OHIO TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER: 16-175

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

REPORTING AGENCY NCIC: 08303

REPORTING AGENCY NAME: Lebanon PD

NUMBER OF UNITS: 2

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

COUNTY: 83

CITY / VILLAGE / TOWNSHIP: Lebanon

CRASH DATE: 05/19/2016

TIME OF CRASH: 1134

DAY OF WEEK: THU

DEGREES / MINUTES / SECONDS — LATITUDE / LONGITUDE

DECIMAL DEGREES — LATITUDE: 39.432983 LONGITUDE: -84.199001

ROADWAY DIVISION: DIVIDED

ROAD TYPES OR MILEPOST: 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

NUMBER OF THROUGH LANES: 2

LOCATION ROUTE TYPE:

LOCATION ROAD NAME: Mound

LOCATION ROAD TYPE: ST

ROUTE TYPES: IR - INTERSTATE ROUTE (INC. TURNPIKE), US - US ROUTE, SR - STATE ROUTE, CR - NUMBERED COUNTY ROUTE, TR - NUMBERED TOWNSHIP ROUTE

DISTANCE FROM REF: 30 (FEET)

DIRECTION FROM REF: N

REFERENCE ROAD NAME: Main

REFERENCE ROAD TYPE: ST

REFERENCE POINT USED: 1 - INTERSECTION

CRASH LOCATION: 02

INTERSECTION RELATED

LOCATION OF FIRST HARMFUL EVENT: 1 - ON ROADWAY

ROAD CONTOUR: 2 - STRAIGHT LEVEL

ROAD CONDITIONS: PRIMARY 01 - DRY; SECONDARY

MANNER OF CRASH COLLISION/IMPACT: 8

WEATHER: 1 - CLEAR

ROAD SURFACE: 1 - CONCRETE

LIGHT CONDITIONS: PRIMARY 1 - DAYLIGHT; SECONDARY

SCHOOL ZONE RELATED

SCHOOL BUS RELATED

WORK ZONE RELATED

WORKERS PRESENT

LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE)

LAW ENFORCEMENT PRESENT (VEHICLE ONLY)

TYPE OF WORK ZONE

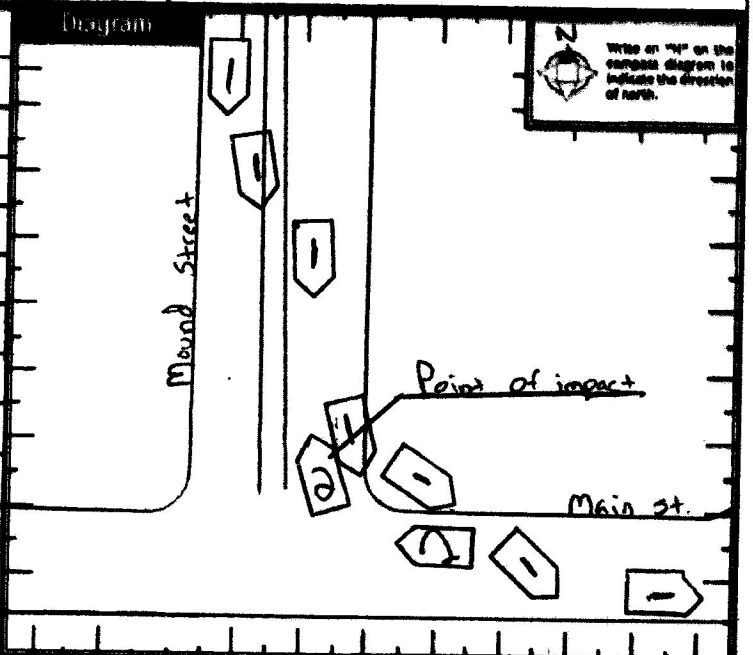
LOCATION OF CRASH IN WORK ZONE

NARRATIVE

Unit #1 had a brake failure while traveling south on Mound Street.

Unit 1 went left of center in an attempt to avoid striking cars stopped at the intersection of Mound and Main. Unit 1 then attempted to avoid striking Unit #2 which was traveling north on Mound at Main. Unit #1 sideswiped Unit #2 before going off the road to the left. Unit #1 made a left turn on Main Street before it came to a stop on Main Street.

DIAGRAM



REPORT TAKEN BY: POLICE AGENCY

SUPPLEMENT (CORRECTION OR ADDITION TO AN EARLIER REPORT SENT TO ODPS)

DATE CRASH REPORTED: 05/19/2016

TIME CRASH REPORTED: 1132

DISPATCH TIME: 1134

ARRIVAL TIME: 1134

TIME CLEARED: 1157

OTHER INVESTIGATION TIME: 25

TOTAL MINUTES: 50

OFFICER'S NAME: Fry

OFFICER'S BADGE NUMBER: 119

CHECKED BY: LCM

PAGE

OSY7001 OH1 (Rev 01/12)

OHIO MOTORIST / NON-MOTORIST / OCCUPANT

LAW ENFORCEMENT REPORT NUMBER: 16-175

MOTORIST / NON-MOTORIST

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
01	Begley, Robert E	09 21 1934	81	M (F - FEMALE, M - MALE)

ADDRESS, CITY, STATE, ZIP: 3638 East Pekin Road, Waynesville Ohio 45068

CONTACT PHONE - INCLUDE AREA CODE: (513) 260-2851

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	7			04	☐	01	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	ENDORSE	M/E EQUIP.	CONDITION	ALCOHOL/DRUG SUSPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST STATUS	DRUG TEST TYPE
OH	RM407821	4	☐	☐	1	1	1	1	.	1	1

OFFENSE CHARGED (L = 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	Kilburn, Geneva	12 6 1931	84	F (F - FEMALE, M - MALE)

ADDRESS, CITY, STATE, ZIP: 1065 East Main Street, Lebanon Ohio 45036

CONTACT PHONE - INCLUDE AREA CODE: (513) 934-3354

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	7			04	☐	01	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	ENDORSE	M/E EQUIP.	CONDITION	ALCOHOL/DRUG SUSPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST STATUS	DRUG TEST TYPE
OH	RG740488	4	☐	☐	1	1	1	1	.	1	1

OFFENSE CHARGED (L = LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED	DRIVER DISTRACTED BY
			☐	1

INJURIES
1 - No Injuries / Non-Motorist
2 - Possible
3 - Non-Incapacitating
4 - Incapacitating
5 - Fatal

INJURED TAKEN BY
1 - Not Transported at Scene by EMS Agency
2 - EMS
3 - Private
4 - Police
7 - Unknown

SAFETY EQUIPMENT USED
00 - None Used / Motorcycle Helmet
01 - Shoulder Belt Only Used
02 - Lap Belt Only Used
03 - Shoulder and Lap Belt Used
04 - Child Restraint System-Forward Facing
05 - Child Restraint System-Rear Facing
06 - Booster Seat
07 - Helmet Used
08 - Child Seat
09 - Other 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
08 - Third - Middle
09 - Third - Right Side
10 - Sleeper Section of Truck Cab
11 - Passenger in Unenclosed Carrying Area
12 - Conveyance for Disabled Person
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
6 - Deployed Unknown

EJECTION
1 - Not Ejected
2 - Totally Ejected
3 - Partially Ejected
4 - Not Applicable

TRAPPED
1 - Not Trapped
2 - Trapped, Released by Non-Mechanical Means
3 - Trapped, Released by Mechanical Means
4 - Not Applicable

OHIO DRIVER LICENSE CLASS
1 - Class A
2 - Class B
3 - Class C
4 - Commercial Class A
5 - Commercial Class B
6 - Commercial Class C
7 - Motorcycle Class

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 - Given
3 - Refused
4 - Test Given, Results Unknown
5 - Test Given, Results Known

ALCOHOL TEST TYPE
1 - None
2 - Blood
3 - Urine
4 - Breath
5 - Other

DRUG TEST STATUS
1 - None Given
2 - Given
3 - Test Given, Inconclusive/Insufficient 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/Messaging
4 - Electronic Communication Device
5 - Other Electronic Device (Navigation Device, Radio, DVD)
6 - Other Inside the Vehicle
7 - External Distraction

MOTORIST / NON-MOTORIST

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
02	Kilburn, Lauren Kristin	05 09 1986	30	F (F - FEMALE, M - MALE)

ADDRESS, CITY, STATE, ZIP: 1065 East Main Street apt 63, Lebanon ohio 45036

CONTACT PHONE - INCLUDE AREA CODE: (513) 934-3354

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				04	☐	03	1	1	1

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
					☐				

PAGE OF

UNIT

LOCAL REPORT NUMBER: 16-175

UNIT NUMBER	OWNER NAME: LAST, FIRST, MIDDLE (☑ SAME AS DRIVER)	OWNER PHONE NUMBER - INC. AREA CODE (☑ SAME AS DRIVER)	DAMAGE SCALE	DAMAGED AREA
01			2	

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

1 - NONE
2 - MINOR
3 - FUNCTIONAL
4 - DISABLING
9 - UNKNOWN

LP STATE	LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	# OCCUPANTS
OH	DVB5494	1D7HE22K36S549077	01

VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	VEHICLE COLOR
2006	Dodge	Truck	Grey

☑ PROOF OF INSURANCE SHOWN	INSURANCE COMPANY	POLICY NUMBER	TOWED BY
	Western Reserve	SSV34017879630	

CARRIER NAME, ADDRESS, CITY, STATE, ZIP

CARRIER PHONE - INCLUDE AREA CODE

CARRIER

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: 1
1 - PERSONAL
2 - COMMERCIAL
3 - GOVERNMENT

☐ IN EMERGENCY RESPONSE

UNIT TYPE: 07
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)
09 - AMBULANCE
10 - FIRE
11 - HIGHWAY/MAINTENANCE
17 - FARM VEHICLE
18 - FARM EQUIPMENT
19 - MOTORHOME

MOST DAMAGED AREA: 03
IMPACT AREA: 03
01 - NONE
02 - CENTER FRONT
03 - RIGHT FRONT
04 - RIGHT SIDE
05 - RIGHT REAR
06 - CENTER REAR
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: 04
MOTORIST
NON-MOTORIST
99 - UNKNOWN
21 - OTHER NON-MOTORIST ACTION

CONTRIBUTING CIRCUMSTANCES
PRIMARY: 17
SECONDARY:
MOTORIST
NON-MOTORIST
99 - UNKNOWN

VEHICLE DEFECTS: 04
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: 06
2: 11
3: 20
4: 09
5:
6:
FIRST HARMFUL EVENT: 1
MOST HARMFUL EVENT: 3

NON-COLLISION EVENTS
10 - CROSS MEDIAN
11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL
12 - DOWNHILL RUNAWAY
13 - OTHER NON-COLLISION

COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED
19 - ANIMAL - OTHER

COLLISION WITH FIXED OBJECT
31 - MEDIAN CABLE BARRIER
32 - MEDIAN GUARDRAIL BARRIER
33 - MEDIAN CONCRETE BARRIER
34 - MEDIAN OTHER BARRIER
35 - TRAFFIC SIGN POST
36 - OTHER SIGN POST
37 - TRAFFIC SIGNAL POST
38 - OTHER POST, POLE OR SUPPORT
39 - LIGHT
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: 20
DETECTED
ESTIMATED

POSTED SPEED: 25

TRAFFIC CONTROL: 04
04 - STOP SIGN
05 - TRAFFIC SIGNAL
06 - WORK ZONE MARKING
14 - RAILWAY CROSSING SIGN
15 - RAILWAY CROSSING SIGNAL
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

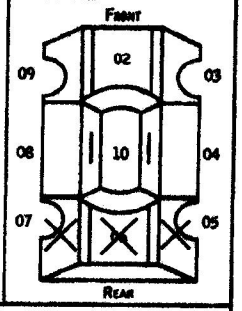
OHIO DEPARTMENT OF PUBLIC SAFETY — UNIT

LOCAL REPORT NUMBER: 10-175

UNIT NUMBER	OWNER NAME: LAST, FIRST, MIDDLE (☑ SAME AS DRIVER)	OWNER PHONE NUMBER - INC. AREA CODE (☑ SAME AS DRIVER)	DAMAGE SCALE	DAMAGED AREA
02			3	

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

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



LP STATE	LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	# OCCUPANTS
OH	FDB3133	1B3HB48E97D306824	02

VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	VEHICLE COLOR
2007	Dodge	Caliber	White

PROOF OF INSURANCE SHOWN	INSURANCE COMPANY	POLICY NUMBER	TOWED BY
☑	State Farm	C066694F0535J	

CARRIER NAME, ADDRESS, CITY, STATE, ZIP

CARRIER PHONE - INCLUDE AREA CODE

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: 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

01 - NONE; 02 - TAXI; 03 - RENTAL TRUCK (OVER 10K LBS); 04 - BUS - SCHOOL; 05 - BUS - TRANSIT/COMMUTER; 06 - BUS - CHARTER/TOUR; 07 - BUS - OTHER; 08 - AMBULANCE; 09 - FIRE; 10 - MILITARY; 11 - POLICE; 12 - PUBLIC UTILITY; 13 - CONSTRUCTION EQUIP.; 14 - FARM VEHICLE; 15 - FARM EQUIPMENT; 16 - MOTORCYCLE ESCORT; 17 - GOLF CART; 18 - SNOWMOBILE/ATV; 19 - TRAILER; 20 - OTHER NON-MOTOR VEHICLE

MOST DAMAGED AREA: 06

IMPACT AREA: 05

01 - NONE; 02 - CENTER FRONT; 03 - RIGHT FRONT; 04 - RIGHT SIDE; 05 - RIGHT REAR; 06 - CENTER REAR; 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: 05

MOTORIST: 99 - UNKNOWN

NON-MOTORIST: 22 - OTHER NON-MOTORIST ACTION

CONTRIBUTING CIRCUMSTANCES

PRIMARY: 01

SECONDARY:

MOTORIST: 99 - UNKNOWN

NON-MOTORIST:

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
20					

FIRST HARMFUL EVENT: 1

MOST HARMFUL EVENT: 1

NON-COLLISION EVENTS: 01 - OVERTURN/ROLLOVER; 02 - FIRE/EXPLOSION; 03 - IMMERSION; 04 - JACKKNIFE; 05 - CARGO/EQUIPMENT LOSS OR SHIFT; 06 - EQUIPMENT FAILURE; 07 - SEPARATION OF UNITS; 08 - RAN OFF ROAD RIGHT; 09 - RAN OFF ROAD LEFT; 10 - CROSS MEDIAN; 11 - CROSS CENTERLINE; 12 - DOWNHILL RUNAWAY; 13 - OTHER NON-COLLISION

COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED

COLLISION WITH FIXED OBJECT: 41 - OTHER POST, POLE OR SUPPORT; 42 - FENCE; 43 - MAILBOX; 44 - OTHER; 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
5	25	04	FROM 4 TO 1

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