

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER *

000220000644

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

COUNTY* 13	LOCALITY* 3	LOCATION: CITY, VILLAGE, TOWNSHIP* Jackson (Township of)	CRASH DATE / TIME* 01/06/2022 15:24	CRASH SEVERITY 5
---------------	----------------	---	--	---------------------

ROUTE TYPE SR	ROUTE NUMBER 133	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DECIMAL DEGREES 39.135707
------------------	---------------------	--	--------------------	-----------	---------------------------------------

ROUTE TYPE US	ROUTE NUMBER 50	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES -84.069224
------------------	--------------------	--	---	-----------	---

REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	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	INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA
---	--	---	--	---

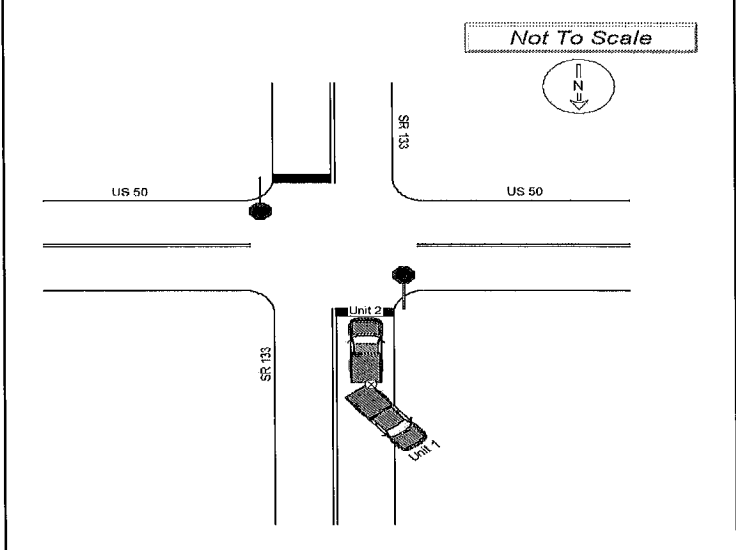
DISTANCE FROM REFERENCE 1.00	DISTANCE UNIT OF MEASURE 2 1 - MILES 2 - FEET 3 - YARDS	ROADWAY <input type="checkbox"/> ROADWAY DIVIDED
---------------------------------	---	---

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	9 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED USE PATHS OR TRAILS 13 - BIKE LANE 14 - TOLL BOOTH 99 - OTHER / UNKNOWN	MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION 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	DIRECTION OF TRAVEL 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	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
---	--	---	---	--

<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	CONDITIONS 3	SURFACE 2
---	---	---	--------------	-----------------	--------------

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

NARRATIVE
Both unit 1 and unit 2 were traveling South bound on SR 133. Unit 2 came to a stop at the stop sign at the intersection of SR 133 and Us 50. Unit 1 was unable to stop and began sliding towards unit 2. The driver of unit 1 was attempting to avoid hitting unit 2 so he tried to steer his vehicle into the ditch. The driver of unit 1 lost control of the vehicle and struck unit 2 in the rear with the rear of his vehicle after going onto a spin.



CRASH REPORTED DATE / TIME 01/06/2022 15:24	DISPATCH DATE / TIME 01/06/2022 15:24	ARRIVAL DATE / TIME 01/06/2022 15:24	SCENE CLEARED DATE / TIME 01/06/2022 16:20	REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES 56	OFFICER'S NAME* Deputy C. Jester	CHECKED BY OFFICER'S NAME* Scott, D
			OFFICER'S BADGE NUMBER* 12834	CHECKED BY OFFICER'S BADGE NUMBER* R2367
				<input checked="" type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPIS)

OWNER

UNIT # 1 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)
 MINK, TARA, NICOLE

OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER)
 2381 VISTA LAKE DRIVE, BATAVIA, OH, 45103

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)

LP STATE OH LICENSE PLATE # JEF2105 VEHICLE IDENTIFICATION # 2GTEK13M271561772 VEHICLE YEAR 2007 VEHICLE MAKE GMC

INSURANCE VERIFIED INSURANCE COMPANY ALLSTATE INSURANCE POLICY # 992617818 COLOR BLU VEHICLE MODEL SIERRA

TYPE OF USE: COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

US DOT # _____ TOWED BY: COMPANY NAME _____

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS _____

VEHICLE WEIGHT GVWR/GCWR: 1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - > 26K LBS.

HAZARDOUS MATERIAL: MATERIAL CLASS # _____ RELEASED PLACARD ID # _____

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

VEHICLE TYPE: 4

VEHICLE WEIGHT GVWR/GCWR: 0

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 7

VEHICLE DEFECTS: 18

LOCAL REPORT NUMBER
000220000644

DAMAGE

DAMAGE SCALE
 1 - NONE
 2 - MINOR DAMAGE
 3 - FUNCTIONAL 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
 1-12 - REFER TO UNIT DIAGRAM
 13 - TOP
 14 - UNDERCARRIAGE
 15 - VEHICLE NOT AT SCENE
 99 - UNKNOWN

TRAFFIC

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

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

OF THROUGH LANES ON ROAD: 2

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

UNIT / NON-MOTORIST DIRECTION
 FROM 1 TO 2

UNIT SPEED: 40

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

POSTED SPEED: 55

OWNER

UNIT # 2 OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)
 ROOFING INC., DEER PARK

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
 7201 BLUE ASH ROAD, CINCINNATI, OH, 45236

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

VEHICLE

LP STATE OH LICENSE PLATE # PJS6411 VEHICLE IDENTIFICATION # 1FTMF1C82HKD33923 VEHICLE YEAR 2017 VEHICLE MAKE FORD

INSURANCE VERIFIED INSURANCE COMPANY THE CINCINNATI INSURANCE C INSURANCE POLICY # EBA0182677 COLOR WHI VEHICLE MODEL F-150

COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE TYPE OF USE

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT # OCCUPANTS 0 VEHICLE WEIGHT GVWR/GCWR
 1 - ≤10K LBS.
 2 - 10.001 - 26K LBS.
 3 - > 26K LBS.

HAZARDOUS MATERIAL CLASS # 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
 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 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN
 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION

AUTONOMOUS MODE LEVEL 0

1 - PARTIAL AUTOMATION 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

SPECIAL FUNCTION 1

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 1

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 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 AT IMPACT

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 4 PRE-CRASH ACTIONS 11

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
 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 7 - MAKING U-TURN 14 - ENTERING OR CROSSING SPECIFIED LOCATION 20 - OTHER NON-MOTORIST
 8 - ENTERING TRAFFIC LANE

CONTRIBUTING CIRCUMSTANCES 1

1 - NONE 8 - FOLLOWING TOO CLOSE / ACD/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 99 - OTHER IMPROPER ACTION
 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 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
 6 - EQUIPMENT FAILURE 17 - ANIMAL - FARM 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 1

LOCAL REPORT NUMBER
 000220000644

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 2 TRAFFIC CONTROL 4

1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN
 2 - TWO-WAY 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

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 0 DETECTED SPEED 1

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

POSTED SPEED 55



OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER

000220000644

OCCUPANT	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	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
OCCUPANT	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	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
OCCUPANT	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	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
OCCUPANT	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	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED

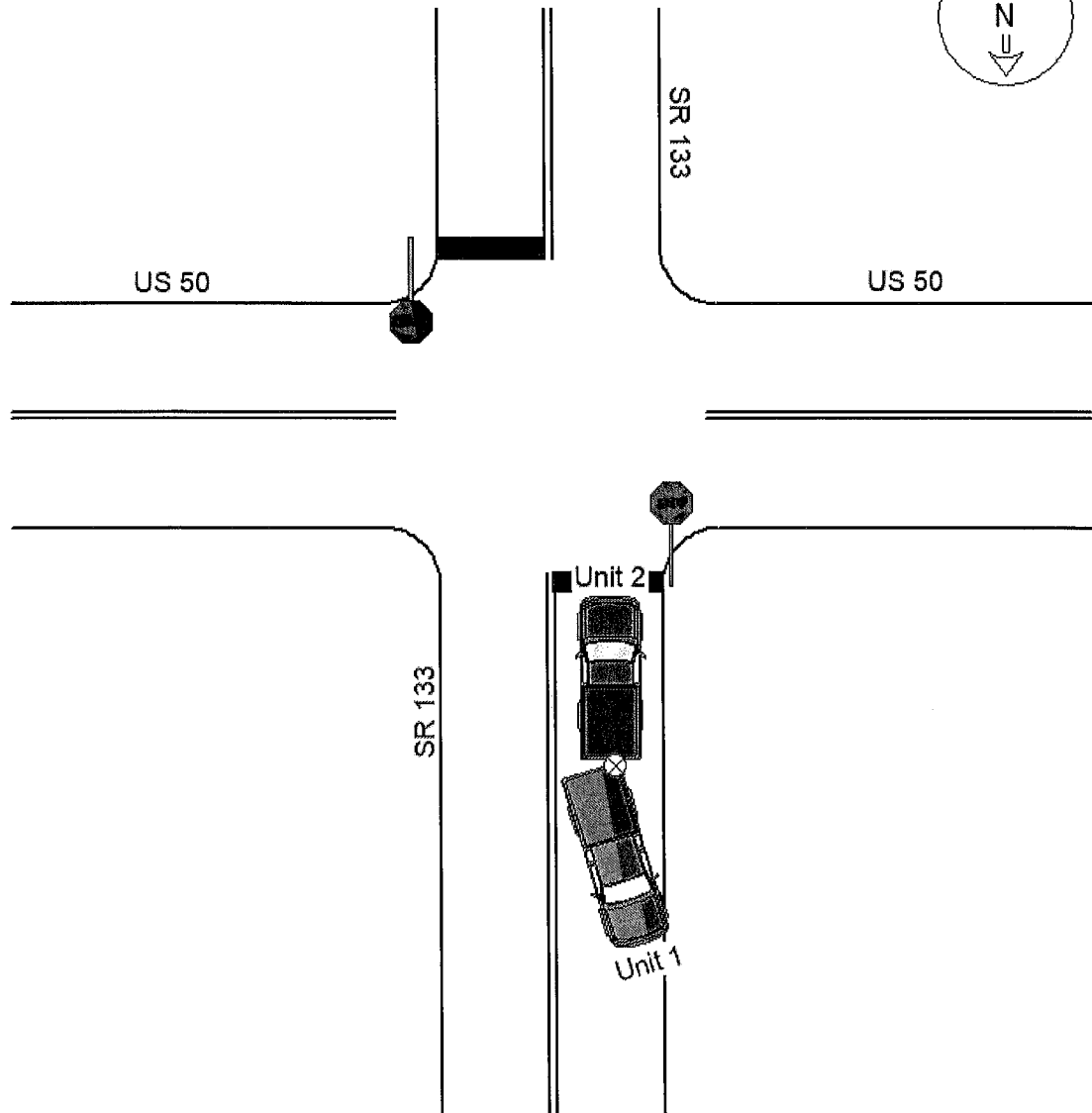
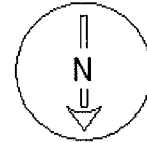
INJURIES	SAFETY EQUIPMENT USED	SEATING POSITION	AIR BAG USAGE
1 - FATAL	1 - NONE USED - VEHICLE OCCUPANT	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED
2 - SUSPECTED SERIOUS INJURY	2 - SHOULDER BELT ONLY USED	2 - FRONT - MIDDLE	2 - DEPLOYED FRONT
3 - SUSPECTED MINOR INJURY	3 - LAP BELT ONLY 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
	6 - CHILD RESTRAINT SYSTEM - REAR FACING	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN
INJURED TAKEN BY	7 - BOOSTER SEAT	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION
1 - NOT TRANSPORTED / TREATED AT SCENE	8 - HELMET USED	8 - THIRD - MIDDLE	1 - NOT EJECTED
2 - EMS	9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED
3 - POLICE	10 - REFLECTIVE CLOTHING	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED
9 - OTHER / UNKNOWN	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
GENDER	99 - OTHER / UNKNOWN	12 - PASSENGER IN UNENCLOSED CARGO AREA	TRAPPED
F - FEMALE		13 - TRAILING UNIT	1 - NOT TRAPPED
M - MALE		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	2 - EXTRICATED BY MECHANICAL MEANS
U - OTHER / UNKNOWN		15 - NON-MOTORIST	3 - FREED BY NON-MECHANICAL MEANS
		99 - OTHER / UNKNOWN	

WITNESS	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH		AGE	GENDER	
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE	
WITNESS	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH		AGE	GENDER	
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE	
WITNESS	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH		AGE	GENDER	
	ADDRESS: STREET, CITY, STATE, ZIP				CONTACT PHONE - INCLUDE AREA CODE	

OHIO TRAFFIC ACCIDENT - OH2 DIAGRAM

LOCAL REPORT NUMBER 000220000644	REPORTING AGENCY Clermont County Sheriff	Date Of Crash 01/06/2022
IN COUNTY OF Clermont County	ACCIDENT LOCATION 133	

Not To Scale



OFFICERS SIGNATURE	BADGE NO. 12834
--------------------	---------------------------