OHIO TRAFFIC CRASH REPORT

LOCAL INFORMATION

LOCAL REPORT NUMBER *: 15-1888

CRASH SEVERITY: 3 (1 - FATAL, 2 - INJURY, 3 - PDO)

HIT/SKIP: 1 (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 P.D.

NUMBER OF UNITS: 1

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

COUNTY *: 83

CITY * / VILLAGE * / TOWNSHIP *: CITY *

CITY, VILLAGE, TOWNSHIP *: Lebanon

CRASH DATE *: 06/15/2015

TIME OF CRASH: 1132

DAY OF WEEK: Mon

DEGREES / MINUTES / SECONDS

LATITUDE: ° ' "

LONGITUDE: ° ' "

DECIMAL DEGREES

LATITUDE: 39.437664

LONGITUDE: -84.227862

ROADWAY DIVISION: UNDIVIDED

DIVIDED LANE DIRECTION OF TRAVEL:

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: Green

LOCATION ROAD TYPE [2]: CT

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 (N,S,E,W):

REFERENCE ROUTE TYPE [1]:

REFERENCE ROUTE NUMBER:

REF PREFIX (N,S,E,W):

REFERENCE NAME (ROAD, MILEPOST, HOUSE #): 905 B

REFERENCE ROAD TYPE [2]:

REFERENCE POINT USED: 3 (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: 2 (1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFICWAY; 9 - UNKNOWN)

ROAD CONTOUR: 3 (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 # 1 was backing out of the driveway at 905 B Green Ct. Unit # 1 backed in to a light pole in front of 905 B Green Ct.

DIAGRAM

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

SEE OH-2

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
06/15/2015	1132	1135	1155	1216	20	41

OFFICER'S NAME *: J. Oehler

OFFICER'S BADGE NUMBER: 124

CHECKED BY: N. Trout

PAGE _ OF _

HSY7001 OH1 (REV 01/12)

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER:

UNIT NUMBER	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE NUMBER - INC. AREA CODE (☐ SAME AS DRIVER)	DAMAGE SCALE	DAMAGED AREA
01	Highest Expectations	(513) 932-4101	1	

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

25 W. South St., Lebanon, OH 45036

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

DAMAGED AREA: FRONT, REAR

LP STATE	LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	# OCCUPANTS
OH	EYS3825	1C4GP54L7B6008791	01

VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	VEHICLE COLOR
2000	Chrysler	Town and Country	silver

☑ PROOF OF INSURANCE SHOWN	INSURANCE COMPANY	POLICY NUMBER	TOWED BY
	Progressive	05763698-8	

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: 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: 2

1 - PERSONAL; 2 - COMMERCIAL; 3 - GOVERNMENT

☐ IN EMERGENCY RESPONSE

UNIT TYPE: 05

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: 01

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: 3

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

PRE-CRASH ACTIONS: 02

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: 11

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
39					

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 7 TO 6

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:

MOTORIST/NON-MOTORIST

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
01	Morey, Shelly A	08/06/1955	59	F (F - FEMALE, M - MALE)

ADDRESS, CITY, STATE, ZIP: 413 Huntley Ct., Lebanon, OH 45036

CONTACT PHONE - INCLUDE AREA CODE: (513) 703-9569

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	RP166650	4	☐	☐	1	1	1	1	.	1	1

OFFENSE CHARGED (☐ LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED	DRIVER DISTRACTED BY
			☐	/ ☐

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 - 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/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

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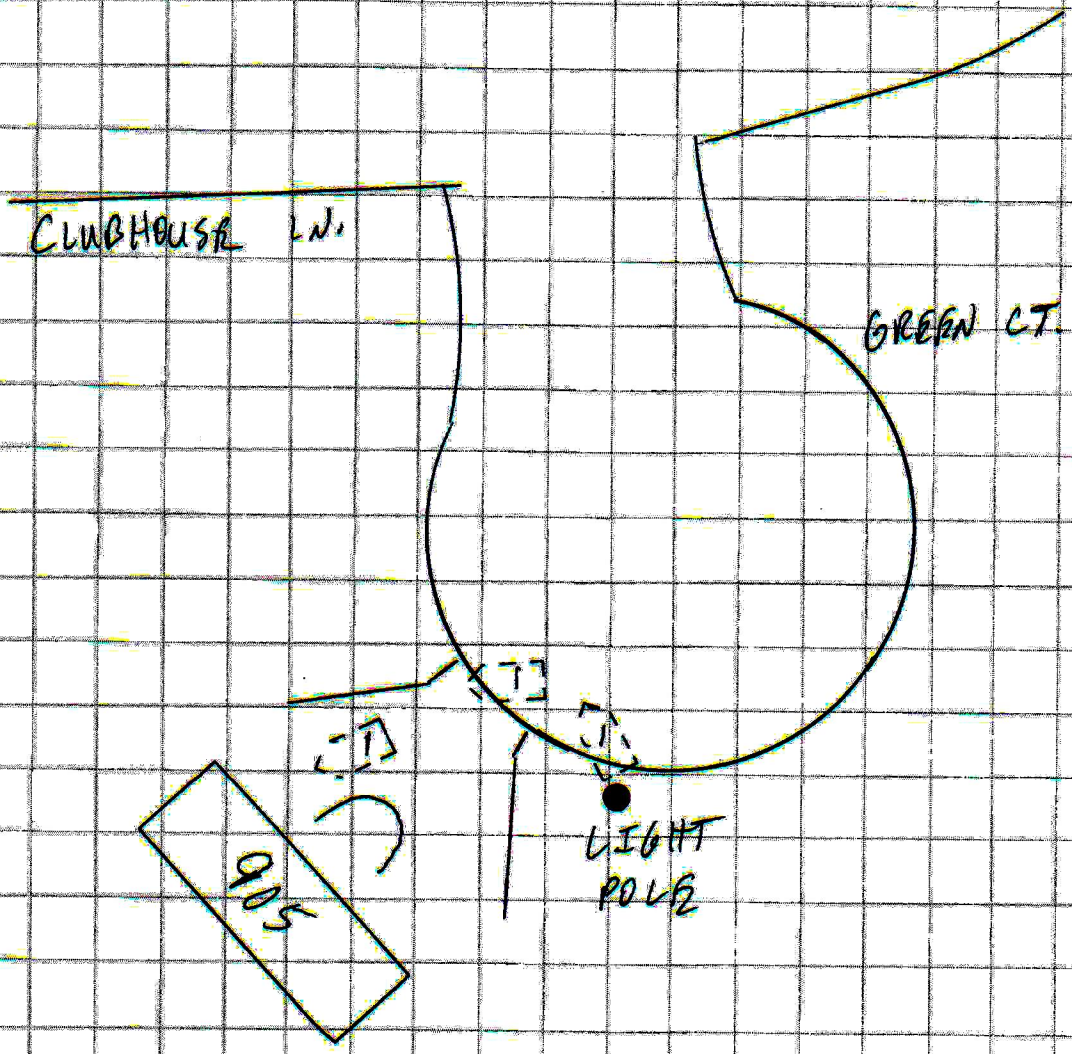
INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OHIO TRAFFIC ACCIDENT – DIAGRAM/NARRATIVE CONTINUATION

OH-2 (Rev. 1/82)

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF ACCIDENT
15-9982		M 6 D 15 Y 15
IN COUNTY OF	ACCIDENT LOCATION	



OFFICERS SIGNATURE	BADGE NO.

HSY 7002