAFFIC   | 17 - PUSHING VEHICLE                    |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 4 - STRUCK                             | 4 - OVERTAKING/PASSING  | 12 - DRIVERLESS  | 18 - APPROACHING OR LEAVING VEHICLE     |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 5 - BOTH STRIKING & STRUCK             | 5 - MAKING RIGHT TURN   | 13 - NEGOTIATING A CURVE   | 19 - STANDING                           |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 9 - OTHER / UNKNOWN                    | 6 - MAKING LEFT TURN  | 14 - ENTERING OR CROSSING SPECIFIED LOCATION   | 20 - OTHER NON-MOTORIST                 |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
|  | 7 - MAKING U-TURN   |  |   |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
|  | 8 - ENTERING TRAFFIC LANE   |  |   |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
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| 1 - NONE                               | 8 - FOLLOWING TOO CLOSE /ACDA   | 13 - IMPROPER START FROM A PARKED POSITION   | 18 - OPERATING DEFECTIVE EQUIPMENT      | 23 - OPENING DOOR INTO ROADWAY         |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 2 - FAILURE TO YIELD                   | 9 - IMPROPER LANE CHANGE  | 14 - STOPPED OR PARKED ILLEGALLY   | 19 - LOAD SHIFTING /FALLING/SPILLING    | 99 - OTHER IMPROPER ACTION             |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 3 - RAN RED LIGHT                      | 10 - IMPROPER PASSING   | 15 - SWERVING TO AVOID   | 20 - IMPROPER CROSSING                  |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 4 - RAN STOP SIGN                      | 11 - DROVE OFF ROAD   | 16 - WRONG WAY   | 21 - LYING IN ROADWAY                   |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 5 - UNSAFE SPEED                       | 12 - IMPROPER BACKING   | 17 - VISION OBSTRUCTION  | 22 - NOT DISCERNIBLE                    |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 6 - IMPROPER TURN                      |   |  |   |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 7 - LEFT OF CENTER                     |   |  |   |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |

|   |  |  |                                  |   |
|---|--|--|----------------------------------|---|
| <b>SEQUENCE OF EVENTS</b>                   | <b>EVENTS</b>                          |  |                                  |   |
| 1 9   | 1 - OVERTURN/ROLLOVER                  | 7 - SEPARATION OF UNITS                              | 12 - DOWNHILL RUNAWAY            | 19 - ANIMAL - OTHER   |
| 2 30  | 2 - FIRE/EXPLOSION                     | 8 - RAN OFF ROAD RIGHT                               | 13 - OTHER NON-COLLISION         | 20 - MOTOR VEHICLE IN TRANSPORT   |
| 3   | 3 - IMMERSION                          | 9 - RAN OFF ROAD LEFT                                | 14 - PEDESTRIAN                  | 21 - PARKED MOTOR VEHICLE   |
| 4   | 4 - JACKKNIFE                          | 10 - CROSS MEDIAN                                    | 15 - PEDALCYCLE                  | 22 - WORK ZONE MAINTENANCE EQUIPMENT  |
| 5   | 5 - CARGO / EQUIPMENT LOSS OR SHIFT    | 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL | 16 - RAILWAY VEHICLE             | 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE |
| 6   | 6 - EQUIPMENT FAILURE                  |  | 17 - ANIMAL - FARM               | 24 - OTHER MOVABLE OBJECT   |
|   |  |  | 18 - ANIMAL - DEER               |   |
| <b>COLLISION WITH FIXED OBJECT - STRUCK</b> |  |  |                                  |   |
| 4   | 25 - IMPACT ATTENUATOR / CRASH CUSHION | 31 - GUARDRAIL END                                   | 38 - OVERHEAD SIGN POST          | 45 - EMBANKMENT   |
| 5   | 26 - BRIDGE OVERHEAD STRUCTURE         | 32 - PORTABLE BARRIER                                | 39 - LIGHT / LUMINARIES SUPPORT  | 52 - BUILDING   |
| 6   | 27 - BRIDGE PIER OR ABUTMENT           | 33 - MEDIAN CABLE BARRIER                            | 40 - UTILITY POLE                | 53 - TUNNEL   |
|   | 28 - BRIDGE PARAPET                    | 34 - MEDIAN GUARDRAIL BARRIER                        | 41 - OTHER POST, POLE OR SUPPORT | 54 - OTHER FIXED OBJECT   |
|   | 29 - BRIDGE RAIL                       | 35 - MEDIAN CONCRETE BARRIER                         | 42 - CULVERT                     | 55 - OTHER / UNKNOWN  |
|   | 30 - GUARDRAIL FACE                    | 36 - MEDIAN OTHER BARRIER                            | 43 - CURB                        |   |
|   |  | 37 - TRAFFIC SIGN POST                               | 44 - DITCH                       |   |
| 2   | <b>FIRST HARMFUL EVENT</b>             | 2  | <b>MOST HARMFUL EVENT</b>        |   |

**LOCAL REPORT NUMBER**  
2024000000084

**DAMAGE**

**DAMAGE SCALE**

1 - NONE 3 - FUNCTIONAL DAMAGE  
4 - 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  
11 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
13 - TOP 99 - UNKNOWN

**TRAFFIC**

|                             |   |
|-----------------------------|---|
| <b>TRAFFICWAY FLOW</b><br>2 | <b>TRAFFIC CONTROL</b><br>6   |
| 1 - ONE-WAY<br>2 - TWO-WAY  | 1 - ROUNDABOUT 4 - STOP SIGN<br>2 - SIGNAL 5 - YIELD SIGN<br>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 1 TO

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

**UNIT SPEED**  
55

**POSTED SPEED**  
55

**DETECTED SPEED**  
1 - STATED / ESTIMATED SPEED  
2 - CALCULATED / EDR  
3 - UNDETERMINED

# MOTORIST / Non-MOTORIST

**LOCAL REPORT NUMBER**  
2024000000084

|  |   |                                   |                        |  |   |                                    |   |                              |                           |                      |                     |                  |                               |
|--|---|-----------------------------------|------------------------|--|---|------------------------------------|---|------------------------------|---------------------------|----------------------|---------------------|------------------|-------------------------------|
| <b>UNIT #</b><br>1   | <b>NAME: LAST, FIRST, MIDDLE</b><br>JAMES, CHRISTOPHER, LEE |                                   |                        |  | <b>DATE OF BIRTH</b><br>04/06/2004  |                                    | <b>AGE</b><br>19  | <b>GENDER</b><br>M           |                           |                      |                     |                  |                               |
| <b>ADDRESS: STREET, CITY, STATE, ZIP</b><br>152 VILLA DR, CIRCLEVILLE, OH, 43113 |   |                                   |                        |  | <b>CONTACT PHONE - INCLUDE AREA CODE</b>  |                                    |   |                              |                           |                      |                     |                  |                               |
| <b>INJURIES</b><br>5   | <b>INJURED TAKEN BY</b><br>1                                | <b>EMS AGENCY (NAME)</b>          |                        | <b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> |   | <b>SAFETY EQUIPMENT USED</b><br>99 | <input type="checkbox"/> DOT-COMPLIANT<br><input checked="" type="checkbox"/> MC HELMET | <b>SEATING POSITION</b><br>1 | <b>AIR BAG USAGE</b><br>1 | <b>EJECTION</b><br>1 | <b>TRAPPED</b><br>1 |                  |                               |
| <b>OL STATE</b><br>OH  | <b>OPERATOR LICENSE NUMBER</b>                              |                                   | <b>OFFENSE CHARGED</b> |  | <b>LOCAL CODE</b><br><input type="checkbox"/>   | <b>OFFENSE DESCRIPTION</b>         |   |                              | <b>CITATION NUMBER</b>    |                      |                     |                  |                               |
| <b>OL CLASS</b>  | <b>ENDORSEMENT</b>  | <b>RESTRICTION SELECT UP TO 3</b> |                        | <b>DRIVER DISTRACTED BY</b><br>1                       | <b>ALCOHOL / DRUG SUSPECTED</b><br><input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA<br><input type="checkbox"/> OTHER DRUG |                                    | <b>CONDITION</b><br>1   | <b>ALCOHOL TEST</b>          |                           | <b>DRUG TEST(S)</b>  |                     |                  |                               |
|  |   |                                   |                        |  |   |                                    |   | <b>STATUS</b><br>1           | <b>TYPE</b><br>1          | <b>VALUE</b><br>.    | <b>STATUS</b><br>1  | <b>TYPE</b><br>1 | <b>RESULTS SELECT UP TO 4</b> |

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

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

| INJURIES   | SEATING POSITION  | AIR BAG   | OL CLASS  | OL RESTRICTION(S)   | DRIVER DISTRACTION   | TEST STATUS  |
|--|---|---|---|---|--|--|
| 1 - FATAL<br>2 - SUSPECTED SERIOUS INJURY<br>3 - SUSPECTED MINOR INJURY<br>4 - POSSIBLE INJURY<br>5 - NO APPARENT INJURY   | 1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)<br>2 - FRONT - MIDDLE<br>3 - FRONT - RIGHT SIDE<br>4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)<br>5 - SECOND - MIDDLE<br>6 - SECOND - RIGHT SIDE<br>7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)<br>8 - THIRD - MIDDLE<br>9 - THIRD - RIGHT SIDE<br>10 - SLEEPER SECTION OF TRUCK CAB<br>11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)<br>12 - PASSENGER IN UNENCLOSED CARGO AREA<br>13 - TRAILING UNIT<br>14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)<br>15 - NON-MOTORIST<br>99 - OTHER / UNKNOWN | 1 - NOT DEPLOYED<br>2 - DEPLOYED FRONT<br>3 - DEPLOYED SIDE<br>4 - DEPLOYED BOTH FRONT/SIDE<br>5 - NOT APPLICABLE<br>9 - DEPLOYMENT UNKNOWN | 1 - CLASS A<br>2 - CLASS B<br>3 - CLASS C<br>4 - REGULAR CLASS (OHIO = D)<br>5 - M/C MOPED ONLY<br>6 - NO VALID OL  | 1 - ALCOHOL INTERLOCK DEVICE<br>2 - CDL INTRASTATE ONLY<br>3 - CORRECTIVE LENSES<br>4 - FARM WAIVER<br>5 - EXCEPT CLASS A BUS<br>6 - EXCEPT CLASS A & CLASS B BUS<br>7 - EXCEPT TRACTOR-TRAILER<br>8 - INTERMEDIATE LICENSE RESTRICTIONS<br>9 - LEARNER'S PERMIT RESTRICTIONS<br>10 - LIMITED TO DAYLIGHT ONLY<br>11 - LIMITED TO EMPLOYMENT<br>12 - LIMITED - OTHER<br>13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)<br>14 - MILITARY VEHICLES ONLY<br>15 - MOTOR VEHICLES WITHOUT AIR BRAKES<br>16 - OUTSIDE MIRROR<br>17 - PROSTHETIC AID<br>18 - OTHER | 1 - NOT DISTRACTED<br>2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DRIVING)<br>3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE<br>4 - TALKING ON HAND-HELD COMMUNICATION DEVICE<br>5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE<br>6 - PASSENGER<br>7 - OTHER DISTRACTION INSIDE THE VEHICLE<br>8 - OTHER DISTRACTION OUTSIDE THE VEHICLE<br>9 - OTHER / UNKNOWN | 1 - NONE GIVEN<br>2 - TEST REFUSED<br>3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE<br>4 - TEST GIVEN, RESULTS KNOWN<br>5 - TEST GIVEN, RESULTS UNKNOWN     |
| <b>INJURIES TAKEN BY</b>   |   | <b>EJECTION</b>   | <b>OL ENDORSEMENT</b>   |   | <b>CONDITION</b>   | <b>ALCOHOL TEST TYPE</b>   |
| 1 - NOT TRANSPORTED /TREATED AT SCENE<br>2 - EMS<br>3 - POLICE<br>9 - OTHER / UNKNOWN  |   | 1 - NOT EJECTED<br>2 - PARTIALLY EJECTED<br>3 - TOTALLY EJECTED<br>4 - NOT APPLICABLE   | H - HAZMAT<br>M - MOTORCYCLE<br>P - PASSENGER<br>N - TANKER<br>Q - MOTOR SCOOTER<br>R - THREE-WHEEL MOTORCYCLE<br>S - SCHOOL BUS<br>T - DOUBLE & TRIPLE TRAILERS<br>X - TANKER / HAZMAT |   | 1 - APPARENTLY NORMAL<br>2 - PHYSICAL IMPAIRMENT<br>3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)<br>4 - ILLNESS<br>5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.<br>6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL<br>9 - OTHER / UNKNOWN  | 1 - NONE<br>2 - BLOOD<br>3 - URINE<br>4 - BREATH<br>5 - OTHER  |
| <b>SAFETY EQUIPMENT</b>  |   | <b>TRAPPED</b>  | <b>GENDER</b>   |   |  | <b>DRUG TEST TYPE</b>  |
| 1 - NONE USED<br>2 - SHOULDER BELT ONLY USED<br>3 - LAP BELT ONLY USED<br>4 - SHOULDER & LAP BELT USED<br>5 - CHILD RESTRAINT SYSTEM - FORWARD FACING<br>6 - CHILD RESTRAINT SYSTEM - REAR FACING<br>7 - BOOSTER SEAT<br>8 - HELMET USED<br>9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)<br>10 - REFLECTIVE CLOTHING<br>11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY<br>99 - OTHER / UNKNOWN |   | 1 - NOT TRAPPED<br>2 - EXTRICATED BY MECHANICAL MEANS<br>3 - FREED BY NON-MECHANICAL MEANS  | F - FEMALE<br>M - MALE<br>U - OTHER / UNKNOWN   |   |  | <b>DRUG TEST RESULT(S)</b>   |
|  |   |   |   |   |  | 1 - NONE<br>2 - BLOOD<br>3 - URINE<br>4 - OTHER  |
|  |   |   |   |   |  | 1 - AMPHETAMINES<br>2 - BARBITURATES<br>3 - BENZODIAZEPINES<br>4 - CANNABINOIDS<br>5 - COCAINE<br>6 - OPIATES / OPIOIDS<br>7 - OTHER<br>8 - NEGATIVE RESULTS |

# OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER  
2024000000084

|                 |  |  |  |                         |  |                         |                      |                 |                |
|-----------------|--|--|--|-------------------------|--|-------------------------|----------------------|-----------------|----------------|
| <b>OCCUPANT</b> | <b>UNIT #</b> <b>NAME:</b> LAST, FIRST, MIDDLE | <b>DATE OF BIRTH</b>                     |  | <b>AGE</b>              | <b>GENDER</b>                                    |                         |                      |                 |                |
|                 | <b>ADDRESS:</b> STREET, CITY, STATE, ZIP       | <b>CONTACT PHONE</b> - INCLUDE AREA CODE |  |                         |  |                         |                      |                 |                |
| <b>INJURIES</b> | <b>INJURED TAKEN BY</b>                        | <b>EMS AGENCY (NAME)</b>                 | <b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> | <b>SAFETY EQUIPMENT</b> | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | <b>SEATING POSITION</b> | <b>AIR BAG USAGE</b> | <b>EJECTION</b> | <b>TRAPPED</b> |

|                 |  |  |  |                         |  |                         |                      |                 |                |
|-----------------|--|--|--|-------------------------|--|-------------------------|----------------------|-----------------|----------------|
| <b>OCCUPANT</b> | <b>UNIT #</b> <b>NAME:</b> LAST, FIRST, MIDDLE | <b>DATE OF BIRTH</b>                     |  | <b>AGE</b>              | <b>GENDER</b>                                    |                         |                      |                 |                |
|                 | <b>ADDRESS:</b> STREET, CITY, STATE, ZIP       | <b>CONTACT PHONE</b> - INCLUDE AREA CODE |  |                         |  |                         |                      |                 |                |
| <b>INJURIES</b> | <b>INJURED TAKEN BY</b>                        | <b>EMS AGENCY (NAME)</b>                 | <b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> | <b>SAFETY EQUIPMENT</b> | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | <b>SEATING POSITION</b> | <b>AIR BAG USAGE</b> | <b>EJECTION</b> | <b>TRAPPED</b> |

|                 |  |  |  |                         |  |                         |                      |                 |                |
|-----------------|--|--|--|-------------------------|--|-------------------------|----------------------|-----------------|----------------|
| <b>OCCUPANT</b> | <b>UNIT #</b> <b>NAME:</b> LAST, FIRST, MIDDLE | <b>DATE OF BIRTH</b>                     |  | <b>AGE</b>              | <b>GENDER</b>                                    |                         |                      |                 |                |
|                 | <b>ADDRESS:</b> STREET, CITY, STATE, ZIP       | <b>CONTACT PHONE</b> - INCLUDE AREA CODE |  |                         |  |                         |                      |                 |                |
| <b>INJURIES</b> | <b>INJURED TAKEN BY</b>                        | <b>EMS AGENCY (NAME)</b>                 | <b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> | <b>SAFETY EQUIPMENT</b> | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | <b>SEATING POSITION</b> | <b>AIR BAG USAGE</b> | <b>EJECTION</b> | <b>TRAPPED</b> |

|                 |  |  |  |                         |  |                         |                      |                 |                |
|-----------------|--|--|--|-------------------------|--|-------------------------|----------------------|-----------------|----------------|
| <b>OCCUPANT</b> | <b>UNIT #</b> <b>NAME:</b> LAST, FIRST, MIDDLE | <b>DATE OF BIRTH</b>                     |  | <b>AGE</b>              | <b>GENDER</b>                                    |                         |                      |                 |                |
|                 | <b>ADDRESS:</b> STREET, CITY, STATE, ZIP       | <b>CONTACT PHONE</b> - INCLUDE AREA CODE |  |                         |  |                         |                      |                 |                |
| <b>INJURIES</b> | <b>INJURED TAKEN BY</b>                        | <b>EMS AGENCY (NAME)</b>                 | <b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b> | <b>SAFETY EQUIPMENT</b> | <input type="checkbox"/> DOT-COMPLIANT MC HELMET | <b>SEATING POSITION</b> | <b>AIR BAG USAGE</b> | <b>EJECTION</b> | <b>TRAPPED</b> |

| INJURIES   | SAFETY EQUIPMENT USED   | SEATING POSITION   | AIR BAG USAGE   |
|--|---|--|---|
| 1 - FATAL<br>2 - SUSPECTED SERIOUS INJURY<br>3 - SUSPECTED MINOR INJURY<br>4 - POSSIBLE INJURY<br>5 - NO APPARENT INJURY | 1 - NONE USED - VEHICLE OCCUPANT<br>2 - SHOULDER BELT ONLY USED<br>3 - LAP BELT ONLY USED<br>4 - SHOULDER & LAP BELT USED<br>5 - CHILD RESTRAINT SYSTEM - FORWARD FACING<br>6 - CHILD RESTRAINT SYSTEM - REAR FACING<br>7 - BOOSTER SEAT<br>8 - HELMET USED<br>9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)<br>10 - REFLECTIVE CLOTHING<br>11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY<br>99 - OTHER / UNKNOWN | 1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)<br>2 - FRONT - MIDDLE<br>3 - FRONT - RIGHT SIDE<br>4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)<br>5 - SECOND - MIDDLE<br>6 - SECOND - RIGHT SIDE<br>7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)<br>8 - THIRD - MIDDLE<br>9 - THIRD - RIGHT SIDE<br>10 - SLEEPER SECTION OF TRUCK CAB<br>11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP)<br>12 - PASSENGER IN UNENCLOSED CARGO AREA<br>13 - TRAILING UNIT<br>14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)<br>15 - NON-MOTORIST<br>99 - OTHER / UNKNOWN | 1 - NOT DEPLOYED<br>2 - DEPLOYED FRONT<br>3 - DEPLOYED SIDE<br>4 - DEPLOYED BOTH FRONT/SIDE<br>5 - NOT APPLICABLE<br>9 - DEPLOYMENT UNKNOWN |
| INJURED TAKEN BY   |   |  | EJECTION  |
| 1 - NOT TRANSPORTED / TREATED AT SCENE<br>2 - EMS<br>3 - POLICE<br>9 - OTHER / UNKNOWN                                   |   |  | 1 - NOT EJECTED<br>2 - PARTIALLY EJECTED<br>3 - TOTALLY EJECTED<br>4 - NOT APPLICABLE   |
| GENDER   |   |  | TRAPPED   |
| F - FEMALE<br>M - MALE<br>U - OTHER / UNKNOWN  |   |  | 1 - NOT TRAPPED<br>2 - EXTRICATED BY MECHANICAL MEANS<br>3 - FREED BY NON-MECHANICAL MEANS  |

|                |  |  |  |            |               |
|----------------|--|--|--|------------|---------------|
| <b>WITNESS</b> | <b>NAME:</b> LAST, FIRST, MIDDLE         | <b>DATE OF BIRTH</b>                     |  | <b>AGE</b> | <b>GENDER</b> |
|                | <b>ADDRESS:</b> STREET, CITY, STATE, ZIP | <b>CONTACT PHONE</b> - INCLUDE AREA CODE |  |            |               |

|                |  |  |  |            |               |
|----------------|--|--|--|------------|---------------|
| <b>WITNESS</b> | <b>NAME:</b> LAST, FIRST, MIDDLE         | <b>DATE OF BIRTH</b>                     |  | <b>AGE</b> | <b>GENDER</b> |
|                | <b>ADDRESS:</b> STREET, CITY, STATE, ZIP | <b>CONTACT PHONE</b> - INCLUDE AREA CODE |  |            |               |

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|----------------|--|--|--|------------|---------------|
| <b>WITNESS</b> | <b>NAME:</b> LAST, FIRST, MIDDLE         | <b>DATE OF BIRTH</b>                     |  | <b>AGE</b> | <b>GENDER</b> |
|                | <b>ADDRESS:</b> STREET, CITY, STATE, ZIP | <b>CONTACT PHONE</b> - INCLUDE AREA CODE |  |            |               |