

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER \*  
2023000001722

|   |  |   |  |  |  |   |  |   |  |  |  |   |  |
|---|--|---|--|--|--|---|--|---|--|--|--|---|--|
| <input checked="" type="checkbox"/> PHOTOS TAKEN<br><input type="checkbox"/> SECONDARY CRASH  |  | <input type="checkbox"/> OH -2<br><input type="checkbox"/> OH -3<br><input type="checkbox"/> OH-1P<br><input type="checkbox"/> OTHER<br><input type="checkbox"/> PRIVATE PROPERTY   |  | LOCAL INFORMATION<br><b>REPORTING AGENCY NAME *</b><br>MADISON COUNTY SHERIFF  |  | <b>NCIC *</b><br>04900  |  | <b>HIT/SKIP</b><br><input type="checkbox"/> 1 - SOLVED<br><input type="checkbox"/> 2 - UNSOLVED   |  | <b>NUMBER OF UNITS</b><br>1  |  | <b>UNIT IN ERROR</b><br><input type="checkbox"/> 98 - ANIMAL<br><input type="checkbox"/> 99 - UNKNOWN |  |
| <b>COUNTY*</b><br>49  |  | <b>LOCALITY*</b><br><input type="checkbox"/> 1 - CITY<br><input checked="" type="checkbox"/> 3 - TOWNSHIP   |  | <b>LOCATION: CITY, VILLAGE, TOWNSHIP*</b><br>JEFFERSON (TOWNSHIP OF)   |  | <b>CRASH DATE / TIME*</b><br>12/05/2023 18:59   |  | <b>CRASH SEVERITY</b><br><input checked="" type="checkbox"/> 1 - FATAL<br><input type="checkbox"/> 2 - SERIOUS INJURY SUSPECTED<br><input type="checkbox"/> 3 - MINOR INJURY SUSPECTED<br><input type="checkbox"/> 4 - INJURY POSSIBLE<br><input type="checkbox"/> 5 - PROPERTY DAMAGE ONLY |  |  |  |   |  |
| <b>ROUTE TYPE</b><br><input type="checkbox"/> 1 - NORTH<br><input type="checkbox"/> 2 - SOUTH<br><input type="checkbox"/> 3 - EAST<br><input type="checkbox"/> 4 - WEST   |  | <b>ROUTE NUMBER</b><br><input type="checkbox"/> 1 - NORTH<br><input checked="" type="checkbox"/> 2 - SOUTH<br><input type="checkbox"/> 3 - EAST<br><input type="checkbox"/> 4 - WEST  |  | <b>LOCATION ROAD NAME</b><br>WEST JEFFERSON-KIOUSVILLE   |  | <b>ROAD TYPE</b><br>RD  |  | <b>LATITUDE DECIMAL DEGREES</b><br>39.919944  |  | <b>LONGITUDE DECIMAL DEGREES</b><br>-83.290348   |  |   |  |
| <b>ROUTE TYPE</b><br><input type="checkbox"/> 1 - NORTH<br><input type="checkbox"/> 2 - SOUTH<br><input type="checkbox"/> 3 - EAST<br><input type="checkbox"/> 4 - WEST   |  | <b>ROUTE NUMBER</b><br><input type="checkbox"/> 1 - NORTH<br><input checked="" type="checkbox"/> 2 - SOUTH<br><input type="checkbox"/> 3 - EAST<br><input type="checkbox"/> 4 - WEST  |  | <b>REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)</b><br>WILSON   |  | <b>ROAD TYPE</b><br>RD  |  |   |  |  |  |   |  |
| <b>REFERENCE POINT</b><br><input checked="" type="checkbox"/> 1 - INTERSECTION<br><input type="checkbox"/> 2 - MILE POST<br><input type="checkbox"/> 3 - HOUSE #  |  | <b>DIRECTION FROM REFERENCE</b><br><input checked="" type="checkbox"/> 1 - NORTH<br><input type="checkbox"/> 2 - SOUTH<br><input type="checkbox"/> 3 - EAST<br><input type="checkbox"/> 4 - WEST  |  | <b>ROUTE TYPE</b><br>IR - INTERSTATE ROUTE (TP)<br>US - FEDERAL US ROUTE<br>SR - STATE ROUTE<br>CR - NUMBERED COUNTY ROUTE<br>TR - NUMBERED TOWNSHIP ROUTE   |  | <b>ROAD TYPE</b><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  |  | <b>INTERSECTION RELATED</b><br><input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH<br><input type="checkbox"/> WITHIN INTERCHANGE AREA   |  |   |  |
| <b>DISTANCE FROM REFERENCE</b><br>485.00  |  | <b>DISTANCE UNIT OF MEASURE</b><br><input checked="" type="checkbox"/> 1 - MILES<br><input type="checkbox"/> 2 - FEET<br><input type="checkbox"/> 3 - YARDS   |  | <b>ROADWAY</b><br><input type="checkbox"/> ROADWAY DIVIDED   |  | <b>NUMBER OF APPROACHES</b><br><input type="checkbox"/>   |  |   |  |  |  |   |  |
| <b>LOCATION OF FIRST HARMFUL EVENT</b><br><input checked="" type="checkbox"/> 1 - ON ROADWAY<br><input type="checkbox"/> 2 - ON SHOULDER<br><input type="checkbox"/> 3 - IN MEDIAN<br><input type="checkbox"/> 4 - ON ROADSIDE<br><input type="checkbox"/> 5 - ON GORE<br><input type="checkbox"/> 6 - OUTSIDE TRAFFIC WAY<br><input type="checkbox"/> 7 - ON RAMP<br><input type="checkbox"/> 8 - OFF RAMP |  |   |  | <b>MANNER OF CRASH COLLISION/IMPACT</b><br><input checked="" type="checkbox"/> 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT<br><input type="checkbox"/> 2 - REAR-END<br><input type="checkbox"/> 3 - HEAD-ON<br><input type="checkbox"/> 4 - REAR-TO-REAR<br><input type="checkbox"/> 5 - BACKING<br><input type="checkbox"/> 6 - ANGLE<br><input type="checkbox"/> 7 - SIDESWIPE, SAME DIRECTION<br><input type="checkbox"/> 8 - SIDESWIPE, OPPOSITE DIRECTION<br><input type="checkbox"/> 9 - OTHER / UNKNOWN |  |   |  | <b>DIRECTION OF TRAVEL</b><br><input type="checkbox"/> 1 - NORTH<br><input type="checkbox"/> 2 - SOUTH<br><input type="checkbox"/> 3 - EAST<br><input type="checkbox"/> 4 - WEST  |  | <b>MEDIAN TYPE</b><br><input type="checkbox"/> 1 - DIVIDED FLUSH MEDIAN (< 4 FEET)<br><input type="checkbox"/> 2 - DIVIDED FLUSH MEDIAN (≥ 4 FEET)<br><input type="checkbox"/> 3 - DIVIDED, DEPRESSED MEDIAN<br><input type="checkbox"/> 4 - DIVIDED, RAISED MEDIAN (ANY TYPE)<br><input type="checkbox"/> 9 - OTHER / UNKNOWN |  |   |  |
| <input type="checkbox"/> WORK ZONE RELATED<br><input type="checkbox"/> WORKERS PRESENT<br><input type="checkbox"/> LAW ENFORCEMENT PRESENT<br><input type="checkbox"/> ACTIVE SCHOOL ZONE   |  | <b>WORK ZONE TYPE</b><br><input type="checkbox"/> 1 - LANE CLOSURE<br><input type="checkbox"/> 2 - LANE SHIFT/ CROSSOVER<br><input type="checkbox"/> 3 - WORK ON SHOULDER OR MEDIAN<br><input type="checkbox"/> 4 - INTERMITTENT OR MOVING WORK<br><input type="checkbox"/> 5 - OTHER |  | <b>LOCATION OF CRASH IN WORK ZONE</b><br><input type="checkbox"/> 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN<br><input type="checkbox"/> 2 - ADVANCE WARNING AREA<br><input type="checkbox"/> 3 - TRANSITION AREA<br><input type="checkbox"/> 4 - ACTIVITY AREA<br><input type="checkbox"/> 5 - TERMINATION AREA  |  | <b>CONTOUR</b><br><input checked="" type="checkbox"/> 4<br>1 - STRAIGHT LEVEL<br>2 - STRAIGHT GRADE<br>3 - CURVE LEVEL<br>4 - CURVE GRADE<br>9 - OTHER /UNKNOWN |  | <b>CONDITIONS</b><br><input checked="" type="checkbox"/> 2<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   |  | <b>SURFACE</b><br><input checked="" type="checkbox"/> 2<br>1 - CONCRETE<br>2 - BLACKTOP, BITUMINOUS, ASPHALT<br>3 - BRICK/BLOCK<br>4 - SLAG, GRAVEL, STONE<br>5 - DIRT<br>9 - OTHER / UNKNOWN  |  |   |  |
| <b>LIGHT CONDITION</b><br><input checked="" type="checkbox"/> 4<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  |  |   |  | <b>WEATHER</b><br><input checked="" type="checkbox"/> 2<br>1 - CLEAR<br>2 - CLOUDY<br>3 - FOG, SMOG, SMOKE<br>4 - RAIN<br>5 - SLEET, HAIL<br>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>U1 was traveling south bound when it ran off the right side of the road hitting a telephone pole   |  |   |  |  |  |   |  |   |  |  |  |   |  |
| <b>CRASH REPORTED DATE / TIME</b><br>12/05/2023 18:59   |  | <b>DISPATCH DATE / TIME</b><br>12/05/2023 19:03   |  | <b>ARRIVAL DATE / TIME</b><br>12/05/2023 19:15   |  | <b>SCENE CLEARED DATE / TIME</b><br>12/05/2023 21:59  |  | <b>REPORT TAKEN BY</b><br><input checked="" type="checkbox"/> POLICE AGENCY<br><input type="checkbox"/> MOTORIST  |  |  |  |   |  |
| <b>TOTAL TIME ROADWAY CLOSED</b><br>100   |  | <b>OTHER INVESTIGATION TIME</b><br>0  |  | <b>TOTAL MINUTES</b><br>176  |  | <b>OFFICER'S NAME*</b><br>RICE, DILLAN S  |  | <b>CHECKED BY OFFICER'S NAME*</b><br>GIBSON, JACOB L  |  |  |  |   |  |
|   |  | <b>OFFICER'S BADGE NUMBER*</b><br>000042  |  | <b>CHECKED BY OFFICER'S BADGE NUMBER*</b><br>000011  |  | <input type="checkbox"/> SUPPLEMENT<br><small>(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)</small>   |  |   |  |  |  |   |  |

|  |   |   |
|--|---|---|
| <b>UNIT #</b><br>1   | <b>OWNER NAME:</b> LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER )<br>SHAFFER, NEAL, GORDON | <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>5025 WEST JEFFERSON-KIOUSVILLE RD, LONDON, OH, 43140 |   |   |
| <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>FWE4205   | <b>VEHICLE IDENTIFICATION #</b><br>3FAHP0HA8CR197828  | <b>VEHICLE YEAR</b><br>2012   | <b>VEHICLE MAKE</b><br>FORD    |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |
| <input checked="" type="checkbox"/> <b>INSURANCE VERIFIED</b>   | <b>INSURANCE COMPANY</b><br>PROGRESSIVE INSURANCE   | <b>INSURANCE POLICY #</b><br>965337061  | <b>COLOR</b><br>BLK   | <b>VEHICLE MODEL</b><br>FUSION |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |
| <input type="checkbox"/> <b>COMMERCIAL</b> <input type="checkbox"/> <b>GOVERNMENT</b> <input type="checkbox"/> <b>IN EMERGENCY RESPONSE</b> |   | <b>US DOT #</b>   | <b>TOWED BY:</b> COMPANY NAME<br>C&C TOWING   |                                |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |
| <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. | <input type="checkbox"/> <b>HAZARDOUS MATERIAL CLASS #</b> <b>PLACARD ID #</b><br><input type="checkbox"/> <b>MATERIAL RELEASED</b> <input type="checkbox"/> <b>PLACARD</b> |                                |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |
| <b>UNIT TYPE</b><br>1   | <table border="0"> <tr> <td>1 - PASSENGER CAR</td> <td>6 - VAN (9-15 SEATS)</td> <td>12 - GOLF CART</td> <td>18 - LIMO (LIVERY VEHICLE)</td> <td>23 - PEDESTRIAN/SKATER</td> </tr> <tr> <td>2 - PASSENGER VAN (MINIVAN)</td> <td>7 - MOTORCYCLE 2-WHEELED</td> <td>13 - SNOWMOBILE</td> <td>19 - BUS (16+ PASSENGERS)</td> <td>24 - WHEELCHAIR (ANY TYPE)</td> </tr> <tr> <td>3 - SPORT UTILITY VEHICLE</td> <td>8 - MOTORCYCLE 3-WHEELED</td> <td>14 - SINGLE UNIT TRUCK</td> <td>20 - OTHER VEHICLE</td> <td>25 - OTHER NON-MOTORIST</td> </tr> <tr> <td>4 - PICK UP</td> <td>9 - AUTOCYCLE</td> <td>15 - SEMI-TRACTOR</td> <td>21 - HEAVY EQUIPMENT</td> <td>26 - BICYCLE</td> </tr> <tr> <td>5 - CARGO VAN</td> <td>10 - MOPED OR MOTORIZED BICYCLE</td> <td>16 - FARM EQUIPMENT</td> <td>22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE</td> <td>27 - TRAIN</td> </tr> <tr> <td></td> <td>11 - ALL TERRAIN VEHICLE (ATV/UTV)</td> <td>17 - MOTORHOME</td> <td>99 - UNKNOWN OR HIT/SKIP</td> <td></td> </tr> </table> |   |   |                                | 1 - PASSENGER CAR | 6 - VAN (9-15 SEATS) | 12 - GOLF CART | 18 - LIMO (LIVERY VEHICLE) | 23 - PEDESTRIAN/SKATER | 2 - PASSENGER VAN (MINIVAN) | 7 - MOTORCYCLE 2-WHEELED | 13 - SNOWMOBILE | 19 - BUS (16+ PASSENGERS) | 24 - WHEELCHAIR (ANY TYPE) | 3 - SPORT UTILITY VEHICLE | 8 - MOTORCYCLE 3-WHEELED | 14 - SINGLE UNIT TRUCK | 20 - OTHER VEHICLE | 25 - OTHER NON-MOTORIST | 4 - PICK UP | 9 - AUTOCYCLE | 15 - SEMI-TRACTOR | 21 - HEAVY EQUIPMENT | 26 - BICYCLE | 5 - CARGO VAN | 10 - MOPED OR MOTORIZED BICYCLE | 16 - FARM EQUIPMENT | 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE | 27 - TRAIN |  | 11 - ALL TERRAIN VEHICLE (ATV/UTV) | 17 - MOTORHOME | 99 - UNKNOWN OR HIT/SKIP |  |
| 1 - PASSENGER CAR   | 6 - VAN (9-15 SEATS)  | 12 - GOLF CART  | 18 - LIMO (LIVERY VEHICLE)  | 23 - PEDESTRIAN/SKATER         |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |
| 2 - PASSENGER VAN (MINIVAN)   | 7 - MOTORCYCLE 2-WHEELED  | 13 - SNOWMOBILE   | 19 - BUS (16+ PASSENGERS)   | 24 - WHEELCHAIR (ANY TYPE)     |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |
| 3 - SPORT UTILITY VEHICLE   | 8 - MOTORCYCLE 3-WHEELED  | 14 - SINGLE UNIT TRUCK  | 20 - OTHER VEHICLE  | 25 - OTHER NON-MOTORIST        |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |
| 4 - PICK UP   | 9 - AUTOCYCLE   | 15 - SEMI-TRACTOR   | 21 - HEAVY EQUIPMENT  | 26 - BICYCLE                   |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |
| 5 - CARGO VAN   | 10 - MOPED OR MOTORIZED BICYCLE   | 16 - FARM EQUIPMENT   | 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE  | 27 - TRAIN                     |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |
|   | 11 - ALL TERRAIN VEHICLE (ATV/UTV)  | 17 - MOTORHOME  | 99 - UNKNOWN OR HIT/SKIP  |                                |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |
| <b># of TRAILING UNITS</b>  |   |   |   |                                |                   |                      |                |                            |                        |                             |                          |                 |                           |                            |                           |                          |                        |                    |                         |             |               |                   |                      |              |               |                                 |                     |  |            |  |                                    |                |                          |  |

|   |   |                                 |                                   |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
|---|---|---------------------------------|-----------------------------------|----------------------|---|------------------------|-------------------------|-------------------|----------------------|----------------|----------------------------------|---------------------------------|-----------------------------------|----------------------|--|----------------------------|----------------|-----------------------|--|----------------------|-----------------|---------------------|---------------------|--|----------------------------|----------------|--------------------------|----------------------------|--|
| <b>VEHICLE MODE WHEN CRASH OCCURRED?</b><br>2 | 0 - NO AUTOMATION    3 - CONDITIONAL AUTOMATION    9 - OTHER/UNKNOWN<br>1 - DRIVER ASSISTANCE    4 - HIGH AUTOMATION  |                                 |                                   |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
| <b>AUTONOMOUS MODE LEVEL</b><br>0             | 1 - YES    2 - NO    9 - OTHER / UNKNOWN  |                                 |                                   |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
| <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 |  |                            |                |                          |                            |  |
| 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               |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |
| <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  |                                 |                                   |                      |   |                        |                         |                   |                      |                |                                  |                                 |                                   |                      |  |                            |                |                       |  |                      |                 |                     |                     |  |                            |                |                          |                            |  |

|   |   |  |   |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
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| <b>NON-MOTORIST LOCATION</b><br>5       | <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 |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| 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  |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |
| <b>ACTION</b><br>5                      | <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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| 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                      |   |  |   |  |                                     |                                 |  |   |  |                                       |                                  |                                  |                                      |                            |                          |                       |                                    |  |  |                   |                        |                 |                                     |  |                            |                       |                          |                      |  |                     |                      |  |                         |  |                    |                   |  |  |  |  |                           |  |  |  |

|   |  |                                  |                                      |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
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| <b>SEQUENCE OF EVENTS</b>                   | <table border="0"> <tr> <td>1 - OVERTURN/ROLLOVER</td> <td>7 - SEPARATION OF UNITS</td> <td>12 - DOWNHILL RUNAWAY</td> <td>19 - ANIMAL - OTHER</td> <td>23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE</td> </tr> <tr> <td>2 - FIRE/EXPLOSION</td> <td>8 - RAN OFF ROAD RIGHT</td> <td>13 - OTHER NON-COLLISION</td> <td>20 - MOTOR VEHICLE IN TRANSPORT</td> <td>24 - OTHER MOVABLE OBJECT</td> </tr> <tr> <td>3 - IMMERSION</td> <td>9 - RAN OFF ROAD LEFT</td> <td>14 - PEDESTRIAN</td> <td>21 - PARKED MOTOR VEHICLE</td> <td></td> </tr> <tr> <td>4 - JACKKNIFE</td> <td>10 - CROSS MEDIAN</td> <td>15 - PEDALCYCLE</td> <td>22 - WORK ZONE MAINTENANCE EQUIPMENT</td> <td></td> </tr> <tr> <td>5 - CARGO / EQUIPMENT LOSS OR SHIFT</td> <td>11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL</td> <td>16 - RAILWAY VEHICLE</td> <td></td> <td></td> </tr> <tr> <td>6 - EQUIPMENT FAILURE</td> <td></td> <td>17 - ANIMAL - FARM</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>18 - ANIMAL - DEER</td> <td></td> <td></td> </tr> </table> |                                  |                                      |   | 1 - OVERTURN/ROLLOVER | 7 - SEPARATION OF UNITS | 12 - DOWNHILL RUNAWAY | 19 - ANIMAL - OTHER | 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE | 2 - FIRE/EXPLOSION | 8 - RAN OFF ROAD RIGHT | 13 - OTHER NON-COLLISION | 20 - MOTOR VEHICLE IN TRANSPORT | 24 - OTHER MOVABLE OBJECT | 3 - IMMERSION | 9 - RAN OFF ROAD LEFT | 14 - PEDESTRIAN | 21 - PARKED MOTOR VEHICLE |  | 4 - JACKKNIFE | 10 - CROSS MEDIAN | 15 - PEDALCYCLE | 22 - WORK ZONE MAINTENANCE EQUIPMENT |  | 5 - CARGO / EQUIPMENT LOSS OR SHIFT | 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL | 16 - RAILWAY VEHICLE |  |  | 6 - EQUIPMENT FAILURE |  | 17 - ANIMAL - FARM |  |  |  |  | 18 - ANIMAL - DEER |  |  |
| 1 - OVERTURN/ROLLOVER                       | 7 - SEPARATION OF UNITS  | 12 - DOWNHILL RUNAWAY            | 19 - ANIMAL - OTHER                  | 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 2 - FIRE/EXPLOSION                          | 8 - RAN OFF ROAD RIGHT   | 13 - OTHER NON-COLLISION         | 20 - MOTOR VEHICLE IN TRANSPORT      | 24 - OTHER MOVABLE OBJECT   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 3 - IMMERSION                               | 9 - RAN OFF ROAD LEFT  | 14 - PEDESTRIAN                  | 21 - PARKED MOTOR VEHICLE            |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 4 - JACKKNIFE                               | 10 - CROSS MEDIAN  | 15 - PEDALCYCLE                  | 22 - WORK ZONE MAINTENANCE EQUIPMENT |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 5 - CARGO / EQUIPMENT LOSS OR SHIFT         | 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL   | 16 - RAILWAY VEHICLE             |                                      |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 6 - EQUIPMENT FAILURE                       |  | 17 - ANIMAL - FARM               |                                      |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
|   |  | 18 - ANIMAL - DEER               |                                      |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| <b>FIRST HARMFUL EVENT</b><br>1             | <b>MOST HARMFUL EVENT</b><br>1   |                                  |                                      |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| <b>COLLISION WITH FIXED OBJECT - STRUCK</b> |  |                                  |                                      |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 25 - IMPACT ATTENUATOR / CRASH CUSHION      | 31 - GUARDRAIL END   | 38 - OVERHEAD SIGN POST          | 45 - EMBANKMENT                      | 52 - BUILDING   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 26 - BRIDGE OVERHEAD STRUCTURE              | 32 - PORTABLE BARRIER  | 39 - LIGHT / LUMINARIES SUPPORT  | 46 - FENCE                           | 53 - TUNNEL   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 27 - BRIDGE PIER OR ABUTMENT                | 33 - MEDIAN CABLE BARRIER  | 40 - UTILITY POLE                | 47 - MAILBOX                         | 54 - OTHER FIXED OBJECT   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 28 - BRIDGE PARAPET                         | 34 - MEDIAN GUARDRAIL BARRIER  | 41 - OTHER POST, POLE OR SUPPORT | 48 - TREE                            | 99 - OTHER / UNKNOWN  |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 29 - BRIDGE RAIL                            | 35 - MEDIAN CONCRETE BARRIER   | 42 - CULVERT                     | 49 - FIRE HYDRANT                    |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
| 30 - GUARDRAIL FACE                         | 36 - MEDIAN OTHER BARRIER  | 43 - CURB                        | 50 - WORK ZONE MAINTENANCE EQUIPMENT |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |
|   | 37 - TRAFFIC SIGN POST   | 44 - DITCH                       | 51 - WALL                            |   |                       |                         |                       |                     |   |                    |                        |                          |                                 |                           |               |                       |                 |                           |  |               |                   |                 |                                      |  |                                     |  |                      |  |  |                       |  |                    |  |  |  |  |                    |  |  |

**LOCAL REPORT NUMBER**  
2023000001722

**DAMAGE**

**DAMAGE SCALE**

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

4

**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

11

13 - TOP

**TRAFFIC**

|   |   |
|---|---|
| <b>TRAFFICWAY FLOW</b><br>1 - ONE-WAY<br>2 - TWO-WAY<br>2 | <b>TRAFFIC CONTROL</b><br>1 - ROUNDABOUT    4 - STOP SIGN<br>2 - SIGNAL    5 - YIELD SIGN<br>3 - FLASHER    6 - NO CONTROL<br>6 |
|---|---|

**# OF THROUGH LANES ON ROAD**  
2

**RAIL GRADE CROSSING**  
1 - NOT INVOLVED  
2 - INVOLVED-ACTIVE CROSSING  
3 - INVOLVED-PASSIVE CROSSING  
1

**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

|                           |   |
|---------------------------|---|
| <b>UNIT SPEED</b><br>55   | <b>DETECTED SPEED</b><br>1 - STATED / ESTIMATED SPEED |
| <b>POSTED SPEED</b><br>55 | 2 - CALCULATED / EDR<br>3 - UNDETERMINED              |

# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
2023000001722

|  |   |  |  |   |   |   |                              |                           |                        |                        |
|--|---|--|--|---|---|---|------------------------------|---------------------------|------------------------|------------------------|
| <b>UNIT #</b><br>1   | <b>NAME: LAST, FIRST, MIDDLE</b><br>SHAFFER, NEAL, GORDON |  |  |   | <b>DATE OF BIRTH</b><br>06/02/1945            |   | <b>AGE</b><br>78             | <b>GENDER</b><br>M        |                        |                        |
| <b>ADDRESS: STREET, CITY, STATE, ZIP</b><br>5025 WEST JEFFERSON-KIOUSVILLE RD, LONDON, OH, 43140 |   |  |  |   | <b>CONTACT PHONE - INCLUDE AREA CODE</b>      |   |                              |                           |                        |                        |
| <b>INJURIES</b><br>3   | <b>INJURED TAKEN BY</b><br>2                              | <b>EMS AGENCY (NAME)</b><br>JEFFERSON TOWNSHIP EMS | <b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b><br>MT CARMEL GROVE CITY MEDICAL |   | <b>SAFETY EQUIPMENT USED</b><br>3             | <input type="checkbox"/> DOT-COMPLIANT<br><input checked="" type="checkbox"/> MC HELMET | <b>SEATING POSITION</b><br>1 | <b>AIR BAG USAGE</b><br>2 | <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><br>1   | <b>ENDORSEMENT</b>  | <b>RESTRICTION</b> SELECT UP TO 3                  | <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>    |                        |
|  |   |  |  |   |   | STATUS  |                              | TYPE                      |                        | RESULTS SELECT UP TO 4 |
|  |   |  |  |   |   | 1   |                              | 1                         |                        |                        |

|  |                                  |                                   |  |   |   |  |                         |                      |                        |                        |
|--|----------------------------------|-----------------------------------|--|---|---|--|-------------------------|----------------------|------------------------|------------------------|
| <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</b> SELECT UP TO 3 | <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>    |                        |
|  |                                  |                                   |  |   |   | STATUS   |                         | TYPE                 |                        | RESULTS SELECT UP TO 4 |
|  |                                  |                                   |  |   |   |  |                         |                      |                        |                        |

|  |                                  |                                   |  |   |   |  |                         |                      |                        |                        |
|--|----------------------------------|-----------------------------------|--|---|---|--|-------------------------|----------------------|------------------------|------------------------|
| <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</b> SELECT UP TO 3 | <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>    |                        |
|  |                                  |                                   |  |   |   | STATUS   |                         | TYPE                 |                        | RESULTS SELECT UP TO 4 |
|  |                                  |                                   |  |   |   |  |                         |                      |                        |                        |

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

# OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER  
2023000001722

|                      |  |   |  |                              |   |  |                           |                      |                     |  |
|----------------------|--|---|--|------------------------------|---|--|---------------------------|----------------------|---------------------|--|
| <b>OCCUPANT</b>      | <b>UNIT #</b><br>1   | <b>NAME:</b> LAST, FIRST, MIDDLE<br>SHAFFER, BEVERLY, ANN |  |                              |   | <b>DATE OF BIRTH</b><br>06/11/1944       |                           | <b>AGE</b><br>79     | <b>GENDER</b><br>F  |  |
|                      | <b>ADDRESS:</b> STREET, CITY, STATE, ZIP<br>5025 WEST JEFFERSON-KIOUSVILLE RD, LONDON, OH, 43140 |   |  |                              |   | <b>CONTACT PHONE</b> - INCLUDE AREA CODE |                           |                      |                     |  |
| <b>INJURIES</b><br>3 | <b>INJURED TAKEN BY</b><br>[ 2 ]   | <b>EMS AGENCY (NAME)</b><br>JEFFERSON TOWNSHIP EMS        | <b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b><br>MT CARMEL GROVE CITY MEDICAL | <b>SAFETY EQUIPMENT</b><br>4 | <input type="checkbox"/> <b>DOT-COMPLIANT MC HELMET</b> | <b>SEATING POSITION</b><br>4             | <b>AIR BAG USAGE</b><br>2 | <b>EJECTION</b><br>1 | <b>TRAPPED</b><br>1 |  |

|                 |  |                                  |  |                         |   |  |                      |                 |                |  |
|-----------------|--|----------------------------------|--|-------------------------|---|--|----------------------|-----------------|----------------|--|
| <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"/> <b>DOT-COMPLIANT MC HELMET</b> | <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"/> <b>DOT-COMPLIANT MC HELMET</b> | <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"/> <b>DOT-COMPLIANT MC HELMET</b> | <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 |
| <b>INJURED TAKEN BY</b>  |   |  | <b>EJECTION</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   |
| <b>GENDER</b>  |   |  | <b>TRAPPED</b>  |
| 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 |            |               |  |

|                |  |  |  |  |                      |  |            |               |  |
|----------------|--|--|--|--|----------------------|--|------------|---------------|--|
| <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 |            |               |  |