TRAFFIC CRASH REPORT

OHIO DEPARTMENT OF PUBLIC SAFETY — SAFETY • SERVICE • PROTECTION

LOCAL INFORMATION

LOCAL REPORT NUMBER *: 15-169

CRASH SEVERITY: 2 (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 Police

NUMBER OF UNITS: 02

UNIT IN ERROR: 01 (98 - ANIMAL, 99 - UNKNOWN)

COUNTY *: 83

☒ CITY * ☐ VILLAGE * ☐ TOWNSHIP *

CITY, VILLAGE, TOWNSHIP *: Lebanon

CRASH DATE *: 06/02/2015

TIME OF CRASH: 1616

DAY OF WEEK: THE

DEGREES / MINUTES / SECONDS — LATITUDE: 0 ' " LONGITUDE: 0 ' "

DECIMAL DEGREES — LATITUDE: 39.390642 LONGITUDE: -84.214435

ROADWAY DIVISION: ☒ DIVIDED ☐ UNDIVIDED

DIVIDED LANE DIRECTION OF TRAVEL: S (N - NORTHBOUND, S - SOUTHBOUND, E - EASTBOUND, W - WESTBOUND)

NUMBER OF THRU LANES: 02

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]: SR — LOCATION ROUTE NUMBER: 48 — LOC PREFIX: N,S,E,W — LOCATION ROAD NAME — LOCATION ROAD TYPE [2]

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: 100 ☐ MILES ☐ FEET ☒ YARDS — DIR FROM REF: W (N,S,E,W)

REFERENCE ROUTE TYPE [1] — REFERENCE ROUTE NUMBER — REF PREFIX: N,S,E,W — REFERENCE NAME (ROAD, MILEPOST, HOUSE #): Kingsview — REFERENCE ROAD TYPE [2]: DR

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: 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)

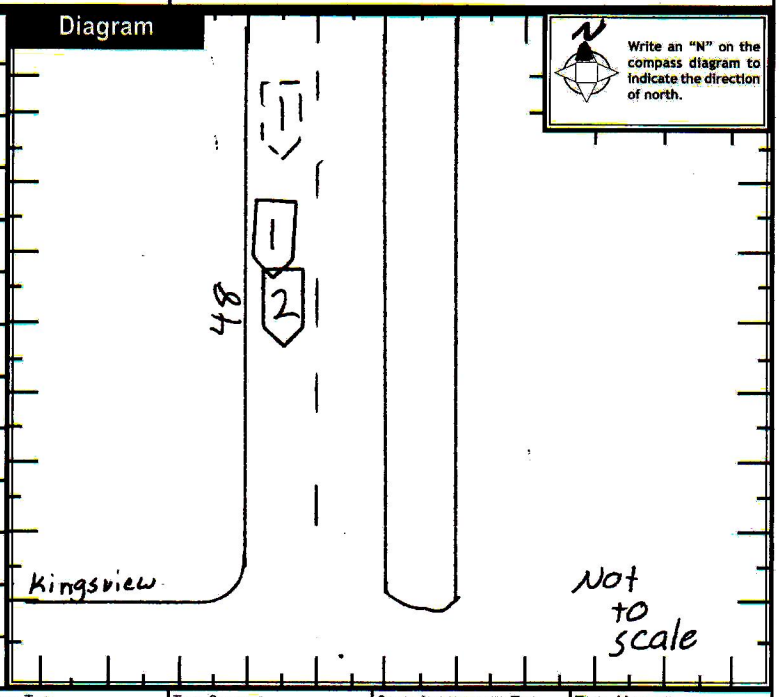
TYPE OF WORK ZONE: 1 - LANE CLOSURE, 2 - LANE SHIFT/CROSSOVER, 3 - WORK ON SHOULDER OR MEDIAN, 4 - INTERMITTENT OR MOVING WORK, 5 - OTHER

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 in traffic. Unit 1 failed to keep a safe distance striking unit 2.

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
06/02/2015	1616	1617	1621	1642	10	36

OFFICER'S NAME *	OFFICER'S BADGE NUMBER	CHECKED BY	PAGE OF
Morris	131	CM 131	

HSY7001 OH1 REV 12/13 [760-0820]

UNIT

OHIO DEPARTMENT OF PUBLIC SAFETY — SAFETY · SERVICE · PROTECTION

Local Report Number: 15-1169

Unit Number: 01

Owner Name: Last, First, Middle (☒ Same As Driver)

Owner Phone Number - inc. area code (☒ Same As Driver)

Damage Scale: 3
1 - None
2 - Minor
3 - Functional
4 - Disabling
9 - Unknown

Damaged Area: Front 02; 09, 03, 08, 10, 04, 07, 06, 05; Rear

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

LP State: OH

License Plate Number: FSK3650

Vehicle Identification Number: JHMEJ6673VS042134

Occupants: 01

Vehicle Year: 1997

Vehicle Make: Honda

Vehicle Model: 45

Vehicle Color: Blue

☐ Proof of Insurance Shown

Insurance Company: Unknown

Policy Number: Unknown

Towed By:

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
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: 3
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

☐ 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
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:

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

HSY8304 OH1U 3/14 [760-0820]

OHIO DEPARTMENT OF PUBLIC SAFETY — SAFETY · SERVICE · PROTECTION

UNIT

LOCAL REPORT NUMBER: 15-169

UNIT NUMBER: 02

OWNER NAME: LAST, FIRST, MIDDLE (☒ SAME AS DRIVER)

OWNER PHONE NUMBER - INC. AREA CODE (☒ SAME AS DRIVER)

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

DAMAGED AREA: FRONT 02; 09; 03; 08; 10; 04; 07; 06; 05; REAR

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

LP STATE: OH

LICENSE PLATE NUMBER: FHE9630

VEHICLE IDENTIFICATION NUMBER: 2CNFLPEY5A6205388

OCCUPANTS: 01

VEHICLE YEAR: 2010

VEHICLE MAKE: Chevy

VEHICLE MODEL: SW

VEHICLE COLOR: Black

☒ PROOF OF INSURANCE SHOWN

INSURANCE COMPANY: American Family

POLICY NUMBER: 1612168702 80

TOWED BY

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
- 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: 3
- 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: 06
- 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

IMPACT 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

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

PRE-CRASH ACTIONS: 11

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

- 99 - UNKNOWN

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

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

HSY8304 OH1U 3/14 [760-0820]

OHIO DEPARTMENT OF PUBLIC SAFETY — SAFETY · SERVICE · PROTECTION

MOTORIST / NON-MOTORIST / OCCUPANT

Local Report Number: 15-1169

Motorist/Non-Motorist

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
01	Ramsey, Adam	09/23/1984	30	M (F - Female, M - Male)

Address, City, State, Zip: 111 Ridge Rd #402 Lebanon OH 45036
Contact Phone- include area code: 513-316-6662

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	S5060010	4	☐	☐	1	1	1	1	.	1	1

Offense Charged (☒ Local Code)	Offense Description	Citation Number	Hands-Free Device Used	Driver Distracted By
333.03	ACDA	67371	☐	1

Motorist/Non-Motorist

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
02	Steele, Katrina	04/08/1969	46	F (F - Female, M - Male)

Address, City, State, Zip: 2872 West AVE. Lebanon OH 45036
Contact Phone- include area code: 513-934-1687

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
2	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	RU2026605	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 08/13) [760-1500]