

JM 7/25/23

OHIO DEPARTMENT OF PUBLIC SAFETY <b>TRAFFIC CRASH REPORT</b>				*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT		LOCAL REPORT NUMBER *							
<input type="checkbox"/> PHOTOS TAKEN		<input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3		LOCAL INFORMATION		23MPD1139							
<input type="checkbox"/> SECONDARY CRASH		<input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER		REPORTING AGENCY NAME *		NCIC *		HIT/SKIP					
<input checked="" type="checkbox"/> PRIVATE PROPERTY		Millersburg		03801		1 - SOLVED 2 - UNSOLVED		NUMBER OF UNITS					
						2		UNIT IN ERROR					
						1		98 - ANIMAL 99 - UNKNOWN					
COUNTY*	LOCALITY*	LOCATION: CITY, VILLAGE, TOWNSHIP*				CRASH DATE / TIME*		CRASH SEVERITY					
38	2	Millersburg				07/24/2023 11:42		5					
ROUTE TYPE		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		LOCATION ROAD NAME		ROAD TYPE		LATITUDE DECIMAL DEGREES					
				PRIVATE PROPERTY		ST		40.540510					
ROUTE TYPE		PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)		ROAD TYPE		LONGITUDE DECIMAL DEGREES					
				1108 S WASHINGTON ST				-81.916250					
REFERENCE POINT		DIRECTION FROM REFERENCE		ROUTE TYPE		ROAD TYPE		INTERSECTION RELATED					
3		1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE		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		<input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA					
DISTANCE FROM REFERENCE		DISTANCE UNIT OF MEASURE						NUMBER OF APPROACHES					
		1 - MILES 2 - FEET 3 - YARDS						ROADWAY					
								<input type="checkbox"/> ROADWAY DIVIDED					
LOCATION OF FIRST HARMFUL EVENT				MANNER OF CRASH COLLISION/IMPACT				DIRECTION OF TRAVEL		MEDIAN TYPE			
6				2				1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		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		WORK ZONE TYPE		LOCATION OF CRASH IN WORK ZONE		CONTOUR		CONDITIONS		SURFACE			
<input type="checkbox"/> WORKERS PRESENT		1 - LANE CLOSURE 2 - LANE SHIFT/ CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER		1 - BEFORE THE 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		1		1		2			
<input type="checkbox"/> LAW ENFORCEMENT PRESENT						1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER /UNKNOWN		1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER / UNKNOWN		1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER / UNKNOWN			
<input type="checkbox"/> ACTIVE SCHOOL ZONE													
LIGHT CONDITION				WEATHER									
1				1									
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN				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													
Unit 02 was attempting to leave the parking lot of 1108 S Washington St to go southbound on S Washington St. Unit 02 slowed as there were pedestrians crossing the roadway. Unit 01 was behind Unit 02, also going to turn southbound. Unit 01 did not see Unit 02 slowing for the pedestrians which resulted in Unit 01 rear-ending Unit 02, causing minor damage to Unit 02.													
CRASH REPORTED DATE / TIME			DISPATCH DATE / TIME			ARRIVAL DATE / TIME			SCENE CLEARED DATE / TIME			REPORT TAKEN BY	
07/24/2023 11:44			07/24/2023 11:46			07/24/2023 11:51			07/24/2023 12:00			<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	
TOTAL TIME ROADWAY CLOSED		OTHER INVESTIGATION TIME		TOTAL MINUTES		OFFICER'S NAME*			CHECKED BY OFFICER'S NAME*			<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OOPS)	
0		30		44		Genet, Stephanie							
						OFFICER'S BADGE NUMBER*			CHECKED BY OFFICER'S BADGE NUMBER*				
						107							

**OWNER**

UNIT # **1** OWNER NAME: LAST, FIRST, MIDDLE (  SAME AS DRIVER )  
**MILLER-EVANS, TARYN, LYNN**

OWNER ADDRESS: STREET, CITY, STATE, ZIP (  SAME AS DRIVER )  
**3741 SR 60, KILLBUCK, OH, 44637**

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

OWNER PHONE: INCLUDE AREA CODE (  SAME AS DRIVER )  
**330-231-9944**

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

**DAMAGE**

**DAMAGE SCALE**

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

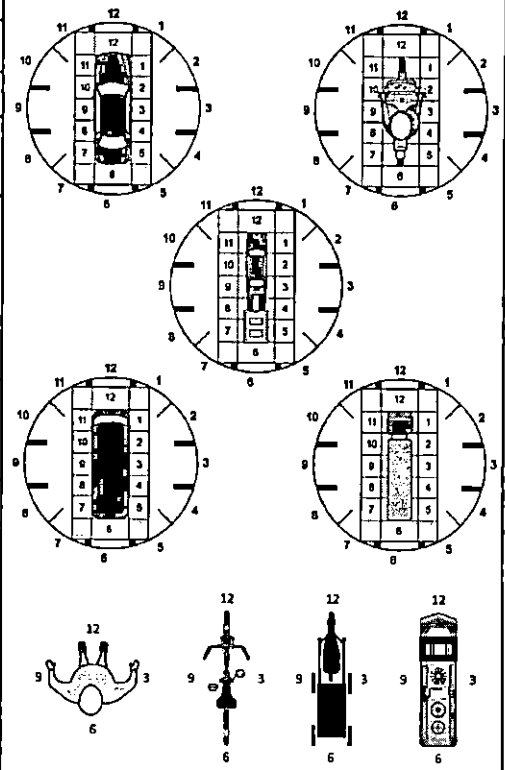
1

**VEHICLE**

LP STATE **OH** LICENSE PLATE # **HSM5157** VEHICLE IDENTIFICATION # **KNDJN2A2XE7743460** VEHICLE YEAR **2014** VEHICLE MAKE **KIA**

INSURANCE VERIFIED INSURANCE COMPANY **DIRECT INSURANCE** INSURANCE POLICY # **OH1764293** COLOR **BLK** VEHICLE MODEL **SOUL**

**DAMAGED AREA(S)**  
 INDICATE ALL THAT APPLY



TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE

US DOT #

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

HAZARDOUS MATERIAL:  MATERIAL RELEASED  CLASS #  PLACARD ID #

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

# OF TRAILING UNITS

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?  1 - YES  2 - NO  9 - OTHER / UNKNOWN

AUTONOMOUS MODE LEVEL: 0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

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

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

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

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

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

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

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

**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

**SEQUENCE OF EVENTS**

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

# OF THROUGH LANES ON ROAD:  2

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

**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

**UNIT / NON-MOTORIST DIRECTION**

FROM  4 TO  2

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

UNIT SPEED:  5

POSTED SPEED:  35

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

FIRST HARMFUL EVENT:  1

MOST HARMFUL EVENT:  1

**UNIT #** 2 **OWNER NAME:** LAST, FIRST, MIDDLE (  SAME AS DRIVER )  
**OWNER PHONE:** INCLUDE AREA CODE (  SAME AS DRIVER )  
**OWNER ADDRESS:** STREET, CITY, STATE, ZIP (  SAME AS DRIVER )  
 554 WATER ST, CHARDON, OH, 44024  
**COMMERCIAL CARRIER:** NAME, ADDRESS, CITY, STATE, ZIP **COMMERCIAL CARRIER PHONE:** INCLUDE AREA CODE

**LP STATE** OH **LICENSE PLATE #** JAB7003 **VEHICLE IDENTIFICATION #** 4S4WMARDXN3450038 **VEHICLE YEAR** 2022 **VEHICLE MAKE** SUBARU  
 **INSURANCE VERIFIED** **INSURANCE COMPANY** PROGRESSIVE **INSURANCE POLICY #** 953676300 **COLOR** BLU **VEHICLE MODEL** ASCENT

**TYPE OF USE**  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE  
 INTERLOCK DEVICE EQUIPPED  HIT/SKIP UNIT **# OCCUPANTS** **US DOT #** **VEHICLE WEIGHT GVWR/GCWR**  
 1 - ≤ 10K LBS. 2 - 10,001 - 26K LBS. 3 - > 26K LBS. **HAZARDOUS MATERIAL**  MATERIAL RELEASED  PLACARD **CLASS #** **PLACARD ID #**

**UNIT TYPE**  3 **# OF TRAILING UNITS**  
 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

**WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?**  2 **0** - NO AUTOMATION **3** - CONDITIONAL AUTOMATION **9** - UNKNOWN  
**1** - YES **2** - NO **9** - OTHER / UNKNOWN **AUTONOMOUS MODE LEVEL** **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** - CARGO VAN / 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**  4 **1** - NON-COLLISION **5** - STRIKING PRE-CRASH ACTIONS **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 **18** - APPROACHING OR LEAVING VEHICLE  
**4** - STRUCK **5** - MAKING RIGHT TURN **12** - DRIVERLESS **19** - STANDING  
**5** - BOTH STRIKING & STRUCK **6** - MAKING LEFT TURN **13** - NEGOTIATING A CURVE **20** - OTHER NON-MOTORIST  
**9** - OTHER / UNKNOWN **7** - MAKING U-TURN **14** - ENTERING OR CROSSING SPECIFIED LOCATION **21** - STANDING

**CONTRIBUTING CIRCUMSTANCES**  1 **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 **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 **21** - LYING IN ROADWAY  
**4** - RAN STOP SIGN **11** - DROVE OFF ROAD **16** - WRONG WAY **22** - NOT DISCERNIBLE  
**5** - UNSAFE SPEED **12** - IMPROPER BACKING **17** - VISION OBSTRUCTION

**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 **23** - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE  
**6** - EQUIPMENT FAILURE **12** - IMPROPER BACKING **17** - ANIMAL - FARM **24** - OTHER MOVABLE OBJECT  
**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 **55** - OTHER  
**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  
**37** - TRAFFIC SIGN POST **44** - DITCH

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

**LOCAL REPORT NUMBER**  
 23MPD1139

**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**  
 8 **0** - NO DAMAGE **14** - UNDERCARRIAGE  
**1-12** - REFER TO UNIT DIAGRAM **15** - VEHICLE NOT AT SCENE  
**13** - TOP **99** - UNKNOWN

**TRAFFIC**

<b>TRAFFICWAY FLOW</b> 1 - ONE-WAY 2 - TWO-WAY <input type="checkbox"/> 2	<b>TRAFFIC CONTROL</b> 1 - ROUNDABOUT <b>4</b> - STOP SIGN 2 - SIGNAL <b>5</b> - YIELD SIGN 3 - FLASHER <b>6</b> - NO CONTROL <input type="checkbox"/> 6
<b># OF THROUGH LANES ON ROAD</b> <input type="checkbox"/> 2	<b>RAIL GRADE CROSSING</b> 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING

**UNIT / NON-MOTORIST DIRECTION**  
 FROM  4 TO  2  
 1 - NORTH **5** - NORTHEAST  
 2 - SOUTH **6** - NORTHWEST  
 3 - EAST **7** - SOUTHEAST  
 4 - WEST **8** - SOUTHWEST  
**9** - OTHER / UNKNOWN

<b>UNIT SPEED</b> <input type="checkbox"/> 5	<b>DETECTED SPEED</b> 1 - STATED / ESTIMATED SPEED
<b>POSTED SPEED</b> <input type="checkbox"/> 35	<input type="checkbox"/> 1 <b>2</b> - CALCULATED / EDR 3 - UNDETERMINED



# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
23MPD1139

UNIT # 1	NAME: LAST, FIRST, MIDDLE MILLER-EVANS, TARYN, LYNN	DATE OF BIRTH 06/27/1994	AGE 29	GENDER F
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ADDRESS: STREET, CITY, STATE, ZIP 3741 SR 60, KILLBUCK, OH, 44637	CONTACT PHONE - INCLUDE AREA CODE 330-231-9944
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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
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OL STATE OH	OPERATOR LICENSE NUMBER TS212750	OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION	CITATION NUMBER
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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			DRUG TEST(S)		
						STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS SELECT UP TO 4
						1	1	.	1	1	

UNIT # 2	NAME: LAST, FIRST, MIDDLE KETHCART, KYLA, JEAN	DATE OF BIRTH 11/23/1979	AGE 43	GENDER F
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ADDRESS: STREET, CITY, STATE, ZIP 11624 TR 259, MILLERSBURG, OH, 44654	CONTACT PHONE - INCLUDE AREA CODE 812-272-8407
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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
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OL STATE OH	OPERATOR LICENSE NUMBER TK812823	OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION	CITATION NUMBER
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OL CLASS 4	ENDORSEMENT	RESTRICTION SELECT UP TO 3 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			DRUG TEST(S)		
						STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS SELECT UP TO 4
						1	1	.	1	1	

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
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ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE
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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
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OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION	CITATION NUMBER
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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			DRUG TEST(S)		
						STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS 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, BROWSING)	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 BUS & CLASS B BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE	5 - TEST GIVEN, RESULTS UNKNOWN
	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	7 - EXCEPT TRACTOR-TRAILER		
	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)			8 - INTERMEDIATE LICENSE RESTRICTIONS		
	8 - THIRD - MIDDLE	<b>EJECTION</b>		9 - LEARNER'S PERMIT RESTRICTIONS		<b>ALCOHOL TEST TYPE</b>
<b>INJURIES TAKEN BY</b>	9 - THIRD - RIGHT SIDE	1 - NOT EJECTED	<b>OL ENDORSEMENT</b>	10 - LIMITED TO DAYLIGHT ONLY		1 - NONE
1 - NOT TRANSPORTED /TREATED AT SCENE	10 - SLEEPER SECTION OF TRUCK CAB	2 - PARTIALLY EJECTED	H - HAZMAT	11 - LIMITED TO EMPLOYMENT		2 - BLOOD
2 - EMS	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	3 - TOTALLY EJECTED	M - MOTORCYCLE	12 - LIMITED - OTHER		3 - URINE
3 - POLICE	12 - PASSENGER IN UNENCLOSED CARGO AREA	4 - NOT APPLICABLE	P - PASSENGER	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)		4 - BREATH
9 - OTHER / UNKNOWN	13 - TRAILING UNIT	<b>TRAPPED</b>	N - TANKER	14 - MILITARY VEHICLES ONLY		5 - OTHER
	14 - RIDING ON VEHICLE EXTERIOR	1 - NOT TRAPPED	Q - MOTOR SCOOTER	15 - MOTOR VEHICLES WITHOUT AIR BRAKES		<b>DRUG TEST TYPE</b>
<b>SAFETY EQUIPMENT</b>	15 - NON-MOTORIST	2 - EXTRICATED BY MECHANICAL MEANS	R - THREE-WHEEL MOTORCYCLE	16 - OUTSIDE MIRROR		1 - NONE
1 - NONE USED	99 - OTHER / UNKNOWN	3 - FREED BY NON-MECHANICAL MEANS	S - SCHOOL BUS	17 - PROSTHETIC AID		2 - BLOOD
2 - SHOULDER BELT ONLY USED			T - DOUBLE & TRIPLE TRAILERS	18 - OTHER		3 - URINE
3 - LAP BELT ONLY USED			X - TANKER / HAZMAT			4 - OTHER
4 - SHOULDER & LAP BELT USED						<b>DRUG TEST RESULT(S)</b>
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING						1 - AMPHETAMINES
6 - CHILD RESTRAINT SYSTEM - REAR FACING						2 - BARBITURATES
7 - BOOSTER SEAT						3 - BENZODIAZEPINES
8 - HELMET USED						4 - CANNABINOIDS
9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)						5 - COCAINE
10 - REFLECTIVE CLOTHING						6 - OPIATES / OPIOIDS
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY						7 - OTHER
99 - OTHER / UNKNOWN						8 - NEGATIVE RESULTS
			<b>GENDER</b>			
			F - FEMALE			
			M - MALE			
			U - OTHER / UNKNOWN			



# OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER  
23MPD1139

UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER	
OCCUPANT	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
UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER	
OCCUPANT	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
UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER	
OCCUPANT	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
UNIT #	NAME: LAST, FIRST, MIDDLE				DATE OF BIRTH		AGE	GENDER	
OCCUPANT	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

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
<b>INJURED TAKEN BY</b>		6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN
1 - NOT TRANSPORTED / TREATED AT SCENE	6 - CHILD RESTRAINT SYSTEM - REAR FACING	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	<b>EJECTION</b>
2 - EMS	7 - BOOSTER SEAT	8 - THIRD - MIDDLE	1 - NOT EJECTED
3 - POLICE	8 - HELMET USED	9 - THIRD - RIGHT SIDE	2 - PARTIALLY EJECTED
9 - OTHER / UNKNOWN	9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED
<b>GENDER</b>		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP)	4 - NOT APPLICABLE
F - FEMALE	10 - REFLECTIVE CLOTHING	12 - PASSENGER IN UNENCLOSED CARGO AREA	<b>TRAPPED</b>
M - MALE	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY	13 - TRAILING UNIT	1 - NOT TRAPPED
U - OTHER / UNKNOWN	99 - 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	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			