

TRAFFIC CRASH REPORT

* DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

000210033644

| | | | | | | | | |
|--|--------------------------------|---|-------------------------|-------------------------|--------|--|-----------------------------|--|
| <input checked="" type="checkbox"/> PHOTOS TAKEN | <input type="checkbox"/> OH-2 | <input checked="" type="checkbox"/> OH-3 | LOCAL INFORMATION | | | | | |
| <input type="checkbox"/> SECONDARY CRASH | <input type="checkbox"/> OH-1P | <input type="checkbox"/> OTHER | REPORTING AGENCY NAME * | | NCIC * | HIT/SKIP 1 - SOLVED 2 - UNSOLVED | NUMBER OF UNITS <u>2</u> | UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN |
| | | <input type="checkbox"/> PRIVATE PROPERTY | | Clermont County Sheriff | 01300 | | | 1 |

| | | | | |
|----------------------|--|--|--|--|
| COUNTY* <u>13</u> | LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP <u>3</u> | LOCATION: CITY, VILLAGE, TOWNSHIP* Monroe (Township of) | CRASH DATE / TIME* 09/24/2021 09:55 | CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY <u>5</u> |
|----------------------|--|--|--|--|

| | | | | | | |
|------------|--------------|--|---|-----------------|---|--|
| ROUTE TYPE | ROUTE NUMBER | PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | LOCATION ROAD NAME Berry | ROAD TYPE RD | LATITUDE DECIMAL DEGREES 38.995589 | |
| ROUTE TYPE | ROUTE NUMBER | PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 2208 | ROAD TYPE | LONGITUDE DECIMAL DEGREES -84.167737 | |

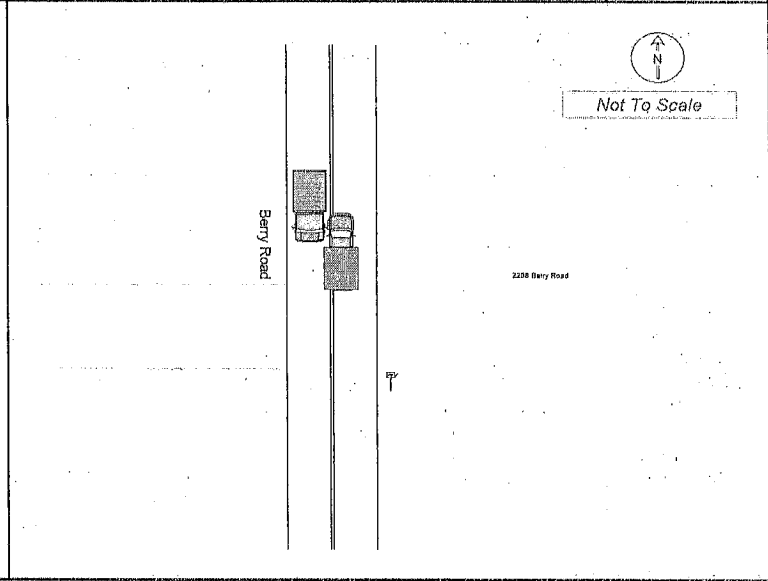
| | | | | | | |
|---|--|---|---|---|---|---|
| REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # <u>3</u> | DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE | ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS | ROAD TYPE 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 | INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES <u> </u> |
| 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 <u>1</u> | 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 <u>8</u> | DIRECTION OF TRAVEL 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST <u> </u> | MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER / UNKNOWN <u> </u> |
|---|---|--|---|

| | | | | | |
|---|--|--|---|---|---|
| <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 <u> </u> | 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 <u> </u> | CONTOUR <u>1</u> 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER /UNKNOWN | CONDITIONS <u>1</u> 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER / UNKNOWN | SURFACE <u>2</u> 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER / UNKNOWN |
|---|--|--|---|---|---|

| | |
|--|---|
| LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN <u>1</u> | 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 <u>1</u> |
|--|---|

NARRATIVE
Unit #1 was traveling North on Berry Road when unit #1 crossed the center line and struck Unit #2's mirror causing minor damage to the driver side of unit #2.



| | | | | |
|--|--|---|---|---|
| CRASH REPORTED DATE / TIME 09/24/2021 09:55 | DISPATCH DATE / TIME 09/24/2021 10:00 | ARRIVAL DATE / TIME 09/24/2021 10:09 | SCENE CLEARED DATE / TIME 09/24/2021 11:40 | REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST |
| TOTAL TIME ROADWAY CLOSED | OTHER INVESTIGATION TIME | TOTAL MINUTES 100 | OFFICER'S NAME* Rudd, Jeffrey | CHECKED BY OFFICER'S NAME* Scott, D |
| | | | OFFICER'S BADGE NUMBER* R3052 | CHECKED BY OFFICER'S BADGE NUMBER* R2367 |

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

UNIT # 1 **OWNER NAME:** LAST, FIRST, MIDDLE (SAME AS DRIVER)
OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
 6721 DIXIE HWY, FLORENCE, KY, 41042

OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
 BOB AND PAT ENTERPRISES, 6721 DIXIE HWY, FLORENCE, K

LP STATE: KY **LICENSE-PLATE #** 338976 **VEHICLE IDENTIFICATION #** 1FDNXGEC2MDF08794 **VEHICLE YEAR** 2021 **VEHICLE MAKE** FORD

INSURANCE VERIFIED **INSURANCE COMPANY** MOTORIST MUTUAL **INSURANCE POLICY #** 5000228779 **COLOR** WHI **VEHICLE MODEL** F-650

COMMERCIAL **GOVERNMENT** **IN EMERGENCY RESPONSE** **US DOT #** 369552 **TOWED BY:** COMPANY NAME

INTERLOCK DEVICE EQUIPPED **HIT/SKIP UNIT** **# OCCUPANTS** 2 **VEHICLE WEIGHT GVWR/GCWR** 2 **HAZARDOUS MATERIAL** **MATERIAL CLASS #** **RELEASED** **PLACARD** **PLACARD ID #**

UNIT TYPE 4

| | | | | |
|-----------------------------|------------------------------------|------------------------|--|---------------------------------|
| 1 - PASSENGER CAR | 6 - VAN (9-15 SEATS) | 12 - GOLF CART | 18 - LIMO (LIVERY VEHICLE) | 23 - PEDESTRIAN/SKATER |
| 2 - PASSENGER VAN (MINIVAN) | 7 - MOTORCYCLE 2-WHEELED | 13 - SNOWMOBILE | 19 - BUS (16+ PASSENGERS) | 24 - WHEELCHAIR (ANY TYPE) |
| 3 - SPORT UTILITY VEHICLE | 8 - MOTORCYCLE 3-WHEELED | 14 - SINGLE UNIT TRUCK | 20 - OTHER VEHICLE | 25 - OTHER NON-MOTORIST BICYCLE |
| 4 - PICK UP | 9 - AUTOCYCLE | 15 - SEMI-TRACTOR | 21 - HEAVY EQUIPMENT | 26 - BICYCLE |
| 5 - CARGO VAN | 10 - MOPED OR MOTORIZED BICYCLE | 16 - FARM EQUIPMENT | 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE | 27 - TRAIN |
| | 11 - ALL TERRAIN VEHICLE (ATV/UTV) | 17 - MOTORHOME | 99 - UNKNOWN OR HIT/SKIP | |

OF TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION
 1 - YES 2 - NO 9 - OTHER / UNKNOWN

AUTONOMOUS MODE LEVEL 0

SPECIAL FUNCTION 19

| | | | | |
|-----------------------------|------------------------|--------------------------|----------------------------|----------------------|
| 1 - NONE | 6 - BUS - CHARTER/TOUR | 11 - FIRE | 16 - FARM | 21 - MAIL CARRIER |
| 2 - TAXI | 7 - BUS - INTERCITY | 12 - MILITARY | 17 - MOWING | 99 - OTHER / UNKNOWN |
| 3 - ELECTRONIC RIDE SHARING | 8 - BUS - SHUTTLE | 13 - POLICE | 18 - SNOW REMOVAL | |
| 4 - SCHOOL TRANSPORT | 9 - BUS - OTHER | 14 - PUBLIC UTILITY | 19 - TOWING | |
| 5 - BUS - TRANSIT/COMMUTER | 10 - AMBULANCE | 15 - CONSTRUCTION EQUIP. | 20 - SAFETY SERVICE PATROL | |

CARGO BODY TYPE 10

| | | | | |
|--|----------------------------------|------------------------|-----------------------|----------------------|
| 1 - NO CARGO BODY TYPE / NOT APPLICABLE | 4 - LOGGING | 7 - GRAIN/CHIPS/GRAVEL | 11 - DUMP | 99 - OTHER / UNKNOWN |
| 2 - BUS | 5 - INTERMODAL CONTAINER CHASSIS | 8 - POLE | 12 - CONCRETE MIXER | |
| 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE | 6 - CARGOVAN /ENCLOSED BOX | 9 - CARGO TANK | 13 - AUTO TRANSPORTER | |
| | | 10 - FLAT BED | 14 - GARBAGE/REFUSE | |

VEHICLE DEFECTS

| | | | | |
|------------------|------------------|---------------------------------|-----------------------------------|----------------------|
| 1 - TURN SIGNALS | 4 - BRAKES | 7 - WORN OR SLICK TIRES | 9 - MOTOR TROUBLE | 99 - OTHER / UNKNOWN |
| 2 - HEAD LAMPS | 5 - STEERING | 8 - TRAILER EQUIPMENT DEFECTIVE | 10 - DISABLED FROM PRIOR ACCIDENT | |
| 3 - TAIL LAMPS | 6 - TIRE BLOWOUT | | | |

NON-MOTORIST LOCATION

| | | | | |
|---------------------------------------|----------------------------------|----------------------------|--|----------------------|
| 1 - INTERSECTION - MARKED CROSSWALK | 4 - MIDBLOCK - MARKED CROSSWALK | 7 - SHOULDER/ROADSIDE | 10 - DRIVEWAY ACCESS | 99 - OTHER / UNKNOWN |
| 2 - INTERSECTION - UNMARKED CROSSWALK | 5 - TRAVEL LANE - OTHER LOCATION | 8 - SIDEWALK | 11 - SHARED USE PATHS OR TRAILS | |
| 3 - INTERSECTION - OTHER | 6 - BICYCLE LANE | 9 - MEDIAN/CROSSING ISLAND | 12 - FIRST RESPONDER AT INCIDENT SCENE | |

ACTION 3

| | | | | |
|----------------------------|---------------------------|--|---|--|
| 1 - NON-CONTACT | 1 - STRAIGHT AHEAD | 9 - LEAVING TRAFFIC LANE | 15 - WALKING, RUNNING, JOGGING, PLAYING | 21 - STANDING OUTSIDE DISABLED VEHICLE |
| 2 - NON-COLLISION | 2 - BACKING | 10 - PARKED | 16 - WORKING | 99 - OTHER / UNKNOWN |
| 3 - STRIKING | 3 - CHANGING LANES | 11 - STOPPED OR STOPPED IN TRAFFIC | 17 - PUSHING VEHICLE | |
| 4 - STRUCK | 4 - OVERTAKING/PASSING | 12 - DRIVERLESS | 18 - APPROACHING OR LEAVING VEHICLE | |
| 5 - BOTH STRIKING & STRUCK | 5 - MAKING RIGHT TURN | 13 - NEGOTIATING A CURVE | 19 - STANDING | |
| 9 - OTHER / UNKNOWN | 6 - MAKING LEFT TURN | 14 - ENTERING OR CROSSING SPECIFIED LOCATION | 20 - OTHER NON-MOTORIST | |
| | 7 - MAKING U-TURN | | | |
| | 8 - ENTERING TRAFFIC LANE | | | |

CONTRIBUTING CIRCUMSTANCES 7

| | | | | |
|----------------------|--------------------------|--|--------------------------------------|--------------------------------|
| 1 - NONE | 8 - FOLLOWING TOO CLOSE | 13 - IMPROPER START FROM A PARKED POSITION | 18 - OPERATING DEFECTIVE EQUIPMENT | 23 - OPENING DOOR INTO ROADWAY |
| 2 - FAILURE TO YIELD | 9 - IMPROPER LANE CHANGE | 14 - STOPPED OR PARKED ILLEGALLY | 19 - LOAD SHIFTING /FALLING/SPILLING | 99 - OTHER IMPROPER ACTION |
| 3 - RAN RED LIGHT | 10 - IMPROPER PASSING | 15 - SWERVING TO AVOID | 20 - IMPROPER CROSSING | |
| 4 - RAN STOP SIGN | 11 - DROVE OFF ROAD | 16 - WRONG WAY | 21 - LYING IN ROADWAY | |
| 5 - UNSAFE SPEED | 12 - IMPROPER BACKING | 17 - VISION OBSTRUCTION | 22 - NOT DISCERNIBLE | |
| 6 - IMPROPER TURN | | | | |
| 7 - LEFT OF CENTER | | | | |

SEQUENCE OF EVENTS

| | | | | | |
|-------------|-------------------------------------|--|--------------------------|--------------------------------------|---|
| 1 11 | 1 - OVERTURN/ROLLOVER | 7 - SEPARATION OF UNITS | 12 - DOWNHILL RUNAWAY | 19 - ANIMAL - OTHER | 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE |
| 2 20 | 2 - FIRE/EXPLOSION | 8 - RAN OFF ROAD RIGHT | 13 - OTHER NON-COLLISION | 20 - MOTOR VEHICLE IN TRANSPORT | 24 - OTHER MOVABLE OBJECT |
| 3 | 3 - IMMERSION | 9 - RAN OFF ROAD LEFT | 14 - PEDESTRIAN | 21 - PARKED MOTOR VEHICLE | |
| 4 | 4 - JACKKNIFE | 10 - CROSS MEDIAN | 15 - PEDALCYCLE | 22 - WORK ZONE MAINTENANCE EQUIPMENT | |
| 5 | 5 - CARGO / EQUIPMENT LOSS OR SHIFT | 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL | 16 - RAILWAY VEHICLE | 49 - FIRE HYDRANT | |
| 6 | 6 - EQUIPMENT FAILURE | | 17 - ANIMAL - FARM | 50 - WORK ZONE MAINTENANCE EQUIPMENT | |
| | | | 18 - ANIMAL - DEER | | |

COLLISION WITH FIXED OBJECT - STRUCK

| | | | | |
|--|-------------------------------|----------------------------------|--------------------------------------|-------------------------|
| 25 - IMPACT ATTENUATOR / CRASH CUSHION | 31 - GUARDRAIL END | 38 - OVERHEAD SIGN POST | 45 - EMBANKMENT | 52 - BUILDING |
| 26 - BRIDGE OVERHEAD STRUCTURE | 32 - PORTABLE BARRIER | 39 - LIGHT / LUMINARIES SUPPORT | 46 - FENCE | 53 - TUNNEL |
| 27 - BRIDGE PIER OR ABUTMENT | 33 - MEDIAN CABLE BARRIER | 40 - UTILITY POLE | 47 - MAILBOX | 54 - OTHER FIXED OBJECT |
| 28 - BRIDGE PARAPET | 34 - MEDIAN GUARDRAIL BARRIER | 41 - OTHER POST, POLE OR SUPPORT | 48 - TREE | 99 - OTHER / UNKNOWN |
| 29 - BRIDGE RAIL | 35 - MEDIAN CONCRETE BARRIER | 42 - CULVERT | 49 - FIRE HYDRANT | |
| 30 - GUARDRAIL FACE | 36 - MEDIAN OTHER BARRIER | 43 - CURB | 50 - WORK ZONE MAINTENANCE EQUIPMENT | |
| | 37 - TRAFFIC SIGN POST | 44 - DITCH | 51 - WALL | |

FIRST HARMFUL EVENT 1 **MOST HARMFUL EVENT** 2

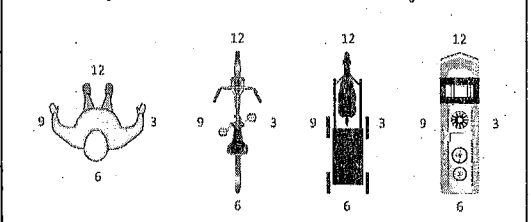
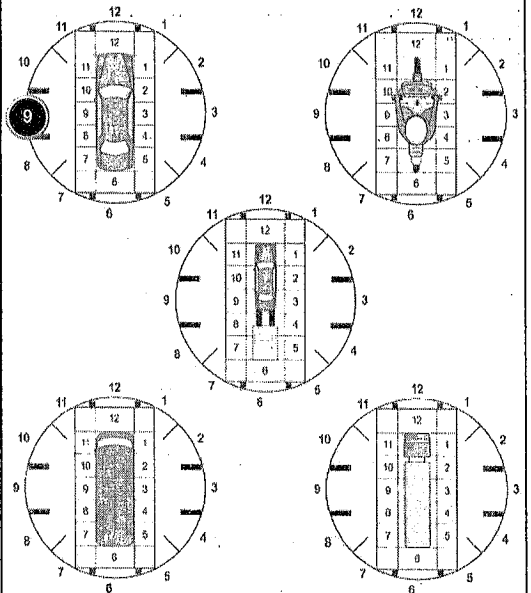
LOCAL REPORT NUMBER
 000210033644

DAMAGE

DAMAGE SCALE

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

DAMAGED AREA(S)
 INDICATE ALL THAT APPLY



- NO DAMAGE [0] - UNDERCARRIAGE [14]
 - TOP [13] - ALL AREAS [15]
 - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT

0 - NO DAMAGE 14 - UNDERCARRIAGE
 1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
 13 - TOP 99 - UNKNOWN

TRAFFIC

| | |
|----------------------------|---|
| TRAFFICWAY FLOW | TRAFFIC CONTROL |
| 1 - ONE-WAY 2 - TWO-WAY | 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL |

OF THROUGH LANES ON ROAD 2 **RAIL GRADE CROSSING** 1

1 - NOT INVOLVED
 2 - INVOLVED-ACTIVE CROSSING
 3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION

| | |
|-----------|---------------------|
| 1 - NORTH | 5 - NORTHEAST |
| 2 - SOUTH | 6 - NORTHWEST |
| 3 - EAST | 7 - SOUTHEAST |
| 4 - WEST | 8 - SOUTHWEST |
| | 9 - OTHER / UNKNOWN |

UNIT SPEED 30 **DETECTED SPEED** 1

POSTED SPEED 40

1 - STATED / ESTIMATED SPEED
 2 - CALCULATED / EDR
 3 - UNDETERMINED

OWNER
VEHICLE
EVENTS

000210033644

OWNER

UNIT # 2 OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) RHODEN, JOSEPH, T. OWNER PHONE: INCLUDE AREA CODE (☐ SAME AS DRIVER) [REDACTED]

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
140 SANTA MARIA DR., AMELIA, OH, 45102

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

DAMAGE

DAMAGE SCALE

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

VEHICLE

LP STATE OH LICENSE PLATE # JGT3039 VEHICLE IDENTIFICATION # 1GDGG31V871903308 VEHICLE YEAR 2007 VEHICLE MAKE GMC

INSURANCE VERIFIED INSURANCE COMPANY DAIRY LAND INSURANCE POLICY # 354677379 COLOR WHI VEHICLE MODEL OTHER/UNKNOWN

TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE US DOT # TOWED BY: COMPANY NAME

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS 2 VEHICLE WEIGHT GVWR/GCWR: 1 - ≤ 10K LBS., 2 - 10,001 - 26K LBS., 3 - > 26K LBS. HAZARDOUS MATERIAL CLASS # PLACARD ID #

DAMAGED AREA(S)
INDICATE ALL THAT APPLY

NO DAMAGE [0] UNDERCARRIAGE [14]
 TOP [13] ALL AREAS [15]
 UNIT NOT AT SCENE [16]

14 UNIT TYPE

1 - PASSENGER CAR 6 - VAN (9-15 SEATS) 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN/SKATER
2 - PASSENGER VAN (MINIVAN) 7 - MOTORCYCLE 2-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE)
3 - SPORT UTILITY VEHICLE 8 - MOTORCYCLE 3-WHEELED 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST
4 - PICK UP 9 - AUTOCYCLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE
5 - CARGO VAN 10 - MOPED OR MOTORIZED BICYCLE 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE 27 - TRAIN
OF TRAILING UNITS: 2 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP

2 WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
1 - YES 2 - NO 9 - OTHER / UNKNOWN 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION
AUTONOMOUS MODE LEVEL: 0 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

1 SPECIAL FUNCTION

1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE 16 - FARM 21 - MAIL CARRIER
2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN
3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL
4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING
5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIP. 20 - SAFETY SERVICE PATROL

6 CARGO BODY TYPE

1 - NO CARGO BODY TYPE / NOT APPLICABLE 4 - LOGGING 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99 - OTHER / UNKNOWN
2 - BUS 5 - INTERMODAL CONTAINER CHASSIS 8 - POLE 12 - CONCRETE MIXER
3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 6 - CARGOVAN / ENCLOSED BOX 9 - CARGO TANK 13 - AUTO TRANSPORTER
10 - FLAT BED 14 - GARBAGE/REFUSE

VEHICLE DEFECTS

1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN
2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTIVE 10 - DISABLED FROM PRIOR ACCIDENT
3 - TAIL LAMPS 6 - TIRE BLOWOUT

NON-MOTORIST LOCATION

1 - INTERSECTION - MARKED CROSSWALK 4 - MIDBLOCK - MARKED CROSSWALK 7 - SHOULDER/ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN
2 - INTERSECTION - UNMARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION 8 - SIDEWALK 11 - SHARED USE PATHS OR TRAILS
3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12 - FIRST RESPONDER AT INCIDENT SCENE

4 ACTION

1 - NON-CONTACT 1 - STRAIGHT AHEAD 9 - LEAVING TRAFFIC LANE 15 - WALKING, RUNNING, JOGGING, PLAYING 21 - STANDING OUTSIDE DISABLED VEHICLE
2 - NON-COLLISION 2 - BACKING 10 - PARKED 16 - WORKING 99 - OTHER / UNKNOWN
3 - STRIKING 3 - CHANGING LANES 11 - SLOWING OR STOPPED IN TRAFFIC 17 - PUSHING VEHICLE OR LEAVING VEHICLE
4 - STRUCK 4 - OVERTAKING/PASSING 12 - DRIVERLESS 18 - APPROACHING OR LEAVING VEHICLE
5 - BOTH STRIKING & STRUCK 5 - MAKING RIGHT TURN 13 - NEGOTIATING A CURVE 19 - STANDING
6 - MAKING LEFT TURN 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 20 - OTHER NON-MOTORIST
9 - OTHER / UNKNOWN 7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE

INITIAL POINT OF CONTACT

0 - NO DAMAGE 14 - UNDERCARRIAGE
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
99 - UNKNOWN
13 - TOP

1 CONTRIBUTING CIRCUMSTANCES

1 - NONE 8 - FOLLOWING TOO CLOSE / A/C/D/A 13 - IMPROPER START FROM A PARKED POSITION 18 - OPERATING DEFECTIVE EQUIPMENT 23 - OPENING DOOR INTO ROADWAY
2 - FAILURE TO YIELD 9 - IMPROPER LANE CHANGE 14 - STOPPED OR PARKED ILLEGALLY 19 - LOAD SHIFTING / FALLING/SPILLING 99 - OTHER IMPROPER ACTION
3 - RAN RED LIGHT 10 - IMPROPER PASSING 15 - SWERVING TO AVOID 20 - IMPROPER CROSSING
4 - RAN STOP SIGN 11 - DROVE OFF ROAD 16 - WRONG WAY 21 - LYING IN ROADWAY
5 - UNSAFE SPEED 12 - IMPROPER BACKING 17 - VISION OBSTRUCTION 22 - NOT DISCERNIBLE
6 - IMPROPER TURN
7 - LEFT OF CENTER

TRAFFIC

TRAFFICWAY FLOW: 1 - ONE-WAY, 2 - TWO-WAY 2

TRAFFIC CONTROL: 1 - ROUNDABOUT, 4 - STOP SIGN, 2 - SIGNAL, 5 - YIELD SIGN, 3 - FLASHER, 6 - NO CONTROL 6

SEQUENCE OF EVENTS

20 1 - OVERTURN/ROLLOVER 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 19 - ANIMAL - OTHER 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
2 - FIRE/EXPLOSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 20 - MOTOR VEHICLE IN TRANSPORT
3 - IMMERSION 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 21 - PARKED MOTOR VEHICLE
4 - JACKKNIFE 10 - CROSS MEDIAN 15 - PEDALCYCLE 22 - WORK ZONE MAINTENANCE EQUIPMENT
5 - CARGO / EQUIPMENT LOSS OR SHIFT 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE
6 - EQUIPMENT FAILURE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 24 - OTHER MOVABLE OBJECT

OF THROUGH LANES ON ROAD: 2

RAIL GRADE CROSSING: 1 - NOT INVOLVED, 2 - INVOLVED-ACTIVE CROSSING, 3 - INVOLVED-PASSIVE CROSSING 1

EVENTS

25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 38 - OVERHEAD SIGN POST 45 - EMBANKMENT 52 - BUILDING
26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 39 - LIGHT / LUMINARIES SUPPORT 46 - FENCE 53 - TUNNEL
27 - BRIDGE PIER OR ABUTMENT 33 - MEDIAN CABLE BARRIER 40 - UTILITY POLE 47 - MAILBOX 54 - OTHER FIXED OBJECT
28 - BRIDGE PARAPET 34 - MEDIAN GUARDRAIL BARRIER 41 - OTHER POST, POLE OR SUPPORT 48 - TREE 99 - OTHER / UNKNOWN
29 - BRIDGE RAIL 35 - MEDIAN CONCRETE BARRIER 42 - CULVERT 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT
30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 43 - CURB 51 - WALL

1 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

UNIT / NON-MOTORIST DIRECTION

FROM 1 TO 2

1 - NORTH 5 - NORTHEAST
2 - SOUTH 6 - NORTHWEST
3 - EAST 7 - SOUTHEAST
4 - WEST 8 - SOUTHWEST
9 - OTHER / UNKNOWN

UNIT SPEED: 25

POSTED SPEED: 40

DETECTED SPEED: 1 2 - CALCULATED / EDR, 3 - UNDETERMINED

MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER

000210033644

| | | | | | | | | | | |
|---|---|----------------------------|---|--|---|-----------------------|--|---|--|--|
| UNIT # 1 | NAME: LAST, FIRST, MIDDLE SHEPPERD, JONOTHAN, D. | | | | DATE OF BIRTH 08/26/1981 | | AGE 40 | GENDER M | | |
| ADDRESS: STREET, CITY, STATE, ZIP 4076 RIVER ROAD, HEBRON, KY, 41048 | | | | | CONTACT PHONE - INCLUDE AREA CODE [REDACTED] | | | | | |
| INJURIES 5 | INJURED TAKEN BY 1 | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED 4 | <input type="checkbox"/> DOT-COMPLIANT <input checked="" type="checkbox"/> MC HELMET | SEATING POSITION 1 | AIR BAG USAGE 1 | EJECTION 1 | TRAPPED 1 | |
| OL STATE KY | OPERATOR LICENSE NUMBER [REDACTED] | | OFFENSE CHARGED 4511.25A | LOCAL CODE <input type="checkbox"/> | OFFENSE DESCRIPTION DRIVING LEFT OF CENTER--TWO LANE | | | CITATION NUMBER 01300R30520924202110 | | |
| OL CLASS 4 | ENDORSEMENT | 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 1 | ALCOHOL TEST STATUS: 1 TYPE: 1 VALUE: | | DRUG TEST(S) STATUS: 1 TYPE: 1 RESULTS SELECT UP TO 4 | |

| | | | | | | | | | | |
|---|---|----------------------------|---|--|---|-----------------------|--|-----------------|--|--|
| UNIT # 2 | NAME: LAST, FIRST, MIDDLE RHODEN, JOSEPH, T. | | | | DATE OF BIRTH 07/22/1991 | | AGE 30 | GENDER M | | |
| ADDRESS: STREET, CITY, STATE, ZIP 140 SANTA MARIA DR., AMELIA, OH, 45102 | | | | | CONTACT PHONE - INCLUDE AREA CODE [REDACTED] | | | | | |
| INJURIES 5 | INJURED TAKEN BY 1 | EMS AGENCY (NAME) | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) | SAFETY EQUIPMENT USED 4 | <input type="checkbox"/> DOT-COMPLIANT <input checked="" type="checkbox"/> MC HELMET | SEATING POSITION 1 | AIR BAG USAGE 1 | EJECTION 1 | TRAPPED 1 | |
| OL STATE OH | OPERATOR LICENSE NUMBER [REDACTED] | | OFFENSE CHARGED | LOCAL CODE <input type="checkbox"/> | OFFENSE DESCRIPTION | | | CITATION NUMBER | | |
| OL CLASS 4 | ENDORSEMENT | 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 1 | ALCOHOL TEST STATUS: 1 TYPE: 1 VALUE: | | DRUG TEST(S) STATUS: 1 TYPE: 1 RESULTS 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 | <input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET | SEATING POSITION | AIR BAG USAGE | EJECTION | TRAPPED | |
| OL STATE | OPERATOR LICENSE NUMBER | | OFFENSE CHARGED | LOCAL CODE <input type="checkbox"/> | OFFENSE DESCRIPTION | | | CITATION NUMBER | | |
| OL CLASS | ENDORSEMENT | 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: RESULTS SELECT UP TO 4 | |

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



OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER
000210033644

OCCUPANT

UNIT # 2 NAME: LAST, FIRST, MIDDLE
WELLS, JOSEPH, M.

ADDRESS: STREET, CITY, STATE, ZIP
5458 BEECHMONT AVE., CINCINNATI, OH, 45230

INJURIES 5 INJURED TAKEN BY 1 EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT 3

DOT-COMPLIANT MC HELMET

DATE OF BIRTH 11/30/1971 AGE 49 GENDER M

CONTACT PHONE - INCLUDE AREA CODE

SEATING POSITION 2 AIR BAG USAGE 1 EJECTION 1 TRAPPED 1

OCCUPANT

UNIT # 2 NAME: LAST, FIRST, MIDDLE
GROOMS, ANTHONY

ADDRESS: STREET, CITY, STATE, ZIP
2110 SALVADOR ST. APT. 34, CINCINNATI, OH, 45230

INJURIES 5 INJURED TAKEN BY 1 EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT 4

DOT-COMPLIANT MC HELMET

DATE OF BIRTH 05/05/1987 AGE 34 GENDER M

CONTACT PHONE - INCLUDE AREA CODE

SEATING POSITION 3 AIR BAG USAGE 1 EJECTION 1 TRAPPED 1

OCCUPANT

UNIT # NAME: LAST, FIRST, MIDDLE

ADDRESS: STREET, CITY, STATE, ZIP

INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT

DOT-COMPLIANT MC HELMET

DATE OF BIRTH AGE GENDER

CONTACT PHONE - INCLUDE AREA CODE

SEATING POSITION AIR BAG USAGE EJECTION TRAPPED

OCCUPANT

UNIT # NAME: LAST, FIRST, MIDDLE

ADDRESS: STREET, CITY, STATE, ZIP

INJURIES INJURED TAKEN BY EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT

DOT-COMPLIANT MC HELMET

DATE OF BIRTH AGE GENDER

CONTACT PHONE - INCLUDE AREA CODE

SEATING POSITION AIR BAG USAGE EJECTION TRAPPED

| INJURIES | SAFETY EQUIPMENT USED | SEATING POSITION | AIR BAG USAGE |
|--|---|---|------------------------------------|
| 1 - FATAL | 1 - NONE USED - VEHICLE OCCUPANT | 1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) | 1 - NOT DEPLOYED |
| 2 - SUSPECTED SERIOUS INJURY | 2 - SHOULDER BELT ONLY USED | 2 - FRONT - MIDDLE | 2 - DEPLOYED FRONT |
| 3 - SUSPECTED MINOR INJURY | 3 - LAP BELT ONLY USED | 3 - FRONT - RIGHT SIDE | 3 - DEPLOYED SIDE |
| 4 - POSSIBLE INJURY | 4 - SHOULDER & LAP BELT USED | 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) | 4 - DEPLOYED BOTH FRONT/SIDE |
| 5 - NO APPARENT INJURY | 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING | 5 - SECOND - MIDDLE | 5 - NOT APPLICABLE |
| INJURED TAKEN BY | 6 - CHILD RESTRAINT SYSTEM - REAR FACING | 6 - SECOND - RIGHT SIDE | 9 - DEPLOYMENT UNKNOWN |
| 1 - NOT TRANSPORTED / TREATED AT SCENE | 7 - BOOSTER SEAT | 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) | EJECTION |
| 2 - EMS | 8 - HELMET USED | 8 - THIRD - MIDDLE | 1 - NOT EJECTED |
| 3 - POLICE | 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC) | 9 - THIRD - RIGHT SIDE | 2 - PARTIALLY EJECTED |
| 9 - OTHER / UNKNOWN | 10 - REFLECTIVE CLOTHING | 10 - SLEEPER SECTION OF TRUCK CAB | 3 - TOTALLY EJECTED |
| GENDER | 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP) | 4 - NOT APPLICABLE |
| F - FEMALE | 99 - OTHER / UNKNOWN | 12 - PASSENGER IN UNENCLOSED CARGO AREA | TRAPPED |
| M - MALE | | 13 - TRAILING UNIT | 1 - NOT TRAPPED |
| U - OTHER / UNKNOWN | | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | 2 - EXTRICATED BY MECHANICAL MEANS |
| | | 15 - NON-MOTORIST | 3 - FREED BY NON-MECHANICAL MEANS |
| | | 99 - OTHER / UNKNOWN | |

WITNESS

NAME: LAST, FIRST, MIDDLE

ADDRESS: STREET, CITY, STATE, ZIP

DATE OF BIRTH AGE GENDER

CONTACT PHONE - INCLUDE AREA CODE

WITNESS

NAME: LAST, FIRST, MIDDLE

ADDRESS: STREET, CITY, STATE, ZIP

DATE OF BIRTH AGE GENDER

CONTACT PHONE - INCLUDE AREA CODE

WITNESS

NAME: LAST, FIRST, MIDDLE

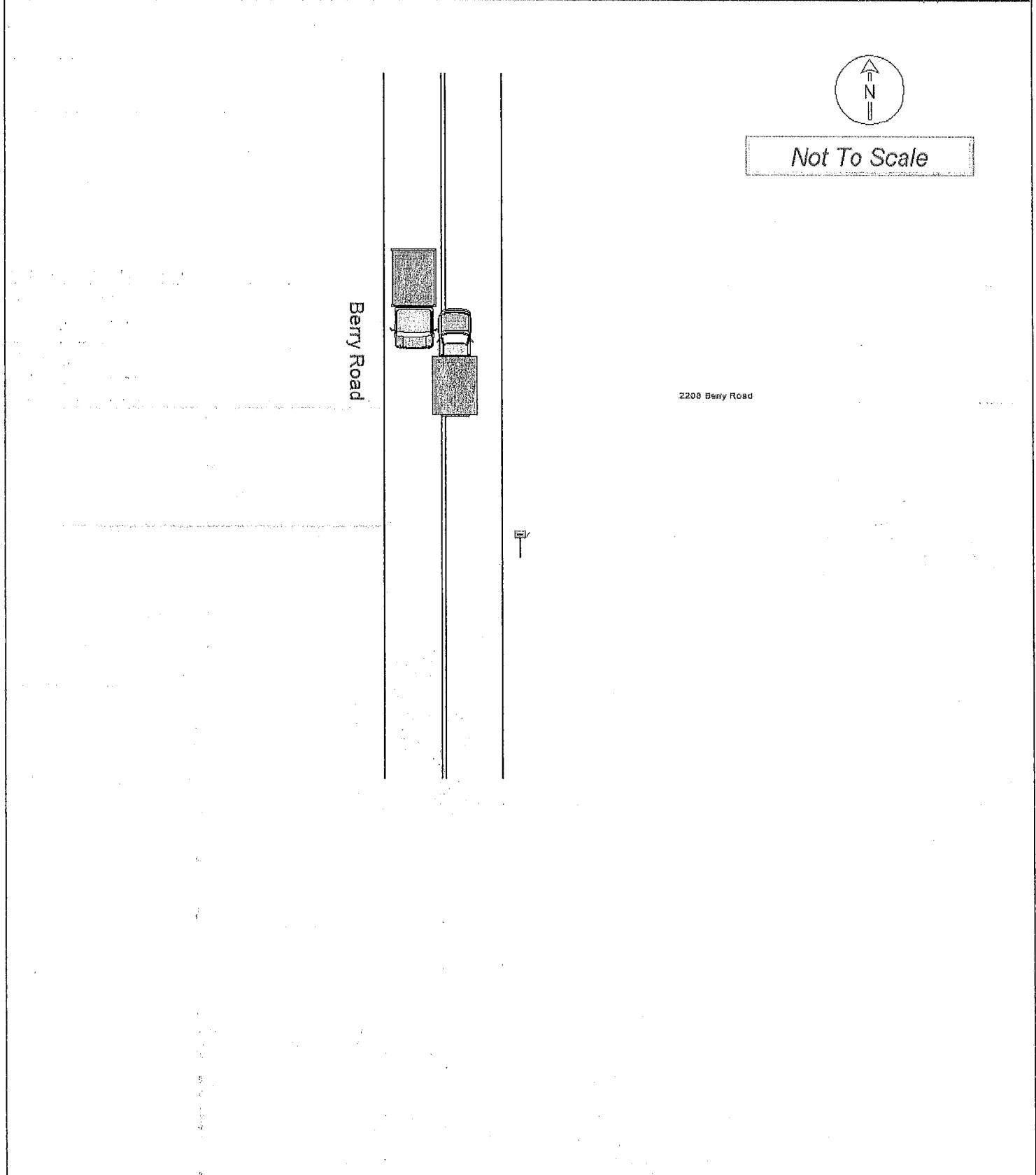
ADDRESS: STREET, CITY, STATE, ZIP

DATE OF BIRTH AGE GENDER

CONTACT PHONE - INCLUDE AREA CODE

OHIO TRAFFIC ACCIDENT - OH2 DIAGRAM

| | | |
|--|--|------------------------------------|
| LOCAL REPORT NUMBER 000210033644 | REPORTING AGENCY Clermont County Sheriff | Date Of Crash 09/24/2021 |
| IN COUNTY OF Clermont County | ACCIDENT LOCATION Berry | |



| | |
|--------------------|---------------------------|
| OFFICERS SIGNATURE | BADGE NO. R3052 |
|--------------------|---------------------------|