# OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

| | |
|---|---|
| Local Information | |
| Local Report Number * | 16-116 |
| 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 |
| Number of Units | 1 |
| Unit in Error | 01 (98 - Animal, 99 - Unknown) |
| County * | 83 |
| City * / Village * / Township * | ☑ City * — LEBANON |
| Crash Date * | 04092016 |
| Time of Crash | 1207 |
| Day of Week | SAT |

**Degrees / Minutes / Seconds**
Latitude: ° ′ ″ Longitude: ° ′ ″

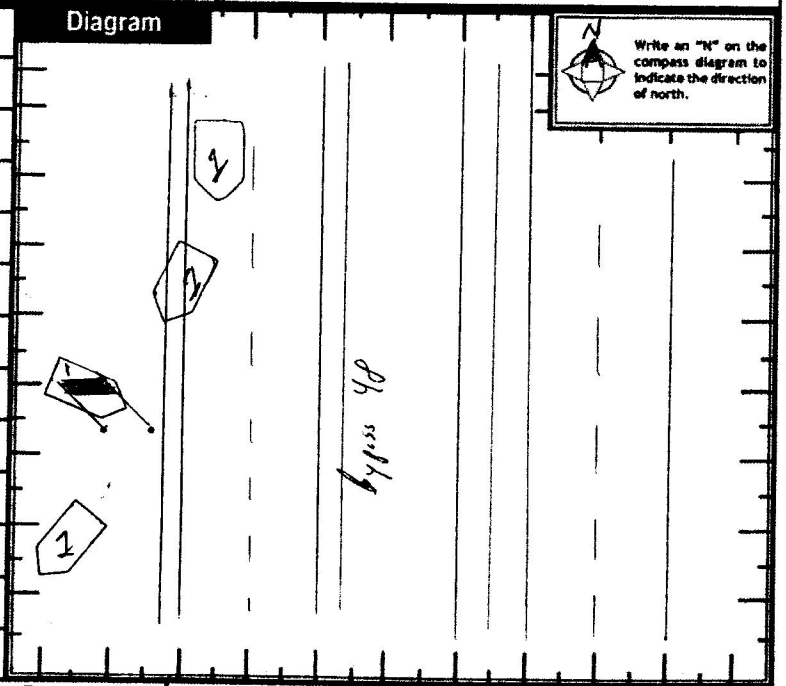
**Decimal Degrees**
Latitude: 39.445620 Longitude: -84.181222

| | |
|---|---|
| Roadway Division | ☑ Divided ☐ Undivided |
| Divided Lane Direction of Travel | N (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] | 5R |
| 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 | 300 (☐ Miles ☑ Feet ☐ Yards) |
| Dir From Ref (N,S,E,W) | S |
| Reference Route Type [1] | |
| Reference Route Number | |
| Ref Prefix (N,S,E,W) | |
| Reference Name (Road, Milepost, House #) | MONROE |
| Reference Road Type [2] | RD |
| 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 | 2 (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 |
| Road Conditions Secondary | 05 |
| Road Conditions | 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 | 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 |
| Light Conditions 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 TRAVELING SOUTH ON BYPASS 48 FROM MONROE. VEHICLE RAN OFF ROAD RIGHT, STRIKING OVERHEAD SIGN SUPPORT, THEN SPUN OUT INTO DITCH

**Diagram**




| | |
|---|---|
| Report Taken By | ☑ Police Agency ☐ Motorist ☐ Supplement (Correction or Addition to an Existing Report Sent to ODPS) |
| Date Crash Reported | 04092016 |
| Time Crash Reported | 1207 |
| Dispatch Time | 1207 |
| Arrival Time | 1214 |
| Time Cleared | 1234 |
| Other Investigation Time | 35 |
| Total Minutes | 62 |
| Officer's Name * | PTL. B. HAUSSERMANN |
| Officer's Badge Number | #117 |
| Checked By | |
| Page | of |

OH-1 (Rev 01/12)

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

LOCAL REPORT NUMBER: 16-1116

## MOTORIST/NON-MOTORIST

| UNIT NUMBER | NAME: LAST, FIRST, MIDDLE | DATE OF BIRTH | AGE | GENDER |
|---|---|---|---|---|
| 01 | JACKSON, CARLEY JR | 06/10/1960 | 55 | M (F - FEMALE, M - MALE) |

| ADDRESS, CITY, STATE, ZIP | CONTACT PHONE - INCLUDE AREA CODE |
|---|---|
| 8045 S ST RT 48 MAINEVILLE, OH 45039 | (513) 348-0585 |

| 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 | LFD | | 04 | ☐ | 01 | 4 | 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 | RN103800 | 4 | ☐ | ☑ | 1 | 1 | 1 | 1 | . | 1 | 1 |

| OFFENSE CHARGED (☑ LOCAL CODE) | OFFENSE DESCRIPTION | CITATION NUMBER | HANDS-FREE DEVICE USED | DRIVER DISTRACTED BY |
|---|---|---|---|---|
| 331.38 | FAIL TO CONTROL | 69940 | ☐ | 6 |

## 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 = "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 |
|---|---|---|---|---|
| 01 | JACKSON, BRIAN W | 11/13/1979 | 36 | M (F - FEMALE, M - MALE) |

| ADDRESS, CITY, STATE, ZIP | CONTACT PHONE - INCLUDE AREA CODE |
|---|---|
| 8076 S ST RT 48. MAINEVILLE, OH 45039 | (513) 649-7454 |

| 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 | LFD | | 04 | ☐ | 03 | 4 | 1 | 1 |

## 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 |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | ☐ | | | | |

# OHIO DEPARTMENT OF PUBLIC SAFETY — UNIT

LOCAL REPORT NUMBER: 1/16-1/19

| UNIT NUMBER | OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) | OWNER PHONE NUMBER - INC. AREA CODE (☐ SAME AS DRIVER) | DAMAGE SCALE | DAMAGED AREA |
|---|---|---|---|---|
| 01 | FORD, LEBANON | (513) 696-1102 | 4 | |

OWNER ADDRESS: CITY, STATE, ZIP (☐ SAME AS DRIVER)
770 COLUMBUS AVE. LEBANON, OH 45036

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

DAMAGED AREA: FRONT, REAR, 01, 02, 03, 04, 05, 07, 08, 09

| LP STATE | LICENSE PLATE NUMBER | VEHICLE IDENTIFICATION NUMBER | # OCCUPANTS |
|---|---|---|---|
| OH | 62166 | 1FA6P8CF7F5404533 | 02 |

| VEHICLE YEAR | VEHICLE MAKE | VEHICLE MODEL | VEHICLE COLOR |
|---|---|---|---|
| 2015 | FORD | MUSTANG | RED |

| PROOF OF INSURANCE SHOWN | INSURANCE COMPANY | POLICY NUMBER | TOWED BY |
|---|---|---|---|
| ☑ | ERIE | Q055205668C | |

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: 4
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: 13
IMPACT AREA: 13
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: 1
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 |
|---|---|---|---|---|---|
| 08 | 37 | 44 | | | |

FIRST HARMFUL EVENT: 2
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 | POSTED SPEED | TRAFFIC CONTROL | UNIT DIRECTION |
|---|---|---|---|
| 45 (5 - STOPPED IN TRAFFIC) | 50 | 01 | FROM 1 TO 2 |

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

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