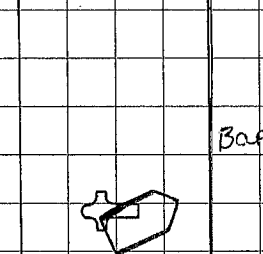


# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER\*

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH		<input checked="" type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER		<input checked="" type="checkbox"/> OH-3 <input type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION 000190014612			
REPORTING AGENCY NAME* Clermont County Sheriff				NCIC* 011300		HIT/SKIP 1 - SOLVED 2 - UNSOLVED 01			
COUNTY* 13		LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP 3		LOCATION: CITY, VILLAGE, TOWNSHIP* Jackson		CRASH DATE / TIME* 04/16/2019/1800			
ROUTE TYPE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		ROUTE NUMBER PREFIX		LOCATION ROAD NAME Monterey Maple Grove		ROAD TYPE R, D			
ROUTE TYPE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		ROUTE NUMBER PREFIX		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 4976		ROAD TYPE LONGITUDE DECIMAL DEGREES -84.085925			
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 3		DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		ROUTE TYPE IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE		ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY			
DISTANCE FROM REFERENCE 1 - MILES 2 - FEET 3 - YARDS		DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS		INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES		ROADWAY <input type="checkbox"/> ROADWAY DIVIDED			
LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP 06				MANNER OF CRASH COLLISION/IMPACT 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 - OTHER / UNKNOWN 1				DIRECTION OF TRAVEL 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 4	
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE		WORK ZONE TYPE 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 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		CONTOUR 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER/UNKNOWN 1			
LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN 1		WEATHER 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 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN 1		CONDITIONS 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER/UNKNOWN 1		SURFACE 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN 5			
NARRATIVE unit #1 was moving Round Bails around inside the Barn. unit #1 was Backing up and while Backing up the Left Rear Tire went into a hole. when the Left Rear Tire went into the hole it caused the Forklift to overturn and pin the operator underneath the Forklift.									
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>concrete Alleyway</p> </div> <div style="width: 45%; text-align: right;"> <p>not to scale</p>  <p>Barn #1</p> </div> </div>									
CRASH REPORTED DATE / TIME 04/16/2019/1753		DISPATCH DATE / TIME 04/16/2019/1620		ARRIVAL DATE / TIME 04/16/2019/1644		SCENE CLEARED DATE / TIME 04/16/2019/1739			
TOTAL TIME ROADWAY CLOSED 120		OTHER INVESTIGATION TIME 226		OFFICER'S NAME* Dep. J.S. Rudel		CHECKED BY OFFICER'S NAME* Dep. D. Scott			
OFFICER'S BADGE NUMBER* R 3052		CHECKED BY OFFICER'S BADGE NUMBER* 2367		<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST <input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)					



# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
000190014612

UNIT # 01	NAME: LAST, FIRST, MIDDLE Sunberg, John F.	DATE OF BIRTH 05/19/1961	AGE 57	GENDER M
ADDRESS: STREET, CITY, STATE, ZIP 5604 Camp Run Rd. Georgetown, Ok. 45121		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES 1	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED 01
OL STATE OH	OPERATOR LICENSE NUMBER RT233273	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
OL CLASS 4	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
CONDITION		ALCOHOL TEST STATUS TYPE VALUE		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
CONDITION		ALCOHOL TEST STATUS TYPE VALUE		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
ADDRESS: STREET, CITY, STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED
OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG
CONDITION		ALCOHOL TEST STATUS TYPE VALUE		DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4

INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1 - FATAL	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED	1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED	1 - NONE GIVEN
2 - SUSPECTED SERIOUS INJURY	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B	2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)	2 - TEST REFUSED
3 - SUSPECTED MINOR INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C	3 - CORRECTIVE LENSES	3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE
4 - POSSIBLE INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / SIDE	4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE	4 - TEST GIVEN, RESULTS KNOWN
5 - NO APPARENT INJURY	5 - SECOND - MIDDLE	5 - NOT APPLICABLE	5 - M/C MOPED ONLY	5 - EXCEPT CLASS A & CLASS B BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5 - TEST GIVEN, RESULTS UNKNOWN
<b>INJURED TAKEN BY</b>		6 - SECOND - RIGHT SIDE	6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER	<b>ALCOHOL TEST TYPE</b>
1 - NOT TRANSPORTED / TREATED AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	<b>EJECTION</b>		7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE	1 - NONE
2 - EMS	8 - THIRD - MIDDLE	1 - NOT EJECTED	H - HAZMAT	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE	2 - BLOOD
3 - POLICE	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED	M - MOTORCYCLE	9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN	3 - URINE
9 - OTHER / UNKNOWN	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED	P - PASSENGER	10 - LIMITED TO DAYLIGHT ONLY		4 - BREATH
<b>SAFETY EQUIPMENT</b>		4 - NOT APPLICABLE	N - TANKER	11 - LIMITED TO EMPLOYMENT		5 - OTHER
1 - NONE USED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	<b>TRAPPED</b>		12 - LIMITED - OTHER	<b>CONDITION</b>	<b>DRUG TEST TYPE</b>
2 - SHOULDER BELT ONLY USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	1 - NOT TRAPPED	R - THREE-WHEEL MOTORCYCLE	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	1 - APPARENTLY NORMAL	1 - NONE
3 - LAP BELT ONLY USED	13 - TRAILING UNIT	2 - EXTRICATED BY MECHANICAL MEANS	S - SCHOOL BUS	14 - MILITARY VEHICLES ONLY	2 - PHYSICAL IMPAIRMENT	2 - BLOOD
4 - SHOULDER & LAP BELT USED	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	3 - FREED BY NON-MECHANICAL MEANS	T - DOUBLE & TRIPLE TRAILERS	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)	3 - URINE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	15 - NON-MOTORIST		X - TANKER / HAZMAT	16 - OUTSIDE MIRROR	4 - ILLNESS	4 - OTHER
6 - CHILD RESTRAINT SYSTEM - REAR FACING	99 - OTHER / UNKNOWN			17 - PROSTHETIC AID	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	
7 - BOOSTER SEAT				18 - OTHER	6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL	<b>DRUG TEST RESULT(S)</b>
8 - HELMET USED					7 - OTHER / UNKNOWN	1 - AMPHETAMINES
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						2 - BARBITURATES
10 - REFLECTIVE CLOTHING						3 - BENZODIAZEPINES
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						4 - CANNABINOIDS
99 - OTHER / UNKNOWN						5 - COCAINE
						6 - OPIATES / OPIOIDS
						7 - OTHER
						8 - NEGATIVE RESULTS

UNIT NUMBER: 101 | OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER): HERRON, Harold S. | OWNER PHONE NUMBER - INC. AREA CODE (☐ SAME AS DRIVER): | DAMAGE SCALE: 1 | DAMAGED AREA: FRONT

OWNER ADDRESS: CITY, STATE, ZIP (☐ SAME AS DRIVER): 4515 Sharps cutoff, Batavia, oh. 45103

LP STATE: | LICENSE PLATE NUMBER: | VEHICLE IDENTIFICATION NUMBER: 6P1I38I1010208230K01E | # OCCUPANTS: 1

VEHICLE YEAR: 1991 | VEHICLE MAKE: Clark | VEHICLE MODEL: Forklift | VEHICLE COLOR: Yellow

PROOF OF INSURANCE SHOWN: ☐ | INSURANCE COMPANY: | POLICY NUMBER: | TOWED BY: |

CARRIER NAME, ADDRESS, CITY, STATE, ZIP: | CARRIER PHONE- INCLUDE AREA CODE: |

US DOT: | VEHICLE WEIGHT GVWR/GCWR: 1 (1- LESS THAN OR EQUAL TO 10K LBS., 2- 10,001 TO 26,000 LBS., 3- MORE THAN 26,000 LBS.) | CARGO BODY TYPE: 01 (1- NO CARGO BODY TYPE/NOT APPLICABLE, 2- BUS/VAN (9-15 SEATS, INC DRIVER), 3- BUS (16+ SEATS, INC DRIVER), 4- VEHICLE TOWING ANOTHER VEHICLE, 5- LOGGING, 6- INTERMODAL CONTAINER CHASSIS, 7- CARGO VAN/ENCLOSED BOX, 8- GRAIN, CHIPS, GRAVEL, 9- POLE, 10- CARGO TANK, 11- FLAT BED, 12- DUMP, 13- CONCRETE MIXER, 14- AUTO TRANSPORTER, 15- GARBAGE/REFUSE, 99- OTHER/UNKNOWN) | TRAFFICWAY DESCRIPTION: ☐ (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: 20 (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: 17 (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 (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) | ACTION: 1 (1- NON-CONTACT, 2- NON-COLLISION, 3- STRIKING, 4- STRUCK, 5- STRIKING/STRUCK, 9- UNKNOWN) | IMPACT AREA: 08

PRE-CRASH ACTIONS: 02 (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, 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: 20 (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) | SECONDARY: | 99- UNKNOWN | 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, 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 SIGNALS /SIGNALS/OFFICER, 30- WRONG SIDE OF THE ROAD, 31- OTHER NON-MOTORIST ACTION)

SEQUENCE OF EVENTS: 1 (05) 2 (01) 3 ( ) 4 ( ) 5 ( ) 6 ( ) | FIRST HARMFUL EVENT: 1 | MOST HARMFUL EVENT: 2 | 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, 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 OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE, 23- STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE, 24- OTHER MOVABLE 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: 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 3 TO 4 (1- NORTH, 2- SOUTH, 3- EAST, 4- WEST, 5- NORTHEAST, 6- NORTHWEST, 7- SOUTHEAST, 8- SOUTHWEST, 9- UNKNOWN) | PAGE 3 OF

Case Number: 000190014612

Date: 4/16/2019

Location: 4967 Monterey Maple Grove Road Batavia Ohio 45103

Description:

