TRAFFIC CRASH REPORT

OHIO DEPARTMENT OF PUBLIC SAFETY

Local Information

Local Report Number *: 14-425

Crash Severity: 3 (1 - Fatal, 2 - 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 *: 08303

Reporting Agency Name *: Lebanon

Number of Units: 2

Unit in Error: 01 (98 - Animal, 99 - Unknown)

County *: 83

City * / Village * / Township *: City *

City, Village, Township *: Lebanon

Crash Date *: 12092014

Time of Crash: 1613

Day of Week: TUE

Degrees / Minutes / Seconds — Latitude: 0° ' . " Longitude: -0° ' . "

Decimal Degrees — Latitude: 39.438451 Longitude: -84.198569

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[2]: 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[1]

Location Route Number

Loc Prefix: N, S, E, W

Location Road Name: Columbus

Location Road Type[2]: AV

Route Types[1]: 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[1]

Reference Route Number

Ref Prefix: N, S, E, W

Reference Name (Road, Milepost, House #): Summit

Reference Road Type[2]: ST

Reference Point Used: 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: 2
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: 2
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 stopped at the traffic light located on Columbus Avenue at the Summit Street intersection. Unit 1 was immediately behind Unit 2 and failed to stop. Unit 1 struck Unit 2 from behind. ~~I examined the damage sustained by both vehicles which was~~ minor. Both drivers exchanged information while I completed the report.

Diagram

Write an "N" on the compass diagram to indicate the direction of north.

Report Taken By: ☑ Police Agency / Motorist

Supplement (Correction or Addition to an Existing Report Sent to OOPS)

Date Crash Reported: 12092014

Time Crash Reported: 1613

Dispatch Time: 1614

Arrival Time: 1617

Time Cleared: 1630

Other Investigation Time: 20

Total Minutes: 33

Officer's Name *: Ptl. C. Brock

Officer's Badge Number: 126

Checked By: [signature]

Page of

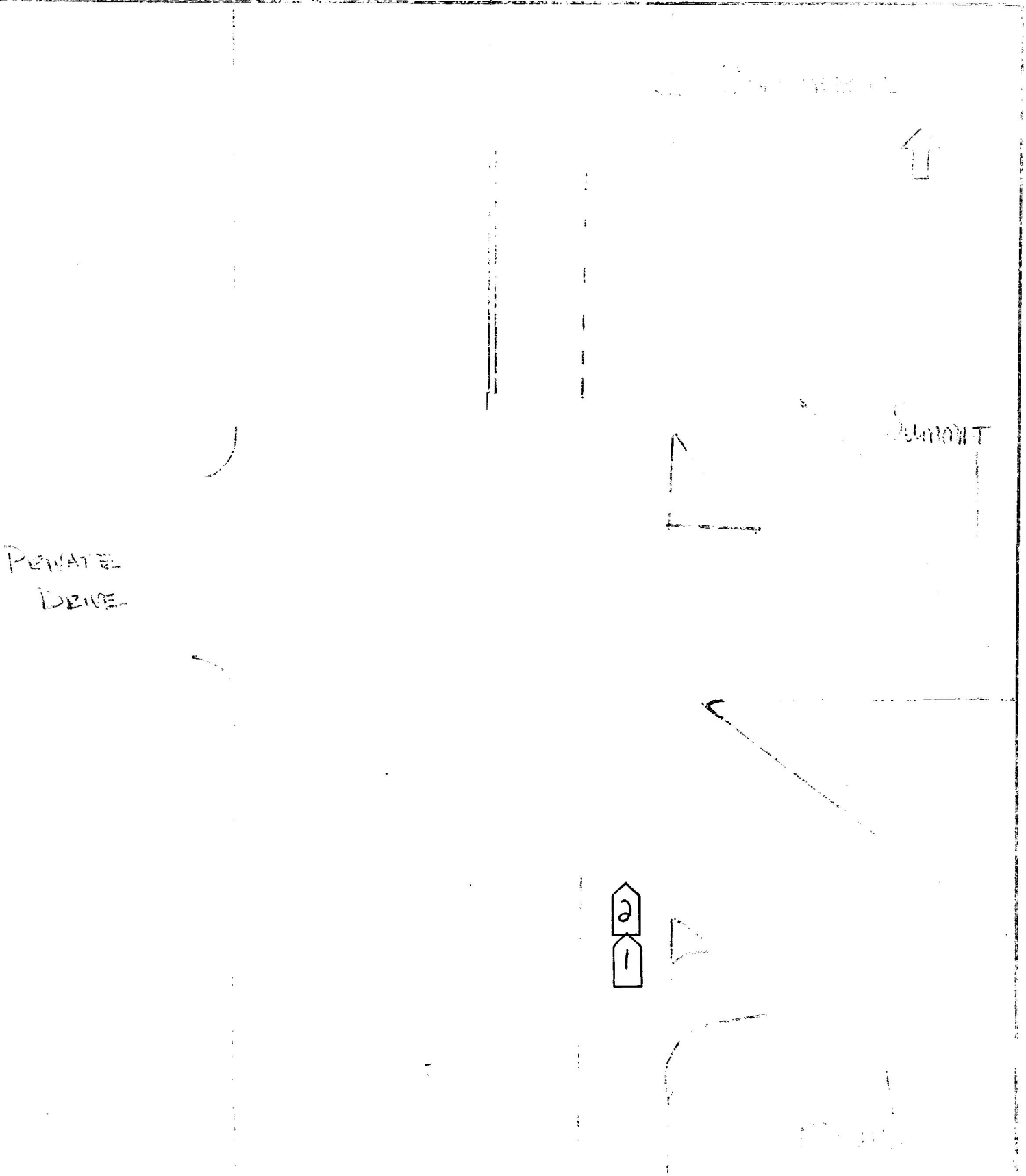
HSY7001 OH1 (Rev 01/12)

2014-1425

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (Rev. 1/2)

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF ACCIDENT
2014-20856	Lebanon PD	12 09 14
IN COUNTY OF Warren	ACCIDENT LOCATION	



OFFICERS SIGNATURE

DH P Brock

BADGE NO.

128

UNIT

Local Report Number: 14-425

Unit Number	Owner Name: Last, First, Middle (☑ Same As Driver)	Owner Phone Number - Inc. Area Code (☑ Same As Driver)	Damage Scale	Damaged Area
01	Blosser, Kristine	(513) 317-8638	2 (1 - None, 2 - Minor, 3 - Functional, 4 - Disabling, 9 - Unknown)	Front, 09, 03, 08, 10, 04, 07, 06, 05, Rear

Owner Address: City, State, Zip (☑ Same As Driver): 6123 SR 350 Oregonia, OH 45054

LP State	License Plate Number	Vehicle Identification Number	# Occupants
OH	FPE 8270	19XFA1F55AE006171	01

Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Color
2010	Honda	Civic	Blue

☑ Proof of Insurance Shown	Insurance Company	Policy Number	Towed By
	Grange	PA1299198-00	

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 (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 (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 (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 (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
- 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

☐ Has HM Placard

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)

Most Damaged 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)

Impact Area: 02

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: 09

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 - 20, 2, 3, 4, 5, 6

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: 35

Traffic Control: 04 (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)

HSY8304 OH1U (Rev 01/12)

UNIT

Local Report Number: 14-425

Unit Number	Owner Name: Last, First, Middle (☐ Same As Driver)	Owner Phone Number - Inc. Area Code (☐ Same As Driver)	Damage Scale	Damaged Area
02	Palmer, Lori	(513) 317-0612	1 - None 2 - Minor 3 - Functional 4 - Disabling 9 - Unknown	Front 02, 09, 03, 08, 10, 04, 07, 05, Rear

Owner Address: City, State, Zip (☐ Same As Driver): 986 Woodcreek Drive Milford, OH 45150

LP State	License Plate Number	Vehicle Identification Number	# Occupants
OH	DWW6398	JT2BG22K6Y0489863	01

Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Color
2000	Toyota	Camry	Silver

☑ Proof of Insurance Shown	Insurance Company	Policy Number	Towed By
	USAA	00647129C71039	

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 - 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

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

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

1 - Personal
2 - Commercial
3 - Government

☐ In Emergency Response

Unit Type: 03

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

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

☐ Has HM Placard

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: 06

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

Impact Area: 06

Action: 4

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

Pre-Crash Actions: 11

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: 20 2: 3: 4: 5: 6:

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: 35

Traffic Control: 04

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

HSY8304 OH1U (Rev 01/12)

MOTORIST / NON-MOTORIST / OCCUPANT

OHIO DEPARTMENT OF PUBLIC SAFETY — EDUCATION • SERVICE • PROTECTION

LOCAL REPORT NUMBER: 14-425

MOTORIST/NON-MOTORIST

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
01	Blosser, Kristine	07 24 1960	54	F (F - Female, M - Male)

Address, City, State, Zip	Contact Phone - Include Area Code
6123 SR 350 Oregonia, OH 45054	(513) 317-8638

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
1	1			04	☐	01	1	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	RP166024	4	☐	☐	1	1	1	1	.	1	1

Offense Charged (☐ Local Code)	Offense Description	Citation Number	Hands-Free Device Used	Driver Distracted By
			☐	1

MOTORIST/NON-MOTORIST

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
02	Palmer, Lori	07 25 1973	41	F (F - Female, M - Male)

Address, City, State, Zip	Contact Phone - Include Area Code
986 Woodcreek Dr. Milford, OH 45150	(513) 317-0612

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
1	1			04	☐	01	1	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	RF435051	4	☐	☐	1	1	1	1	.	1	1

Offense Charged (☐ Local Code)	Offense Description	Citation Number	Hands-Free Device Used	Driver Distracted By
			☐	1

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 - MC/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
					☐				

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
					☐				

HSY8306 OH1M (Rev 01/12)