OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER: 14-273
CRASH SEVERITY: 2 (1 - FATAL, 2 - SERIOUS INJURY, 3 - PDO)
HIT/SKIP: (1 - SOLVED, 2 - UNSOLVED)

PHOTOS TAKEN: ☑ OH-2 OH-1P OH-3 OTHER
PDO UNDER STATE REPORTABLE DOLLAR AMOUNT
PRIVATE PROPERTY
REPORTING AGENCY NCIC: 0803
REPORTING AGENCY NAME: Lebanon Police Department
NUMBER OF UNITS: 2
UNIT IN ERROR: 01 (98 - ANIMAL, 99 - UNKNOWN)

COUNTY: 83
CITY ☑ / VILLAGE / TOWNSHIP: Lebanon
CRASH DATE: 08/27/2014
TIME OF CRASH: 1501
DAY OF WEEK: WED

DEGREES / MINUTES / SECONDS
LATITUDE: ° ′ ″
LONGITUDE: ° ′ ″
DECIMAL DEGREES
LATITUDE: 39.428546
LONGITUDE: -84.215001

ROADWAY DIVISION: ☐ DIVIDED ☑ UNDIVIDED
DIVIDED LANE DIRECTION OF TRAVEL: N - NORTHBOUND S - SOUTHBOUND E - EASTBOUND W - WESTBOUND
NUMBER OF THRU LANES: 2
ROAD TYPES OR MILEPOST: AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

LOCATION ROUTE TYPE:
LOCATION ROUTE NUMBER:
LOC PREFIX: N,S, E,W
LOCATION ROAD NAME: Keever
LOCATION ROAD TYPE: AV
ROUTE TYPES: IR - INTERSTATE ROUTE (INC. TURNPIKE); US - US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

DISTANCE FROM REFERENCE: ☐ MILES ☐ FEET ☐ YARDS
DIR FROM REF: S (N,S, E,W)
REFERENCE ROUTE TYPE:
REFERENCE ROUTE NUMBER:
REF PREFIX: W (N,S, E,W)
REFERENCE NAME (ROAD, MILEPOST, HOUSE #): Orchard
REFERENCE ROAD TYPE: AV

REFERENCE POINT USED: 1 (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE NUMBER)
CRASH LOCATION: 01 (01 - NOT AN INTERSECTION; 02 - FOUR-WAY INTERSECTION; 03 - T-INTERSECTION; 04 - Y-INTERSECTION; 05 - TRAFFIC CIRCLE/ROUNDABOUT; 06 - FIVE-POINT, OR MORE; 07 - ON RAMP; 08 - OFF RAMP; 09 - CROSSOVER; 10 - DRIVEWAY/ALLEY ACCESS; 11 - RAILWAY GRADE CROSSING; 12 - SHARED-USE PATHS OR TRAILS; 99 - UNKNOWN)
☐ INTERSECTION RELATED
LOCATION OF FIRST HARMFUL EVENT: 1 (1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFICWAY; 9 - UNKNOWN)

ROAD CONTOUR: 1 (1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - UNKNOWN)
ROAD CONDITIONS: PRIMARY 01; SECONDARY
(01 - DRY; 02 - WET; 03 - SNOW; 04 - ICE; 05 - SAND, MUD, DIRT, OIL, GRAVEL; 06 - WATER (STANDING, MOVING); 07 - SLUSH; 08 - DEBRIS*; 09 - RUT, HOLES, BUMPS, UNEVEN PAVEMENT*; 10 - OTHER; 99 - UNKNOWN)
* SECONDARY CONDITION ONLY

MANNER OF CRASH COLLISION/IMPACT: 1 (1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT; 2 - REAR-END; 3 - HEAD-ON; 4 - REAR-TO-REAR; 5 - BACKING; 6 - ANGLE; 7 - SIDESWIPE, SAME DIRECTION; 8 - SIDESWIPE, OPPOSITE DIRECTION; 9 - UNKNOWN)
WEATHER: 1 (1 - CLEAR; 2 - CLOUDY; 3 - FOG, SMOG, SMOKE; 4 - RAIN; 5 - SLEET, HAIL; 6 - SNOW; 7 - SEVERE CROSSWINDS; 8 - BLOWING SAND, SOIL, DIRT, SNOW; 9 - OTHER/UNKNOWN)

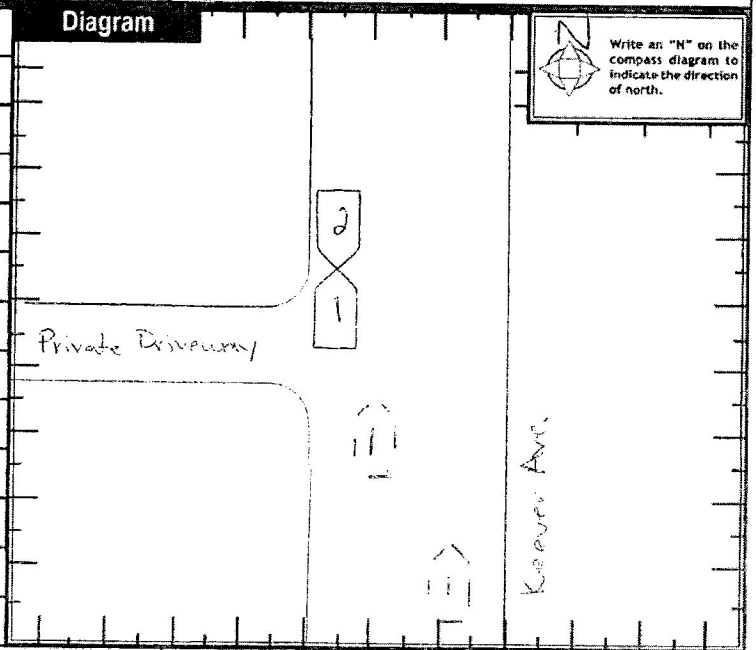
ROAD SURFACE: 2 (1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 6 - OTHER)
LIGHT CONDITIONS: PRIMARY 1; SECONDARY
(1 - DAYLIGHT; 2 - DAWN; 3 - DUSK; 4 - DARK - LIGHTED ROADWAY; 5 - DARK - ROADWAY NOT LIGHTED; 6 - DARK - UNKNOWN ROADWAY LIGHTING; 7 - GLARE*; 8 - OTHER; 9 - UNKNOWN)
* SECONDARY CONDITION ONLY
☐ SCHOOL ZONE RELATED
SCHOOL BUS RELATED: ☐ YES, SCHOOL BUS DIRECTLY INVOLVED ☐ YES, SCHOOL BUS INDIRECTLY INVOLVED

☐ WORK ZONE RELATED
☐ WORKERS PRESENT
☐ LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE)
☐ LAW ENFORCEMENT PRESENT (VEHICLE ONLY)
TYPE OF WORK ZONE: 1 - LANE CLOSURE; 2 - LANE SHIFT/CROSSOVER; 3 - WORK ON SHOULDER OR MEDIAN; 4 - INTERMITTENT OR MOVING WORK; 5 - OTHER
LOCATION OF CRASH IN WORK ZONE: 1 - BEFORE THE FIRST WORK ZONE WARNING SIGN; 2 - ADVANCE WARNING AREA; 3 - TRANSITION AREA; 4 - ACTIVITY AREA; 5 - TERMINATION AREA

NARRATIVE

Unit 2 was parked with no occupants along the side of Keever Avenue facing southbound. Unit 1 was traveling northbound on Keever Avenue. The driver of Unit 1 stated she dropped her phone, ~~reached down to retrieve it, and struck Unit 2 head on.~~ The driver of Unit 1 then walked home and called the police department. The driver of Unit 1 had some minor injuries, however, refused EMS. The driver of Unit 1 was issued a citation for Failure to Control in violation of ORD. 331.38.

DIAGRAM



REPORT TAKEN BY: ☑ POLICE AGENCY ☐ MOTORIST ☐ SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

DATE CRASH REPORTED	TIME CRASH REPORTED	DISPATCH TIME	ARRIVAL TIME	TIME CLEARED	OTHER INVESTIGATION TIME	TOTAL MINUTES
08/27/2014	1501	1504	1510	1551	25	66

OFFICER'S NAME: Ptl. C. Brock
OFFICER'S BADGE NUMBER: 126
CHECKED BY:
PAGE: of

HSY7001 OH1 (REV 01/12)

OHIO DEPARTMENT OF PUBLIC SAFETY — UNIT

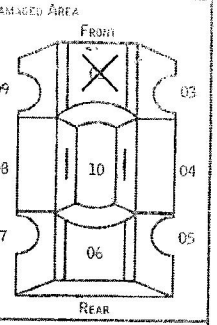
LOCAL REPORT NUMBER: 14-273

UNIT NUMBER	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE NUMBER - INCL. AREA CODE (☐ SAME AS DRIVER)	DAMAGE SCALE	DAMAGED AREA
01	Marcum, Kenny	(513) 674-8426	4	

OWNER ADDRESS: CITY, STATE, ZIP (☐ SAME AS DRIVER)

301 W. Park Ave. Lebanon, OH 45036

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



LP STATE	LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	# OCCUPANTS
OH	FWU 9271	JTKDE3B78A0318053	01

VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	VEHICLE COLOR
2010	Toyota/Scion	TC	Purple

☑ PROOF OF INSURANCE SHOWN	INSURANCE COMPANY	POLICY NUMBER	TOWED BY
	Allstate	980404049	Lebanon Towing

CARRIER NAME, ADDRESS, CITY, STATE, ZIP

CARRIER PHONE- INCLUDE AREA CODE

US DOT

HM PLACARD ID NO.

HM CLASS NUMBER

VEHICLE WEIGHT GVWR/GCWR: 1 - LESS THAN OR EQUAL TO 10K LBS; 2 - 10,001 TO 26,000 LBS; 3 - MORE THAN 26,000 LBS.

☐ HAZARDOUS MATERIAL RELEASED

CARGO BODY TYPE: 01 - NO CARGO BODY TYPE/NOT APPLICABLE; 02 - BUS/VAN (9-15 SEATS, INC DRIVER); 03 - BUS (16+ SEATS, INC DRIVER); 04 - VEHICLE TOWING ANOTHER VEHICLE; 05 - LOGGING; 06 - INTERMODAL CONTAINER CHASSIS; 07 - CARGO VAN/ENCLOSED BOX; 08 - GRAIN, CHIPS, GRAVEL; 09 - POLE; 10 - CARGO TANK; 11 - FLAT BED; 12 - DUMP; 13 - CONCRETE MIXER; 14 - AUTO TRANSPORTER; 15 - GARBAGE/REFUSE; 99 - OTHER/UNKNOWN

TRAFFICWAY DESCRIPTION: 1 - TWO-WAY, NOT DIVIDED; 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE; 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS >4 FT.) MEDIAN; 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER; 5 - ONE-WAY TRAFFICWAY

☐ HIT / SKIP UNIT

NON-MOTORIST LOCATION PRIOR TO IMPACT: 01 - INTERSECTION - MARKED CROSSWALK; 02 - INTERSECTION - NO CROSSWALK; 03 - INTERSECTION - OTHER; 04 - MIDBLOCK - MARKED CROSSWALK; 05 - TRAVEL LANE - OTHER LOCATION; 06 - BICYCLE LANE; 07 - SHOULDER/ROADSIDE; 08 - SIDEWALK; 09 - MEDIAN/CROSSING ISLAND; 10 - DRIVEWAY ACCESS; 11 - SHARED-USE PATH OR TRAIL; 12 - NON-TRAFFICWAY AREA; 99 - OTHER/UNKNOWN

TYPE OF USE: 1 - PERSONAL; 2 - COMMERCIAL; 3 - GOVERNMENT

☐ IN EMERGENCY RESPONSE

UNIT TYPE: 02

99 - UNKNOWN OR HIT / SKIP

PASSENGER VEHICLES (LESS THAN 9 PASSENGERS): 01 - SUB-COMPACT; 02 - COMPACT; 03 - MID SIZE; 04 - FULL SIZE; 05 - MINIVAN; 06 - SPORT UTILITY VEHICLE; 07 - PICKUP; 08 - VAN; 09 - MOTORCYCLE; 10 - MOTORIZED BICYCLE; 11 - SNOWMOBILE/ATV; 12 - OTHER PASSENGER VEHICLE

MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS: 13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES; 14 - SINGLE UNIT TRUCK; 3+ AXLES; 15 - SINGLE UNIT TRUCK / TRAILER; 16 - TRUCK/TRACTOR (BOBTAIL); 17 - TRACTOR/SEMI-TRAILER; 18 - TRACTOR/DOUBLE; 19 - TRACTOR/TRIPLES; 20 - OTHER MED/HEAVY VEHICLE

☐ HAS HM PLACARD

BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER): 21 - BUS/VAN (9-15 SEATS, INC DRIVER); 22 - BUS (16+ SEATS, INC DRIVER)

NON-MOTORIST: 23 - ANIMAL WITH RIDER; 24 - ANIMAL WITH BUGGY, WAGON, SURREY; 25 - BICYCLE/PEDACYCLIST; 26 - PEDESTRIAN/SKATER; 27 - OTHER NON-MOTORIST

SPECIAL FUNCTION: 01

01 - NONE; 02 - TAXI; 03 - RENTAL TRUCK (OVER 10K LBS); 04 - BUS - SCHOOL (PUBLIC OR PRIVATE); 05 - BUS - TRANSIT; 06 - BUS - CHARTER; 07 - BUS - SHUTTLE; 08 - BUS - OTHER; 09 - AMBULANCE; 10 - FIRE; 11 - HIGHWAY/MAINTENANCE; 12 - MILITARY; 13 - POLICE; 14 - PUBLIC UTILITY; 15 - OTHER GOVERNMENT; 16 - CONSTRUCTION EQUIP.; 17 - FARM VEHICLE; 18 - FARM EQUIPMENT; 19 - MOTORHOME; 20 - GOLF CART; 21 - TRAIN; 22 - OTHER (EXPLAIN IN NARRATIVE)

MOST DAMAGED AREA: 02

IMPACT AREA: 02

01 - NONE; 02 - CENTER FRONT; 03 - RIGHT FRONT; 04 - RIGHT SIDE; 05 - RIGHT REAR; 06 - REAR CENTER; 07 - LEFT REAR; 08 - LEFT SIDE; 09 - LEFT FRONT; 10 - TOP AND WINDOWS; 11 - UNDERCARRIAGE; 12 - LOAD/TRAILER; 13 - TOTAL(ALL AREAS); 14 - OTHER; 99 - UNKNOWN

ACTION: 3

1 - NON-CONTACT; 2 - NON-COLLISION; 3 - STRIKING; 4 - STRUCK; 5 - STRIKING/STRUCK; 9 - UNKNOWN

PRE-CRASH ACTIONS: 01

99 - UNKNOWN

MOTORIST: 01 - STRAIGHT AHEAD; 02 - BACKING; 03 - CHANGING LANES; 04 - OVERTAKING/PASSING; 05 - MAKING RIGHT TURN; 06 - MAKING LEFT TURN; 07 - MAKING U-TURN; 08 - ENTERING TRAFFIC LANE; 09 - LEAVING TRAFFIC LANE; 10 - PARKED; 11 - SLOWING OR STOPPED IN TRAFFIC; 12 - DRIVERLESS; 13 - NEGOTIATING A CURVE; 14 - OTHER MOTORIST ACTION

NON-MOTORIST: 15 - ENTERING OR CROSSING SPECIFIED LOCATION; 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING; 17 - WORKING; 18 - PUSHING VEHICLE; 19 - APPROACHING OR LEAVING VEHICLE; 20 - STANDING; 21 - OTHER NON-MOTORIST ACTION

CONTRIBUTING CIRCUMSTANCES

PRIMARY: 17

SECONDARY:

99 - UNKNOWN

MOTORIST: 01 - NONE; 02 - FAILURE TO YIELD; 03 - RAN RED LIGHT; 04 - RAN STOP SIGN; 05 - EXCEEDED SPEED LIMIT; 06 - UNSAFE SPEED; 07 - IMPROPER TURN; 08 - LEFT OF CENTER; 09 - FOLLOWED TOO CLOSELY/ACDA; 10 - IMPROPER LANE CHANGE /PASSING/OFF ROAD; 11 - IMPROPER BACKING; 12 - IMPROPER START FROM PARKED POSITION; 13 - STOPPED OR PARKED ILLEGALLY; 14 - OPERATING VEHICLE IN NEGLIGENT MANNER; 15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS); 16 - WRONG SIDE/WRONG WAY; 17 - FAILURE TO CONTROL; 18 - VISION OBSTRUCTION; 19 - OPERATING DEFECTIVE EQUIPMENT; 20 - LOAD SHIFTING/FALLING/SPILLING; 21 - OTHER IMPROPER ACTION

NON-MOTORIST: 22 - NONE; 23 - IMPROPER CROSSING; 24 - DARTING; 25 - LYING AND/OR ILLEGALLY IN ROADWAY; 26 - FAILURE TO YIELD RIGHT OF WAY; 27 - NOT VISIBLE (DARK CLOTHING); 28 - INATTENTIVE; 29 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER; 30 - WRONG SIDE OF THE ROAD; 31 - OTHER NON-MOTORIST ACTION

VEHICLE DEFECTS: 01 - TURN SIGNALS; 02 - HEAD LAMPS; 03 - TAIL LAMPS; 04 - BRAKES; 05 - STEERING; 06 - TIRE BLOWOUT; 07 - WORN OR SLICK TIRES; 08 - TRAILER EQUIPMENT DEFECTIVE; 09 - MOTOR TROUBLE; 10 - DISABLED FROM PRIOR ACCIDENT; 11 - OTHER DEFECTS

SEQUENCE OF EVENTS

1	2	3	4	5	6
21					

FIRST HARMFUL EVENT: 1

MOST HARMFUL EVENT: 1

99 - UNKNOWN

NON-COLLISION EVENTS: 01 - OVERTURN/ROLLOVER; 02 - FIRE/EXPLOSION; 03 - IMMERSION; 04 - JACKKNIFE; 05 - CARGO/EQUIPMENT LOSS OR SHIFT; 06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC); 07 - SEPARATION OF UNITS; 08 - RAN OFF ROAD RIGHT; 09 - RAN OFF ROAD LEFT; 10 - CROSS MEDIAN; 11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL; 12 - DOWNHILL RUNAWAY; 13 - OTHER NON-COLLISION

COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED: 14 - PEDESTRIAN; 15 - PEDALCYCLE; 16 - RAILWAY VEHICLE (TRAIN, ENGINE); 17 - ANIMAL - FARM; 18 - ANIMAL - DEER; 19 - ANIMAL - OTHER; 20 - MOTOR VEHICLE IN TRANSPORT; 21 - PARKED MOTOR VEHICLE; 22 - WORK ZONE MAINTENANCE EQUIPMENT; 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE; 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT: 25 - IMPACT ATTENUATOR/CRASH CUSHION; 26 - BRIDGE OVERHEAD STRUCTURE; 27 - BRIDGE PIER OR ABUTMENT; 28 - BRIDGE PARAPET; 29 - BRIDGE RAIL; 30 - GUARDRAIL FACE; 31 - GUARDRAIL END; 32 - PORTABLE BARRIER; 33 - MEDIAN CABLE BARRIER; 34 - MEDIAN GUARDRAIL BARRIER; 35 - MEDIAN CONCRETE BARRIER; 36 - MEDIAN OTHER BARRIER; 37 - TRAFFIC SIGN POST; 38 - OVERHEAD SIGN POST; 39 - LIGHT/LUMINARIES SUPPORT; 40 - UTILITY POLE; 41 - OTHER POST, POLE OR SUPPORT; 42 - CULVERT; 43 - CURB; 44 - DITCH; 45 - EMBANKMENT; 46 - FENCE; 47 - MAILBOX; 48 - TREE; 49 - FIRE HYDRANT; 50 - WORK ZONE MAINTENANCE EQUIPMENT; 51 - WALL, BUILDING, TUNNEL; 52 - OTHER FIXED OBJECT

UNIT SPEED

☐ STATED ☐ ESTIMATED

POSTED SPEED: 25

TRAFFIC CONTROL: 01

01 - NO CONTROLS; 02 - STOP SIGN; 03 - YIELD SIGN; 04 - TRAFFIC SIGNAL; 05 - TRAFFIC FLASHERS; 06 - SCHOOL ZONE; 07 - RAILROAD CROSSBUCKS; 08 - RAILROAD FLASHERS; 09 - RAILROAD GATES; 10 - CONSTRUCTION BARRICADE; 11 - PERSON (FLAGGER, OFFICER); 12 - PAVEMENT MARKINGS; 13 - CROSSWALK LINES; 14 - WALK/DON'T WALK; 15 - OTHER; 16 - NOT REPORTED

UNIT DIRECTION: FROM 2 TO 1

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

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

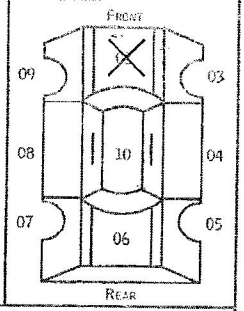
Local Report Number: 16-273

Unit Number	Owner Name: Last, First, Middle (☐ Same As Driver)	Owner Phone Number - Inc. Area Code (☐ Same As Driver)	Damage Scale	Damaged Area
02	Perrin, Alejandra		3	

Owner Address: City, State, Zip (☐ Same As Driver)

403 Keever Ave. Lebanon, OH 45036

1 - None; 2 - Minor; 3 - Functional; 4 - Disabling; 9 - Unknown



LP State	License Plate Number	Vehicle Identification Number	# Occupants
OH	SP711	1C6RR7FTOES179511	00

Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Color
2014	Dodge	Ram	Black

Proof of Insurance Shown	Insurance Company	Policy Number	Towed By
☑	USAA	021190654C	

Carrier Name, Address, City, State, Zip

Carrier Phone- include area code

US DOT

HM Placard ID No.

HM Class Number

Vehicle Weight GVWR/GCWR: 1 - Less Than or Equal to 10K Lbs; 2 - 10,001 to 26,000 Lbs; 3 - More Than 26,000 Lbs. → 1

☐ Hazardous Material Released

Cargo Body Type: 01 - No Cargo Body Type/Not Applicable; 02 - Bus/Van (9-15 Seats, Inc Driver); 03 - Bus (16+ Seats, Inc Driver); 04 - Vehicle Towing Another Vehicle; 05 - Logging; 06 - Intermodal Container Chassis; 07 - Cargo Van/Enclosed Box; 08 - Grain, Chips, Gravel; 09 - Pole; 10 - Cargo Tank; 11 - Flat Bed; 12 - Dump; 13 - Concrete Mixer; 14 - Auto Transporter; 15 - Garbage/Refuse; 99 - Other/Unknown → 01

Trafficway Description: 1 - Two-Way, Not Divided; 2 - Two-Way, Not Divided, Continuous Left Turn Lane; 3 - Two-Way, Divided, Unprotected (Painted or Grass ≥4 Ft.) Median; 4 - Two-Way, Divided, Positive Median Barrier; 5 - One-Way Trafficway → 1

☐ Hit / Skip Unit

Non-Motorist Location Prior to Impact: 01 - Intersection - Marked Crosswalk; 02 - Intersection - No Crosswalk; 03 - Intersection - Other; 04 - Midblock - Marked Crosswalk; 05 - Travel Lane - Other Location; 06 - Bicycle Lane; 07 - Shoulder/Roadside; 08 - Sidewalk; 09 - Median/Crossing Island; 10 - Driveway Access; 11 - Shared-Use Path or Trail; 12 - Non-Trafficway Area; 99 - Other/Unknown

Type of Use: 1 - Personal; 2 - Commercial; 3 - Government → 1

☐ In Emergency Response

Unit Type: 07 (99 - Unknown or Hit/Skip)

Passenger Vehicles (less than 9 passengers): 01 - Sub-Compact; 02 - Compact; 03 - Mid Size; 04 - Full Size; 05 - Minivan; 06 - Sport Utility Vehicle; 07 - Pickup; 08 - Van; 09 - Motorcycle; 10 - Motorized Bicycle; 11 - Snowmobile/ATV; 12 - Other Passenger Vehicle

Med/Heavy Trucks or Combo Units > 10K lbs: 13 - Single Unit Truck or Van 2Axle, 6 Tires; 14 - Single Unit Truck; 3+ Axles; 15 - Single Unit Truck / Trailer; 16 - Truck/Tractor (Bobtail); 17 - Tractor/Semi-Trailer; 18 - Tractor/Double; 19 - Tractor/Triples; 20 - Other Med/Heavy Vehicle

☐ Has HM Placard

Bus/Van/Limo (9 or More Including Driver): 21 - Bus/Van (9-15 Seats, Inc Driver); 22 - Bus (16+ Seats, Inc Driver)

Non-Motorist: 23 - Animal With Rider; 24 - Animal With Buggy, Wagon, Surrey; 25 - Bicycle/Pedacyclist; 26 - Pedestrian/Skater; 27 - Other Non-Motorist

Special Function: 01 - None; 02 - Taxi; 03 - Rental Truck (Over 10K Lbs); 04 - Bus - School (Public or Private); 05 - Bus - Transit; 06 - Bus - Charter; 07 - Bus - Shuttle; 08 - Bus - Other; 09 - Ambulance; 10 - Fire; 11 - Highway/Maintenance; 12 - Military; 13 - Police; 14 - Public Utility; 15 - Other Government; 16 - Construction Equip.; 17 - Farm Vehicle; 18 - Farm Equipment; 19 - Motorhome; 20 - Golf Cart; 21 - Train; 22 - Other (Explain in Narrative) → 01

Most Damaged Area: 02

Impact Area: 02

01 - None; 02 - Center Front; 03 - Right Front; 04 - Right Side; 05 - Right Rear; 06 - Rear Center; 07 - Left Rear; 08 - Left Side; 09 - Left Front; 10 - Top and Windows; 11 - Undercarriage; 12 - Load/Trailer; 13 - Total(All Areas); 14 - Other; 99 - Unknown

Action: 4

1 - Non-Contact; 2 - Non-Collision; 3 - Striking; 4 - Struck; 5 - Striking/Struck; 9 - Unknown

Pre-Crash Actions: 10 (99 - Unknown)

Motorist: 01 - Straight Ahead; 02 - Backing; 03 - Changing Lanes; 04 - Overtaking/Passing; 05 - Making Right Turn; 06 - Making Left Turn; 07 - Making U-Turn; 08 - Entering Traffic Lane; 09 - Leaving Traffic Lane; 10 - Parked; 11 - Slowing or Stopped in Traffic; 12 - Driverless; 13 - Negotiating a Curve; 14 - Other Motorist Action

Non-Motorist: 15 - Entering or Crossing Specified Location; 16 - Walking, Running, Jogging, Playing, Cycling; 17 - Working; 18 - Pushing Vehicle; 19 - Approaching or Leaving Vehicle; 20 - Standing; 21 - Other Non-Motorist Action

Contributing Circumstances

Primary: 01

Secondary:

99 - Unknown

Motorist: 01 - None; 02 - Failure to Yield; 03 - Ran Red Light; 04 - Ran Stop Sign; 05 - Exceeded Speed Limit; 06 - Unsafe Speed; 07 - Improper Turn; 08 - Left of Center; 09 - Followed Too Closely/ACDA; 10 - Improper Lane Change /Passing/Off Road; 11 - Improper Backing; 12 - Improper Start From Parked Position; 13 - Stopped or Parked Illegally; 14 - Operating Vehicle in Negligent Manner; 15 - Swerving to Avoid (Due to External Conditions); 16 - Wrong Side/Wrong Way; 17 - Failure to Control; 18 - Vision Obstruction; 19 - Operating Defective Equipment; 20 - Load Shifting/Falling/Spilling; 21 - Other Improper Action

Non-Motorist: 22 - None; 23 - Improper Crossing; 24 - Darting; 25 - Lying and/or Illegally in Roadway; 26 - Failure to Yield Right of Way; 27 - Not Visible (Dark Clothing); 28 - Inattentive; 29 - Failure to Obey Traffic Signs /Signals/Officer; 30 - Wrong Side of the Road; 31 - Other Non-Motorist Action

Vehicle Defects: 01 - Turn Signals; 02 - Head Lamps; 03 - Tail Lamps; 04 - Brakes; 05 - Steering; 06 - Tire Blowout; 07 - Worn or Slick Tires; 08 - Trailer Equipment Defective; 09 - Motor Trouble; 10 - Disabled From Prior Accident; 11 - Other Defects

Sequence of Events

1	2	3	4	5	6
20					

First Harmful Event: 1 — Most Harmful Event: 1 — 99 - Unknown

Non-Collision Events: 01 - Overturn/Rollover; 02 - Fire/Explosion; 03 - Immersion; 04 - Jackknife; 05 - Cargo/Equipment Loss or Shift; 06 - Equipment Failure (Blown Tire, Brake Failure, etc); 07 - Separation of Units; 08 - Ran Off Road Right; 09 - Ran Off Road Left; 10 - Cross Median; 11 - Cross Center Line Opposite Direction of Travel; 12 - Downhill Runaway; 13 - Other Non-Collision

Collision with Person, Vehicle or Object Not Fixed: 14 - Pedestrian; 15 - Pedacycle; 16 - Railway Vehicle (Train, Engine); 17 - Animal - Farm; 18 - Animal - Deer; 19 - Animal - Other; 20 - Motor Vehicle in Transport; 21 - Parked Motor Vehicle; 22 - Work Zone Maintenance Equipment; 23 - Struck by Falling, Shifting Cargo or Anything Set in Motion by a Motor Vehicle; 24 - Other Movable Object

Collision With Fixed Object: 25 - Impact Attenuator/Crash Cushion; 26 - Bridge Overhead Structure; 27 - Bridge Pier or Abutment; 28 - Bridge Parapet; 29 - Bridge Rail; 30 - Guardrail Face; 31 - Guardrail End; 32 - Portable Barrier; 33 - Median Cable Barrier; 34 - Median Guardrail Barrier; 35 - Median Concrete Barrier; 36 - Median Other Barrier; 37 - Traffic Sign Post; 38 - Overhead Sign Post; 39 - Light/Luminaries Support; 40 - Utility Pole; 41 - Other Post, Pole or Support; 42 - Culvert; 43 - Curb; 44 - Ditch; 45 - Embankment; 46 - Fence; 47 - Mailbox; 48 - Tree; 49 - Fire Hydrant; 50 - Work Zone Maintenance Equipment; 51 - Wall, Building, Tunnel; 52 - Other Fixed Object

Unit Speed: ☐ Stated ☐ Estimated

Posted Speed: 25

Traffic Control: 01 - No Controls; 02 - Stop Sign; 03 - Yield Sign; 04 - Traffic Signal; 05 - Traffic Flashers; 06 - School Zone; 07 - Railroad Crossbucks; 08 - Railroad Flashers; 09 - Railroad Gates; 10 - Construction Barricade; 11 - Person (Flagger, Officer); 12 - Pavement Markings; 13 - Crosswalk Lines; 14 - Walk/Don't Walk; 15 - Other; 16 - Not Reported → 01

Unit Direction: From 1 To 2

1 - North; 2 - South; 3 - East; 4 - West; 5 - Northeast; 6 - Northwest; 7 - Southeast; 8 - Southwest; 9 - Unknown

OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST / OCCUPANT

Local Report Number: 14-1473

MOTORIST/NON-MOTORIST

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
01	Smith, Rachael	08/01/1990	24	E (F = Female, M = Male)

Address, City, State, Zip	Contact Phone - Include Area Code
301 W. Park Ave. Lebanon, OH 45036	(513) 239-0780

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
3	1			04	☐	01	2	1	1

OL State	Operator License Number	OL Class	No Valid OL	M/C End.	Condition	Alcohol/Drug Suspected	Alcohol Test Status	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type
OH	TD649763	4	☐	☐	1	1	1	1	.	1	1

Offense Charged (☒ Local Code)	Offense Description	Citation Number	Hands-Free Device Used	Driver Distracted By
331.38	Failure to Control	66287	☐	2

MOTORIST/NON-MOTORIST

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
				F = Female, M = Male

Address, City, State, Zip	Contact Phone - Include Area Code

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
					☐				

OL State	Operator License Number	OL Class	No Valid OL	M/C End.	Condition	Alcohol/Drug Suspected	Alcohol Test Status	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type
			☐	☐					.		

Offense Charged (☐ Local Code)	Offense Description	Citation Number	Hands-Free Device Used	Driver Distracted By
			☐	

Injuries
1 No Injury / None Reported
2 Possible
3 Non-Incapacitating
4 Incapacitating
5 Fatal

Injured Taken By
1 Not Transported / Treated at Scene
2 EMS
3 Police
4 Other
9 Unknown

Safety Equipment Used

Motorist
01 None Used - Vehicle Occupant
02 Shoulder Belt Only Used
03 Lap Belt Only Used
04 Shoulder and Lap Belt Used
05 Child Restraint System-Forward Facing
06 Child Restraint System-Rear Facing
07 Booster Seat
08 Helmet Used
99 Unknown Safety Equipment

Non-Motorist
09 None Used
10 Helmet Used
11 Protective Pads Used (Elbows, Knees, Etc)
12 Reflective Clothing
13 Lighting
14 Other

Seating Position
01 Front - Left Side (Motorcycle Driver)
02 Front - Middle
03 Front - Right Side
04 Second - Left Side (Motorcycle Passenger)
05 Second - Middle
06 Second - Right Side
07 Third - Left Side (Motorcycle Side Car)
08 Third - Middle
09 Third - Right Side
10 Sleeper Section of Cab (Truck)
11 Passenger in Other Enclosed Cargo Area (Non-Trailing Unit, Such as a Bus, Pick-up with Cap)
12 Passenger in Unenclosed Cargo Area
13 Trailing Unit
14 Riding on Vehicle Exterior (Non-Trailing Unit)
15 Non-Motorist
16 Other
99 Unknown

Air Bag Usage
1 Not Deployed
2 Deployed Front
3 Deployed Side
4 Deployed Both Front/Side
5 Not Applicable
9 Deployment Unknown

Ejection
1 Not Ejected
2 Totally Ejected
3 Partially Ejected
4 Not Applicable

Trapped
1 Not Trapped
2 Extricated by Mechanical Means
3 Extricated by Non-Mechanical Means

Operator License Class
1 Class A
2 Class B
3 Class C
4 Regular Class (Ohio is "D")
5 M/C/Moped Only

Condition
1 Apparently Normal
2 Physical Impairment
3 Emotional (Depressed, Angry, Disturbed)
4 Illness
5 Fell Asleep, Fainted, Fatigued
6 Under the Influence of Medications, Drugs, Alcohol
7 Other

Alcohol/Drug Suspected
1 None
2 Yes - Alcohol Suspected
3 Yes - HBD Not Impaired
4 Yes - Drugs Suspected
5 Yes - Alcohol and Drugs Suspected

Alcohol Test Status
1 None Given
2 Test Refused
3 Test Given, Contaminated Sample/Unusable
4 Test Given, Results Known
5 Test Given, Results Unknown

Alcohol Test Type
1 None
2 Blood
3 Urine
4 Breath
5 Other

Drug Test Status
1 None Given
2 Test Refused
3 Test Given, Contaminated Sample/Unusable
4 Test Given, Results Known
5 Test Given, Results Unknown

Drug Test Type
1 None
2 Blood
3 Urine
4 Other

Driver Distracted By
1 No Distraction Reported
2 Phone
3 Texting/E-mailing
4 Electronic Communication Device
5 Other Electronic Device (Navigation Device, Radio, DVD)
6 Other Inside the Vehicle
7 External Distraction

OCCUPANT

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
				F = Female, M = Male

Address, City, State, Zip	Contact Phone - Include Area Code

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
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OCCUPANT

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
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Address, City, State, Zip	Contact Phone - Include Area Code

Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
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