OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER: 15-238
CRASH SEVERITY: 2 (1 Fatal, 2 Injury, 3 PDO)
HIT/SKIP: (1 Solved, 2 Unsolved)

Photos Taken	PDO Under State Reportable Dollar Amount	Private Property	Reporting Agency NCIC	Reporting Agency Name	Number of Units	Unit In Error
OH-2 OH-2P OH-3 Other			08303	Lebanon PD	1	01 (98 Animal, 99 Unknown)

County	City / Village / Township	Crash Date	Time of Crash	Day of Week
83	Lebanon	08062015	1416	Thu

DEGREES / MINUTES / SECONDS — Latitude: ° ′ ″ Longitude: ° ′ ″

OR

DECIMAL DEGREES — Latitude: 39.370156 Longitude: -84.249076

Railway Division	Divided Lane Direction of Travel	Number of Thru Lanes
Divided / ✓ Undivided	N Northbound, E Eastbound, S Southbound, W Westbound	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	Location Route Number	Loc Prefix	Location Road Name	Location Road Type
		N,S,E,W	Mason Morrow Millgrove	RD

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	Direction From Reference	Reference Route Type	Reference Route Number	Ref Prefix	Reference Name (Road, Milepost, House #)	Reference Road Type
50	Miles / ✓ Feet / Yards	N (N,S,E,W)		N,S,E,W	Columbia	RD

Reference Point Used	Crash Location	Intersection Related	Location of First Harmful Event
1 (1 Intersection, 2 Mile Post, 3 House Number)	01 (01 Non-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)	☐	2 (1 On Roadway, 2 On Shoulder, 3 In Median, 4 On Roadside, 5 On Gore, 6 Outside Trafficway, 9 Unknown)

Road Contour	Road Conditions Primary	Road Conditions Secondary
4 (1 Straight Level, 2 Straight Grade, 3 Curve Level, 4 Curve Grade, 9 Unknown)	02 (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	Weather
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)	4 (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)

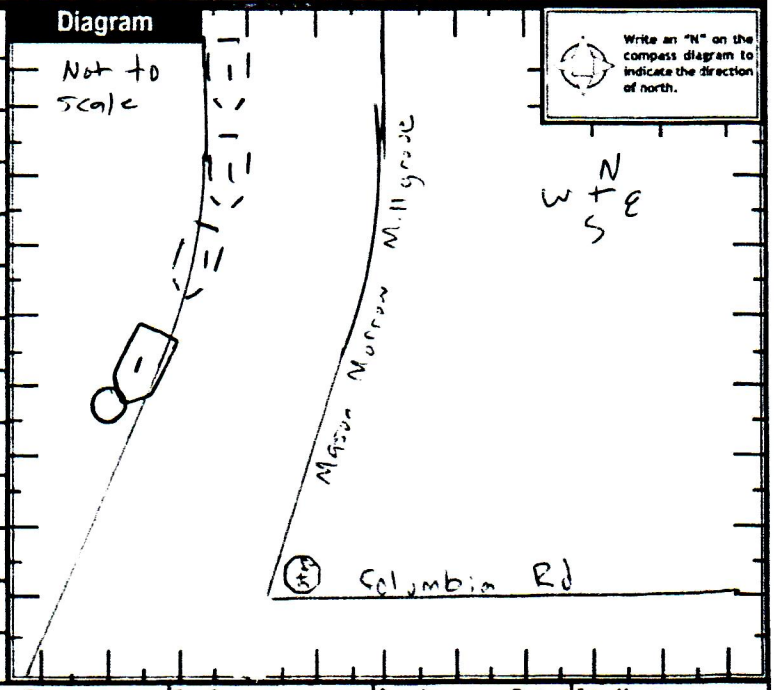
Road Surface	Light Conditions Primary	Light Conditions Secondary	School Zone Related	School Bus Related
2 (1 Concrete, 2 Blacktop, Bituminous, Asphalt, 3 Brick/Block, 4 Slag, Gravel, Stone, 5 Dirt, 6 Other)	1 (1 Daylight, 2 Dawn, 3 Dusk, 4 Dark - Lighted Roadway, 5 Dark - Roadway Not Lighted, 6 Dark - Unknown Roadway Lighting, 7 Glare*, 8 Other, 9 Unknown)	☐ (* Secondary Condition Only)	☐	☐ Yes, School Bus Directly Involved; ☐ Yes, School Bus Indirectly Involved

Work Zone Related	Work Zone Details	Type of Work Zone	Location of Crash In Work Zone
☐	☐ Workers Present; ☐ Law Enforcement Present (Officer/Vehicle); ☐ Law Enforcement Present (Vehicle Only)	(1 Lane Closure, 2 Lane Shift/Crossover, 3 Work On Shoulder or Median, 4 Intermittent or Moving Work, 5 Other)	(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 traveling South on Mason Morrow Millgrove. While Unit 1 was going around the Curve Unit 1 thru lost Control and hit a pole.

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
08062015	1416	1420	1425	1508	0000	0043

Officer's Name	Officer's Badge Number	Checked By	Page
E. Holmes	122	131	of

HSY7001 OH1 (Rev 01/12)

OHIO DEPARTMENT OF PUBLIC SAFETY — UNIT

REPORT NUMBER: 15-238

UNIT NUMBER	OWNER NAME: LAST, FIRST, MIDDLE (☑ SAME AS DRIVER)	OWNER PHONE NUMBER - INCLUDE AREA CODE (☑ SAME AS DRIVER)	DAMAGE SCALE	DAMAGED AREA
01			4	

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

LP STATE	LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	# OCCUPANTS
OH	GCW9774	JTDJT4K34a5314068	01

VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	VEHICLE COLOR
2010	Toytoa	2D	Blue

☑ PROOF OF INSURANCE SHOWN	INSURANCE COMPANY	POLICY NUMBER	TOWED BY
☑	Progressive	902498612	Jacobs

CARRIER NAME, ADDRESS, CITY, STATE, ZIP: N/A

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 (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

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: 14 - SINGLE UNIT TRUCK; 15 - SINGLE UNIT TRUCK; 16 - TRUCK/TRACTOR (BOBTAIL); 17 - TRACTOR/SEMI-TRAILER; 18 - TRACTOR/DOUBLES; 19 - TRACTOR/TRIPLES; 22 - OTHER MED/HEAVY VEHICLE

BUS/VAN (>9 PASSENGERS 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: 02

IMPACT AREA: 02

01 - NONE
02 - LEFT SIDE
03 - LEFT FRONT
04 - RIGHT SIDE
05 - RIGHT REAR
06 - REAR CENTER
07 - LEFT REAR
08 - RIGHT FRONT
09 - LEFT FRONT
10 - TOP AND WINDOWS
11 - UNDERCARRIAGE
12 - LOAD/TRAILER
13 - TOP/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: 13

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 DEFECT

SEQUENCE OF EVENTS

1	2	3	4	5	6
08	40				

FIRST HARMFUL EVENT: 1 — MOST HARMFUL EVENT: 2 — 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: 45

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

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

Case No. 15-238

MOTORIST/NON-MOTORIST

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
01	Terbrueggen, Sarah	02/27/1996	19	F

Address: City, State, Zip: 8947 Roan Lane, Cincinnati, Ohio, 45242

Contact Phone - Include Area Code: (513) 500-3751

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	2	Lebanon	Arrow Springs	04	☐	04	4	1	1

OL State	Operator License Number	OL Class	No Valid OL	M/C Endt.	Condition	Alcohol/Drug Suspected	Alcohol Test Status	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type
OH	TZ225745	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	68150	☐	1

MOTORIST/NON-MOTORIST

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender

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 Endt.	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 - Not Injured / 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
02 - Shoulder Belt Only Used
03 - Lap Belt Only Used
04 - Shoulder and Lap Belt Used
99 - Unknown Safety Equipment
05 - Child Restraint System-Forward Facing
06 - Child Restraint System-Rear Facing
07 - Booster Seat
08 - Helmet Used

Non-Motorist
09 - None Used
10 - Helmet Used
11 - Protective Pads Used (Elbow/Knee, 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 Sidecar)
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 = "D")
5 - M/C/Motor Cycle

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 Involved
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 - Not Distracted/Reported
2 - Phone
3 - Texting/E-Mailing
4 - Electronic Communication Device
5 - Other Electronic Device (Navigation Device, Radio, CD)
6 - Other Inside the Vehicle
7 - External Distraction

OCCUPANT

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender

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

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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HSY8306 OH1M (Rev. 01/12)