

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER \*

000220020202

<input checked="" type="checkbox"/> PHOTOS TAKEN	<input type="checkbox"/> OH - 2	<input type="checkbox"/> OH - 3	LOCAL INFORMATION		
<input type="checkbox"/> SECONDARY CRASH	<input type="checkbox"/> OH - 1P	<input type="checkbox"/> OTHER	REPORTING AGENCY NAME * Clermont County Sheriff		
<input type="checkbox"/> PRIVATE PROPERTY			NCIC *	01300	

COUNTY* 13	LOCALITY* 3	LOCATION: CITY, VILLAGE, TOWNSHIP* Batavia	HIT/SKIP 1 - SOLVED 2 - UNSOLVED	NUMBER OF UNITS 2	UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN
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ROUTE TYPE US	ROUTE NUMBER 50	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME	ROAD TYPE	CRASH DATE / TIME* 06/27/2022 07:13	CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY
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ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) Benton	ROAD TYPE RD	LATITUDE DECIMAL DEGREES 39.119395	LONGITUDE DECIMAL DEGREES -84.162452
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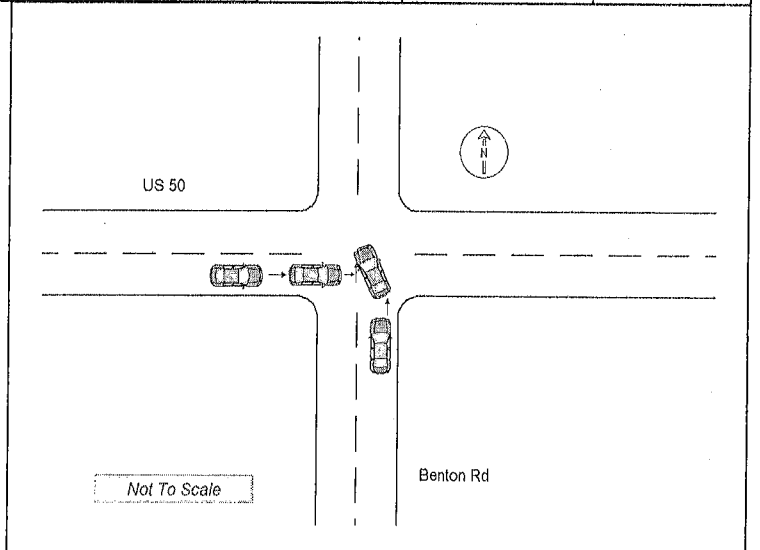
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD 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 checked="" type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES 2
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DISTANCE FROM REFERENCE 5.00	DISTANCE UNIT OF MEASURE 2 1 - MILES 2 - FEET 3 - YARDS	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	MANNER OF CRASH COLLISION/IMPACT 6 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	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 (ANY TYPE) 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER / UNKNOWN
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<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 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER /UNKNOWN	CONDITIONS 1 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER / UNKNOWN	SURFACE 1 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER / UNKNOWN
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LIGHT CONDITION 1 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	WEATHER 1 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
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NARRATIVE  
On June 27, 2022, I responded to US 50/ Benton Rd for a two vehicle crash with possible injuries. Upon arrival one vehicle Unit 1 Nissan Versa was in the middle of the road with damage to the front left and its airbags deployed. The driver Michelle Thompson stated she was at the stop sign at the intersection and attempted to make a left hand turn west onto US 50. Ms. Thompson stated she did not see the other vehicle Unit 2 Dodge Dart traveling east on US 50. The Dodge Dart driven by Hope Skipworth was unable to stop her vehicle and struck Ms. Thompson's vehicle. Ms. Skipworth's vehicle continued to travel east on US 50 before going off the road on the north side of the road. Ms. Thompson admitted she did see the vehicle coming and that her failure to yield caused the accident. I issued Ms. Thompson a citation for fail to yield at an intersection. Unit 1 was towed by Bob Myers Towing. Unit 2 was towed by Kings Kars Towing. Photographs were taken of the scene. Both vehicles were disabled and unable to be driven from the scene.



CRASH REPORTED DATE / TIME 06/27/2022 07:13	DISPATCH DATE / TIME 06/27/2022 07:13	ARRIVAL DATE / TIME 06/27/2022 07:14	SCENE CLEARED DATE / TIME 06/27/2022 08:08	REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES 55	OFFICER'S NAME* Curless, Cody	CHECKED BY OFFICER'S NAME* Rudd, Jeffrey
			OFFICER'S BADGE NUMBER* R11623	CHECKED BY OFFICER'S BADGE NUMBER* R3052

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

**OWNER**

UNIT # 1 OWNER NAME: LAST, FIRST, MIDDLE ( [ ] SAME AS DRIVER)  
 THOMPSON, BRUCE, N OWNER PHONE: INCLUDE AREA CODE ( [ ] SAME AS DRIVER)  
 OWNER ADDRESS: STREET, CITY, STATE, ZIP ( [ ] SAME AS DRIVER)  
 4551 CEDAR HILL DR, BATAVIA, OH, 45103  
 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**VEHICLE**

LP STATE OH LICENSE PLATE # CM92NE VEHICLE IDENTIFICATION # 3N1BC1CP7CL361721 VEHICLE YEAR 2012 VEHICLE MAKE NISSAN  
 INSURANCE VERIFIED INSURANCE COMPANY ERIE INSURANCE INSURANCE POLICY # Q057108541 COLOR SIL VEHICLE MODEL VERSA  
 COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE TYPE OF USE US DOT # TOWED BY: COMPANY NAME BOB MYERS  
 INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT # OCCUPANTS VEHICLE WEIGHT GVWR/GCWR HAZARDOUS MATERIAL CLASS # PLACARD ID #  
 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - > 26K LBS.

**VEHICLE**

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  
 11 - ALL TERRAIN VEHICLE (ATV/UTV) 17 - MOTORHOME 29 - UNKNOWN OR HIT/SKIP

**VEHICLE**

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 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

**VEHICLE**

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

**VEHICLE**

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 - CARGO VAN / ENCLOSED BOX 9 - CARGO TANK 13 - AUTO TRANSPORTER  
 10 - FLAT BED 14 - GARBAGE/REFUSE

**VEHICLE**

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

**VEHICLE**

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

**VEHICLE**

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 18 - APPROACHING OR LEAVING VEHICLE  
 4 - STRUCK PRE-CRASH ACTIONS 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN 6 - MAKING LEFT TURN 7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE  
 5 - BOTH STRIKING & STRUCK 6 - MAKING LEFT TURN 12 - DRIVERLESS 13 - NEGOTIATING A CURVE 19 - STANDING 20 - OTHER NON-MOTORIST  
 9 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN 14 - ENTERING OR CROSSING SPECIFIED LOCATION

**EVENTS (G)**

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

**EVENTS (G)**

SEQUENCE OF EVENTS 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 24 - OTHER MOVABLE OBJECT  
 3 - IMMERSION 9 - RAN OFF ROAD LEFT 14 - PEDESTRIAN 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT  
 4 - JACKKNIFE 10 - CROSS MEDIAN 15 - PEDALCYCLE 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 38 - OVERHEAD SIGN POST 45 - EMBANKMENT 52 - BUILDING  
 5 - CARGO / EQUIPMENT LOSS OR SHIFT 11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL 16 - RAILWAY VEHICLE 17 - ANIMAL - FARM 18 - ANIMAL - DEER 26 - BRIDGE OVERHEAD STRUCTURE 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN  
 6 - EQUIPMENT FAILURE 6 - EQUIPMENT FAILURE

**EVENTS (G)**

COLLISION WITH FIXED OBJECT - STRUCK 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 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

LOCAL REPORT NUMBER 000220020202

**DAMAGE**

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

**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  
 99 - UNKNOWN  
 10

**TRAFFIC**

TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY 4  
 # 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 2 TO 6  
 UNIT SPEED 5  
 POSTED SPEED  
 DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED

**OWNER**

UNIT # 2 OWNER NAME: LAST, FIRST, MIDDLE (  SAME AS DRIVER )  
 SKIPWORTH, HOPE, G

OWNER ADDRESS: STREET, CITY, STATE, ZIP (  SAME AS DRIVER )  
 205 PARK AVE, HILLSBORO, OH, 45133

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

**DAMAGE**

DAMAGE SCALE

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

**VEHICLE**

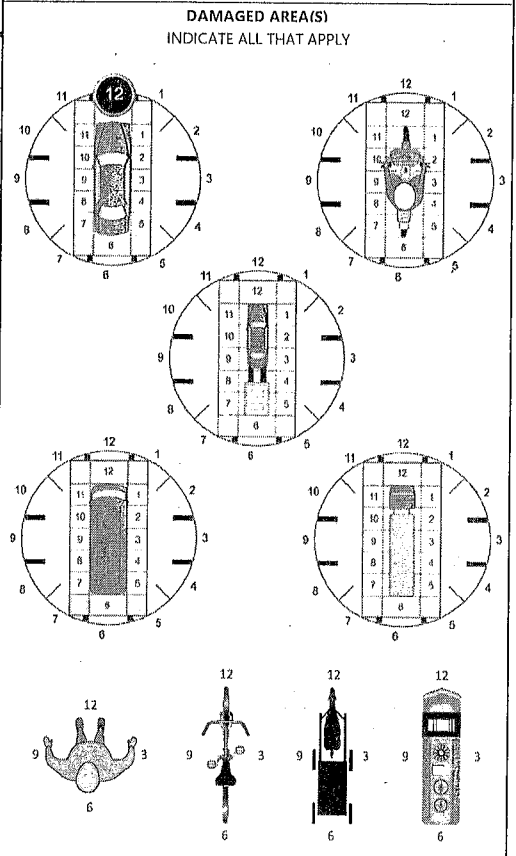
LP STATE OH LICENSE PLATE # JLD5294 VEHICLE IDENTIFICATION # 1C3CDFBB3FD173830 VEHICLE YEAR 2015 VEHICLE MAKE DODGE

INSURANCE VERIFIED INSURANCE COMPANY NATIONWIDE INSURANCE POLICY # 9234J384407 COLOR SIL VEHICLE MODEL DART

TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE

US DOT #            TOWED BY: COMPANY NAME KINGS KARS

HAZARDOUS MATERIAL CLASS #            PLACARD ID #           



UNIT TYPE 1

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           

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

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

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

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 PRE-CRASH ACTIONS 1

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

INITIAL POINT OF CONTACT

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

CONTRIBUTING CIRCUMSTANCES 1

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 2

1 - ONE-WAY  
 2 - TWO-WAY

TRAFFIC CONTROL 6

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

SEQUENCE OF EVENTS

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 - IMMERSSION 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

# OF THROUGH LANES ON ROAD 2

RAIL GRADE CROSSING 1

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

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 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

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1

UNIT / NON-MOTORIST DIRECTION

FROM 4 TO 3

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

UNIT SPEED 45

DETECTED SPEED

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

POSTED SPEED

# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
000220020202

UNIT # 1	NAME: LAST, FIRST, MIDDLE THOMPSON, MICHELLE, M	DATE OF BIRTH 07/21/1981	AGE 40	GENDER F
ADDRESS: STREET, CITY, STATE, ZIP 4551 CEDAR HILL DR, BATAVIA, OH, 45103		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
OL STATE OH		OPERATOR LICENSE NUMBER	OFFENSE CHARGED 4511.41	LOCAL CODE <input type="checkbox"/>
OFFENSE DESCRIPTION RIGHT OF WAY AT INTERSECTIONS - V		CITATION NUMBER 110604		
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 SKIPWORTH, HOPE, G	DATE OF BIRTH 10/06/2001	AGE 20	GENDER F
ADDRESS: STREET, CITY, STATE, ZIP 205 PARK AVE, HILLSBORO, OH, 45133		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
OL STATE OH		OPERATOR LICENSE NUMBER	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
OL STATE		OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE
OFFENSE DESCRIPTION		CITATION NUMBER		
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED
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 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 12- LIMITED - OTHER 13- MECHANICAL DEVICES (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, DIALING) 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
<b>INJURIES TAKEN BY</b> 1- NOT TRANSPORTED / TREATED AT SCENE 2- EMS 3- POLICE 9- OTHER / UNKNOWN		<b>EJECTION</b> 1- NOT EJECTED 2- PARTIALLY EJECTED 3- TOTALLY EJECTED 4- NOT APPLICABLE	<b>OL ENDORSEMENT</b> 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			<b>ALCOHOL TEST TYPE</b> 1- NONE 2- BLOOD 3- URINE 4- BREATH 5- OTHER
<b>SAFETY EQUIPMENT</b> 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		<b>TRAPPED</b> 1- NOT TRAPPED 2- EXTRICATED BY MECHANICAL MEANS 3- FREED BY NON-MECHANICAL MEANS	<b>GENDER</b> F - FEMALE M - MALE U - OTHER / UNKNOWN		<b>CONDITION</b> 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	<b>DRUG TEST TYPE</b> 1- NONE 2- BLOOD 3- URINE 4- OTHER
						<b>DRUG TEST RESULT(S)</b> 1- AMPHETAMINES 2- BARBITURATES 3- BENZODIAZEPINES 4- CANNABINOIDS 5- COCAINE 6- OPIATES / OPIOIDS 7- OTHER 8- NEGATIVE RESULTS



# OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER  
000220020202

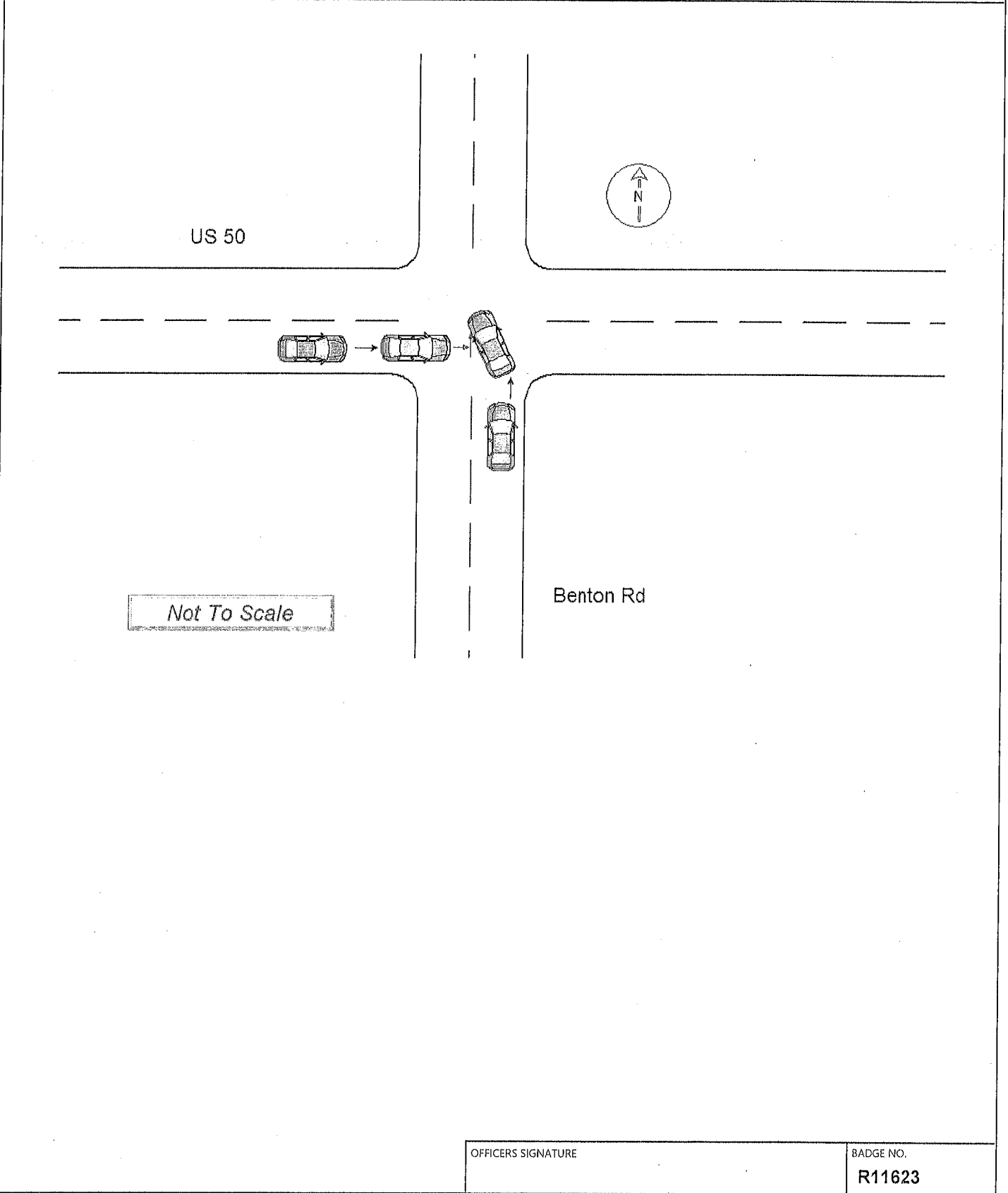
<b>OCCUPANT</b>	UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER	
	ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE				
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
<b>OCCUPANT</b>	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
<b>OCCUPANT</b>	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
<b>OCCUPANT</b>	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
	7 - BOOSTER SEAT	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	
	8 - HELMET USED	8 - THIRD - MIDDLE	
	9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)	9 - THIRD - RIGHT SIDE	
	10 - REFLECTIVE CLOTHING	10 - SLEEPER SECTION OF TRUCK CAB	
	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP)	
	99 - OTHER / UNKNOWN	12 - PASSENGER IN UNENCLOSED CARGO AREA	
		13 - TRAILING UNIT	
		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)	
		15 - NON-MOTORIST	
		99 - OTHER / UNKNOWN	

<b>WITNESS</b>	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
	ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE		
<b>WITNESS</b>	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
	ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE		
<b>WITNESS</b>	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 <b>000220020202</b>	REPORTING AGENCY <b>Clermont County Sheriff</b>	Date Of Crash <b>06/27/2022</b>
IN COUNTY OF <b>Clermont County</b>	ACCIDENT LOCATION <b>50</b>	



OFFICERS SIGNATURE	BADGE NO. <b>R11623</b>
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