MRM 2-21-20

OF PURIS SAFETY TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER *					
PHOTOS TAKE	PHOTOS TAKEN OH -2 X OH -3 LOCAL INFORMATION 23MPD0269							23MPD0269					
SECONDARY	RASH		RTING AGENCY NAME *	NCIC *	HIT/SKIP 1 - SOLVED	NUMBER OF UNIT	S UNIT IN ERROR 98 - ANIMAL						
-	PRIVATE PRO		rsburg	***************************************		03801	1 2 - UNSOLVED	2	1 99 - UNKNOWN				
	1 - CITY	CATION: CITY. VILL	AGE. TOWNSHIP*				CRASH DATE		CRASH SEVERITY  1 - FATAL				
38 2	3 - TOWNSHIP	llersburg					02/18/2023	02/18/2023 16:40 5 2 - SERIOUS II					
ROUTE TYPE RO		2 - SOUTH	ATION ROAD NAME	ROAD TYPE			LATITUDE DE		SUSPECTED  3 - MINOR INJURY				
Госаті		3 - EAST 4 - WEST PR	IVATE PROPERTY ST				40.5344	420	SUSPECTED				
ROUTE TYPE RO		1 - NORTH REFE 2 - SOUTH	RENCE ROAD NAME (ROAD.	MILEPOST, HO	USE #)	ROAD TYPE	LONGITUDE D	ECIMAL DEGREES	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE				
REFER	I 1	CACT	86 S Washington St				-81.917	500	ONLY				
REFERENCE POI	NT DIRECTION FROM REFEREN	N   '	ROUTE TYPE		INTERSECTION RELATED								
1 - INTERSEC	1 - NO		SIMIL MOOTE (III)	- ALLEY / - AVENUE	HW - HIGHW LA - LANE	AY RD - ROAD SQ - SQUARE	WITHIN INTE	RSECTION OR ON A	PROACH				
3 - HOUSE #	3 - EAS	ST US - FEDE	RAL US ROUTE BL	- BOULEVARD		ST ST - STREET	WITHIN INTE	RCHANGE AREA	NUMBER OF APPROACHES				
DISTANCE FROM REFERENC	DISTANCE	SR - STAT	CT CT	- CIRCLE	OV - OVAL	TE - TERRACE  Y TL - TRAIL		ROADW					
	1 - MI	LES CK - NOW	DESCRIPTION OF THE PROPERTY OF	R - DRIVE	PI - PIKE	WA - WAY			``				
	2 - FEI 3 - YA		П	- HEIGHTS	PL - PLACE		ROADWAY	IVIDED					
	CATION OF FIRST HAR!	MFUL EVENT		NNER OF CRAS			DIRECTION OF TRAN	/EL	MEDIAN TYPE				
		DRIVEWAY/ALLEY		T COLLISION 4 WEEN 5	- REAR-TO-RE - BACKING	AR	1 - NORTH 2 - SOUTH		1 - DIVIDED FLUSH MEDIAN				
3 - IN MI 4 - ON R		RAILWAY GRADE SHARED USE PAT	145	O MOTOR	- ANGLE		3 - EAST		<4 FEET ) DIVIDED FLUSH MEDIAN				
5 - ON G		TRAILS	III OIL	NSPORT 7		SAME DIRECTION	4 - WEST		FEET ) DED, DEPRESSED MEDIAN				
6 - OUTS 7 - ON R	IDE TRAFFIC WAY 13 -	BIKE LANE TOLL BOOTH	2 - REA 3 - HEA	K-END	- SIDESWIPE, C	OPPOSITE DIRECTION		4 - DIV	4 - DIVIDED, RAISED MEDIAN				
8 - OFF R		OTHER / UNKNO			OTTLK/ OT	KITOTTI			Y TYPE) IER / UNKNOWN				
WORK ZONE R	ELATED	W	ORK ZONE TYPE	LOCATIO	N OF CRASH	IN WORK ZONE	CONTOUR	CONDITION	S SURFACE				
WORKERS PRE	SENT	1 - LAN	E CLOSURE	1.		1ST WORK ZONE	111	11	1 1				
LAW ENFORCE			E SHIFT/ CROSSOVER	2	WARNING SIG - ADVANCE W		1 - STRAIGHT	1 - DRY	1 - CONCRETE				
LAW ENFORCE	MENT PRESENT		RK ON SHOULDER MEDIAN		- TRANSITION	The second secon	LEVEL	2 - WET	2 - BLACKTOP,				
ACTIVE SCHOOL	DL ZONE		RMITTENT OR MOVING WORK		- ACTIVITY ARE - TERMINATIOI		2 - STRAIGHT GRADE	3 - SNOW 4 - ICE	BITUMINOUS, ASPHALT				
<u> </u>		5 - OTH	ER				3 - CURVE LEVEL	5 - SAND, MUD, D OIL, GRAVEL	IRT, 3 - BRICK/BLOCK 4 - SLAG , GRAVEL,				
1 - DAYLI	IGHT CONDITION GHT		1 - CLEAR	WEATHER 6 - SNOW			4 - CURVE GRADE 9 - OTHER	6 - WATER (STANI	STONE				
1 2 - DAW			1 2 - CLOUDY	7 - SEVERE C	ROSSWINDS		/UNKNOWN	MOVING) 7 - SLUSH					
	<ul> <li>LIGHTED ROADWAY</li> <li>ROADWAY NOT LIGHT</li> </ul>	TED '	3 - FOG, SMOG, SMOK 4 - RAIN			9 - OTHER / UNKN	KNOWN / UNKNOWN						
5 - DARK	- UNKNOWN ROADWA	Y LIGHTING	5 - SLEET, HAIL	RAIN OR FREE UNKNOWN									
	R / UNKNOWN												
NARRATIVE									•				
			onald's, 1586 S Washing Vhile Unit 02 was still sto										
01 pulled forwa	ard and rear ended I	Unit 02. Unit 0	1 left the scene. Unit 01 v	was located									
and stopped. U	nit 01 stated he was	s in the drive t	hrough and Unit 02 back	ed into	,				5 s				
Witness stated	ited sne was stoppe he was leaning out	the window ta	ugh and Unit 01 drove in lking with Unit 02, Witne	nto her.	/ ء				Wa				
Unit 02 was sto	pped and did not m	nove. Witness	said Unit 01 drove forwar	rd and hit	Drive Through				Washington St				
Unit 02. Then U	nit 02 stated he jus	t needed to ge	t home.		.Σ. (	1586	S Washington St		gtor				
					6 \				St				
					\								
					L								
								(	24				
					_								
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME REPORT TA									DEDON'T TAKEN SW				
	2023 16:42							REPORT TAKEN BY  POLICE AGENCY					
			18/2023 16:42	02,	/18/2023 16		02/18/202	MOTORIST					
TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME* Genet, Stephanie			CHECKED BY OFFICER	'S NAME*						
		OFFICER'S BADGE NUMBER*		CHECKED BY	OFFICER'S BADGE N	SUPPLEMENT (CORRECTION OR ADDITION							
0	30	55	10			C.I.ECRED BY	THE PARTY OF THE P		TO AN EXISTING REPORT SENT TO ODPS)				



FIRST HARMFUL EVENT

MOST HARMFUL EVENT

## 23MPD0269 DAMAGE UNIT# OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER) OWNER PHONE:INCLUDE AREA CODE ( SAME AS DRIVER) REED, WILLIAM, EDWARD 330-462-3509 DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP ( same as driver) 1 - NONE 3 - FUNCTIONAL DAMAGE 8967 SR 83, HOLMESVILLE, OH, 44633 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE HIY4040 HYUNDAI 5NPE24AF1HH499626 2017 INSURANCE COMPANY NSURANCE **INSURANCE POLICY #** COLOR VEHICLE MODEL VERIFIED SONATA BLK TYPE OF USE TOWED BY: COMPANY NAME US DOT # GOVERNMENT IN EMERGENCY RESPONSE COMMERCIAL HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR DEVICE # OCCUPANTS CLASS # PLACARD ID 1 - ≤10K LBS X HIT/SKIP UNIT RELEASED 2 - 10.001 - 26K LBS. 3 - > 26K LBS. EQUIPPED PLACARD 1 - PASSENGER CAR 6 - VAN (9-15 SEATS) 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN/SKATER 2 - PASSENGER VAN 7 - MOTORCYCLE 2-WHEELED 13 - SNOWMOBILE 19 - BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 1 (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 14 - SINGLE UNIT 25 - OTHER NON-MOTORIST 20 - OTHER VEHICLE UNIT TYPE 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 21 - HEAVY EQUIPMENT 26 - BICYCLE 15 - SEMI-TRACTOR 10 - MOPED OR MOTORIZED 22 - ANIMAL WITH RIDER OF 27 - TRAIN 4 - PICK LIP BICYCLE 16 - FARM EQUIPMENT ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP 5 - CARGO VAN 11 - ALL TERRAIN VEHICLE 17 - MOTORHOME # of TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 1 - YES 2 - NO 9 - OTHER / UNKNOWN AUTONOMOUS 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION MODE LEVEL 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 1 3 - ELECTRONIC RIDE 8 - BUS - SHUTTLE 13 - POLICE 18 - SNOW REMOVAL SPECIAL SHARING 9 - BUS - OTHER 14 - PUBLIC UTILITY 19 - TOWING FUNCTION 4 - SCHOOL TRANSPORT 10 - AMBULANCE 15 - CONSTRUCTION EQUIP. 20 - SAFETY SERVICE 5 - BUS - TRANSIT/COMMUTER PATROL 1 - NO CARGO BODY TYPE 4 - LOGGING 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99 - OTHER / UNKNOWN 1 5 - INTERMODAL CONTAINER CHASSIS / NOT APPLICABLE 8 - POLE 12 - CONCRETE MIXER 2 - BUS CARGO 9 - CARGO TANK 13 - AUTO TRANSPORTER \* 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE - CARGOVAN BODY 10 - FLAT BED 14 - GARBAGE/REFUSE /ENCLOSED BOX ⊕⊕ TYPE 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR VEHICLE DEFECTIVE ACCIDENT 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTS NO DAMAGE [0] \_\_- UNDERCARRIAGE [ 14 ] 1 - INTERSECTION -4 - MIDBLOCK -7 - SHOULDER/ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN \_\_- ALL AREAS [ 15 ] MARKED CROSSWALK MARKED CROSSWALK \_\_\_\_- TOP [ 13 ] 11 - SHARED USE PATHS 8 - SIDEWALK 2 - INTERSECTION -5 - TRAVEL LANE -OR TRAILS 9 - MEDIAN/CROSSING UNMARKED CROSSWALK OTHER LOCATION 12 - FIRST RESPONDER - UNIT NOT AT SCENE [ 16 ] LOCATION ISLAND 3 - INTERSECTION - OTHER 6 - BICYCLE LANE AT INCIDENT SCENE 1 - STRAIGHT AHEAD 9 - LEAVING TRAFFIC 15 - WALKING, RUNNING, 1 - NON-CONTACT 21 - STANDING OUTSIDE INITIAL POINT OF CONTACT LANE 2 - BACKING JOGGING, PLAYING DISABLED VEHICLE 2 - NON-COLLISION 0 - NO DAMAGE 14 - UNDERCARRIAGE - CHANGING LANES 10 - PARKED 16 - WORKING 99 - OTHER / UNKNOWN 3 11 - SLOWING OR STOPPED IN TRAFFIC 3 - STRIKING 4 - OVERTAKING/PASSING 17 - PUSHING VEHICLE 12 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE PRE-CRASH 5 - MAKING RIGHT TURN ACTION 4 - STRUCK 18 - APPROACHING OR DIAGRAM 6 - MAKING LEFT TURN LEAVING VEHICLE 99 - UNKNOWN ACTIONS 12 - DRIVERLESS 5 - BOTH STRIKING 13 - TOP 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 19 - STANDING & STRUCK 8 - ENTERING TRAFFIC 14 - ENTERING OR CROSSING 20 - OTHER NON-MOTORIST 9 - OTHER / UNKNOWN LANE SPECIFIED LOCATION TRAFFIC 1 - NONE 8 - FOLLOWING TOO CLOSE 13 - IMPROPER START FROM 18 - OPERATING DEFECTIVE 23 - OPENING DOOR INTO TRAFFICWAY FLOW TRAFFIC CONTROL 2 - FAILURE TO YIELD /ACDA A PARKED POSITION EQUIPMENT ROADWAY 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED ILLEGALLY 19 - LOAD SHIFTING 3 - RAN RED LIGHT 9 - IMPROPER LANE 99 - OTHER IMPROPER CHANGE 2 - TWO-WAY 4 - RAN STOP SIGN /FALLING/SPILLING 2 - SIGNAL 5 - YIELD SIGN **ACTION** 1 5 - UNSAFE SPEED 10 - IMPROPER PASSING 15 - SWERVING TO AVOID 20 - IMPROPER CROSSING 3 - FLASHER 6 - NO CONTROL CONTRIBUTING 6 - IMPROPER TURN CIRCUMSTANCES 7 - LEFT OF CENTER 11 - DROVE OFF ROAD 16 - WRONG WAY 21 - LYING IN ROADWAY 12 - IMPROPER BACKING 17 - VISION OBSTRUCTION 22 - NOT DISCERNIBLE # OF THROUGH LANES RAIL GRADE CROSSING ON ROAD 1 - NOT INVLOVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING 2 **EVENTS** 3 - INVOLVED-PASSIVE CROSSING 1 - OVERTURN/ROLLOVER 7 - SEPARATION OF UNITS 12 - DOWNHILL RUNAWAY 19 - ANIMAL -OTHER 23 - STRUCK BY FALLING, 2 - FIRE/EXPLOSION 8 - RAN OFF ROAD RIGHT 13 - OTHER NON-COLLISION 20 - MOTOR VEHICLE IN SHIFTING CARGO OR UNIT / NON-MOTORIST DIRECTION ANYTHING SET IN MOTION BY A MOTOR 3 - IMMERSION 9 - RAN OFF ROAD LEFT TRANSPORT 14 - PEDESTRIAN 4 - JACKKNIFE 10 - CROSS MEDIAN 15 - PEDALCYCLE 21 - PARKED MOTOR 1 - NORTH 5 - NORTHEAST 5 - CARGO / EQUIPMENT 11 - CROSS CENTERLINE -VEHICLE 24 - OTHER MOVABLE 16 - RAILWAY VEHICLE VEHICLE 2 - SOUTH 6 - NORTHWEST LOSS OR SHIFT OPPOSITE DIRECTION 17 - ANIMAL - FARM 22 - WORK ZONE OBJECT 3 - EAST 7 - SOUTHEAST \_\_\_ то \_\_ 3 6 - EQUIPMENT FAILURE 18 - ANIMAL - DEER MAINTENANCE 4 - WEST 8 - SOUTHWEST EQUIPMENT 9 - OTHER / UNKNOWN COLLISION WITH FIXED OBJECT - STRUCK END 38 - OVERHEAD SIGN POST 45 - EM 25 - IMPACT ATTENUATOR / CRASH CUSHION 31 - GUARDRAIL END 32 - PORTABLE BARRIER 45 - EMBANKMENT 52 - BUILDING 39 - LIGHT / LUMINARIES 46 - FENCE 53 - TUNNEI UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 47 - MAILBOX 48 - TREE 33 - MEDIAN CABLE BARRIER SUPPORT 54 - OTHER FIXED STRUCTURE 34 - MEDIAN GUARDRAIL 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 49 - FIRE HYDRANT 99 - OTHER / UNKNOWN 27 - BRIDGE PIER OR BARRIER 1 - STATED / ESTIMATED SPEED 3 50 - WORK ZONE MAINTENANCE ABUTMENT 35 - MEDIAN CONCRETE 28 - BRIDGE PARAPET BARRIER 42 - CULVERT 2 - CALCULATED / EDR 29 - BRIDGE RAIL 30 - GUARDRAIL FACE - MEDIAN OTHER BARRIER EQUIPMENT POSTED SPEED 37 - TRAFFIC SIGN POST 44 - DITCH 51 - WALL 3 - UNDETERMINED

LOCAL REPORT NUMBER



## LOCAL REPORT NUMBER

## 23MPD0269

UNIT#	OWNER NAME: LAST, FIRST,	MIDDLE (	RIVER)	OWNER	R PHONE:INCLUDE AR	EA CODE ( SAME AS DRIVER)	D A M A G E					
2	MIKE, RACHEL, N				330-600	0-0471	DAMAGE SCALE					
OWNER A	DDRESS: STREET, CITY, STATE, Z	IP (   SAME AS DRIVER	)				1 - NONE 3 - FUNCTIONAL DAMAGE					
24709 S	R 83, COSHOCTON, C	DH, 43812					2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
COMMERC	CIAL CARRIER: NAME, ADDRES	S, CITY, STATE, ZIP		COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE			9 - UNKNOWN					
						1.000	DAMAGED AREA(S)					
LP STATE	LICENSE PLATE #	V	EHICLE IDENTIFICATION #		VEHICLE YEAR	VEHICLE MAKE	INDI	ICATE ALL THAT APPLY				
ОН	GWY7740	S	HSRD78854U209037		2004	HONDA	12	12				
INSURA	NCE INSURANCE COMPA	NY	INSURANCE POLICY #		COLOR	VEHICLE MODEL	11 12	11 12				
VERIFIE	STATE FARM		3375032-SFP-35		WHI	CR-V	10 11 1	2 10 11 1 1				
_	TYPE OF USE	IN EMERGENCY	US DOT #	TOW	ED BY: COMPANY N	IAME	10 2	10,000				
СОММЕ	RCIAL GOVERNMENT	RESPONSE	VEHICLE MEIGHT COMPAGNA		HAZABBOH	CHATERIAL	9 9 3	3 9 9 3				
INTERL		# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWI 1 - ≤10K LBS.		MATERIAL CLAS	S MATERIAL SS # PLACARD ID #	7 7 7					
DEVICE	HIT/SKIP UNIT	2	2 - 10.001 - 26K LBS.		ELEASED LACARD	11	8 6	8 6				
	1 - PASSENGER CAR 6 - VA	N (9-15 SEATS)	3 - > 26K LBS.			PEDESTRIAN/SKATER	6 5	11 7 6 5				
. 3	2 - PASSENGER VAN 7 - MO	OTORCYCLE 2-WHEE	FD 43 61161111160115			WHEELCHAIR (ANY TYPE)	10 /	12				
		OTORCYCLE 3-WHEE	IED 14 CINICIELINIT	OTHER VEH		OTHER NON-MOTORIST		10 2				
UNIT TYP	VEHICLE 10 - N	MOPED OR MOTORIZ	ED 15 - SEMI-TRACTOR 21 - I	HEAVY EQU		BICYCLE	9	9 3 3				
		ICYCLE	16 - FARM EQUIPMENT			TRAIN UNKNOWN OR HIT/SKIP	<del>-</del>	8 11 4				
	5 - CARGO VAN 11 - A (ATV)	LL TERRAIN VEHICLE (UTV)	17 - MOTORHOME		33 -	OINNIOWIN ON HITTSKIP	8	7 5 4				
	# OF TRAILING UNITS						12	7 5 12				
	WAS VEHICLE OPERATING IN AL	UTONOMOUS	0 - NO AUTOMATION 3	- CONDIT	IONAL AUTOMATION	9 - UNKNOWN	12	12				
2	MODE WHEN CRASH OCCURRE	D?	0 .		JTOMATION		10 11 1	2 10 11 1 2				
2	1 - YES 2 - NO 9 - OTHER / L		NOMOUS 2 - PARTIAL AUTOMATION 5				10 2	10 12				
		мор	E LEVEL				9 3	3 9 9 3 3				
	1 - NONE 2 - TAXI	6 - BUS - CHARTE 7 - BUS - INTERCIT		16 - FA	ARM IOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	7 5	4 . 7 . 7				
_ 1	3 - ELECTRONIC RIDE	8 - BUS - SHUTTLE			NOW REMOVAL	99 - OTHER / UNKNOWN		6				
SPECIAL	SHARING 4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY		OWING		6 5	6 5				
FUNCTION	5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUI		AFETY SERVICE ATROL							
	4 110 61066 0001							12 12 12				
1 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	4 - LOGGING 5 - INTERMODAL	7 - GRAIN/CHIPS/GRAVEL 8 - POLE	11 - D	UMP ONCRETE MIXER	99 - OTHER / UNKNOWN	12					
CARGO	2 - BUS	CONTAINER CH			UTO TRANSPORTER		of AR.	9 3 9 7 3 9 3 3				
BODY TYPE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	6 - CARGOVAN /ENCLOSED BO	OX 10 - FLAT BED	14 - G	ARBAGE/REFUSE		,602,	e l				
1172	. 1 - TURN SIGNALS	4 - BRAKES	7. WORN OR SUCK TIRES	0.146	TOP TROUBLE		6	<b>↑</b>				
	2 - HEAD LAMPS	5 - STEERING	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT		OTOR TROUBLE ISABLED FROM PRIOR	99 - OTHER / UNKNOWN	_	6 6 6				
VEHICLE DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT			CCIDENT							
				_			X - NO DAMAG	GE [ 0 ]				
1	1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - MARKED CRO	7 - SHOULDER/ROADSIDE		RIVEWAY ACCESS	99 - OTHER / UNKNOWN	☐- <b>TOP</b> [13]	- ALL AREAS [ 15 ]				
NON-	2 - INTERSECTION -	5 - TRAVEL LANE -	8 - SIDEWALK	OF	HARED USE PATHS R TRAILS							
MOTORIST LOCATION	JNMARKED CROSSWALK  3 - INTERSECTION - OTHER	6 - BICYCLE LANE	ISLAND		RST RESPONDER INCIDENT SCENE		□-	UNIT NOT AT SCENE [ 16 ]				
	1 - NON-CONTACT	1 - STRAIGHT AHE	AD 9 - LEAVING TRAFFIC		ALKING, RUNNING,	21 - STANDING OUTSIDE	INITI	AL POINT OF CONTACT				
	2 - NON-COLLISION	2 - BACKING	LANE		GGING, PLAYING	DISABLED VEHICLE	0 - NO DAN					
4	3 - STRIKING	3 - CHANGING LA			ORKING USHING VEHICLE	99 - OTHER / UNKNOWN	_	ER TO UNIT 15 - VEHICLE NOT AT SCENE				
ACTION	4 - STRUCK PRE-CRASH	5 - MAKING RIGHT	T TURN IN TRAFFIC	IN TRAFFIC 18 - APPROACHING OR				DIAGRAM 99 - UNKNOWN				
	5 - BOTH STRIKING	6 - MAKING LEFT 1 7 - MAKING U-TUR		12 - DRIVERLESS LEAVING VEHICLE 13 - NEGOTIATING A CURVE 19 - STANDING			13 - TOP					
	& STRUCK	8 - ENTERING TRA	AFFIC 14 - ENTERING OR CROSSIN			r						
	9 - OTHER / UNKNOWN 1 - NONE	B - FOLLOWING TO	SPECIFIED LOCATION  OO CLOSE 13 - IMPROPER START FROM	10 00	PERATING DEFECTIVE	22 ODENING DOOR INTO		TRAFFIC				
	2 - FAILURE TO YIELD	/ACDA	A PARKED POSITION		UIPMENT	23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW  1 - ONE-WAY	TRAFFIC CONTROL				
1	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9 - IMPROPER LAN CHANGE	ILLEGALLY		ALLING/SPILLING	99 - OTHER IMPROPER ACTION	2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN				
	5 - UNSAFE SPEED	10 - IMPROPER PA			PROPER CROSSING	ACTION	1	6 3 - FLASHER 6 - NO CONTROL				
CONTRIBUTI	NG 6 - IMPROPER TURN CES 7 - LEFT OF CENTER	11 - DROVE OFF R		21 - LY	ING IN ROADWAY							
	7 - LEFT OF CENTER	12 - IMPROPER BA	CKING 17 - VISION OBSTRUCTION	22 - NC	OT DISCERNIBLE		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVLOVED				
SEQUENC	OF EVENTS		2					2 - INVOLVED-ACTIVE CROSSING				
20	1 - OVERTURN/ROLLOVER	7 - SEPARATION OF	EVENTS 13 DOWNLING BUNDAWAY	10 44	UNANI OTUER	23. STRUCK BY FALLING	2	3 - INVOLVED-PASSIVE CROSSING				
1 20	2 - FIRE/EXPLOSION	8 - RAN OFF ROAD	RIGHT 13 - OTHER NON-COLLISION	V 20 - M	OTOR VEHICLE IN	23 - STRUCK BY FALLING, SHIFTING CARGO OR						
	3 - IMMERSION 4 - JACKKNIFE	9 - RAN OFF ROAD 10 - CROSS MEDIAN			ANSPORT	ANYTHING SET IN MOTION BY A MOTOR	UNIT / N	ON-MOTORIST DIRECTION				
2	5 - CARGO / EQUIPMENT	11 - CROSS CENTER	LLINE - 16 - RAILWAY VEHICLE		RKED MOTOR HICLE	VEHICLE 24 - OTHER MOVABLE		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST				
	LOSS OR SHIFT	OPPOSITE DIRE OF TRAVEL	TO THE TOTAL		ORK ZONE	OBJECT	4	3 - EAST 7 - SOUTHEAST				
3	6 - EQUIPMENT FAILURE		18 - ANIMAL - DEER	EQ	UIPMENT		FROM 4 TO	4 - WEST 8 - SOUTHWEST				
	25 - IMPACT ATTENUATOR	31 - GUARDRAIL EN	COLLISION WITH FIXED OBJECT - ID 38 - OVERHEAD SIGN POST			52 - BUILDING		9 - OTHER / UNKNOWN				
4	/ CRASH CUSHION	32 - PORTABLE BAR	RIER 39 - LIGHT / LUMINARIES	46 - FE	NCE	53 - TUNNEL	UNIT SPEED	DETECTED SPEED				
- 1	26 - BRIDGE OVERHEAD STRUCTURE	<ul><li>33 - MEDIAN CABLE</li><li>34 - MEDIAN GUAR</li></ul>		47 - MA 48 - TR		54 - OTHER FIXED OBJECT						
5	27 - BRIDGE PIER OR ABUTMENT	BARRIER	41 - OTHER POST, POLE	49 - FIF		99 - OTHER / UNKNOWN	0	1 - STATED / ESTIMATED SPEED				
6.1	28 - BRIDGE PARAPET	35 - MEDIAN CONC BARRIER	42 - CULVERT	MA	AINTENANCE			1   2 - CALCULATED / EDR				
6	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	36 - MEDIAN OTHER 37 - TRAFFIC SIGN F	R BARRIER 43 - CURB POST 44 - DITCH	51 - W	UIPMENT		POSTED SPEED					
, 1		_		21 - 44				3 - UNDETERMINED				
	FIRST HARMFUL EVEN	.	MOST HARMFUL EVENT									

OND DEPARTMENT MOTORIST / NON-MOTORIST									LOCAL REPORT NUMBER 23MPD0269									
	NIT #															GENDER		
	1	REED, WILLIAM, EDWARD								03/14/1992					30	М		
~		STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE						
0		R 83, HOLMESVILLE, OH, 44633  INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  SAFETY EQUIPMEN										330-462-3509  SEATING AIR BAG USAGE EJECTION TRAPPED						
Ž		TAKEN					MEDICAL FACILITY (NAME	, CITY)	SAFETY EQUIPMENT USED		DOT-COMPLIANT POSITION				EJECTION	TRAPPED		
	5	BY 1 4  E OPERATOR LICENSE NUMBER OFFENSE CHARGED LOCAL OFFENSE								HELMET	1		1 1 1					
K					OFFENS	SE CHARG	SED	CODE	OFFENSE DESCR	PTION	PTION			CITATION NUMBER				
≨	CLASS	TU948654  S ENDORSEMENT RESTRICTION SELECTION TO 3								Δ.	LCOHO	TECT		DRUG	TECT/	C)		
		ENDONOEME!	RESTRICTION SELECT UP TO 3	DIST	RACTED		HOL / DRUG SUSP		CONDITION	STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4		
5-	4	ВУ				ОТНЕ	R DRUG		-1	1	1		1	1				
UN	IIT #	NAME: LAST	, FIRST, MIDDLE								D	ATE OF BIRTH			AGE	GENDER		
	2	MIKE, RAG									08	8/25/1998			24	F		
₩.		STREET, CITY,	OCTON, OH, 43812									NE - INCLUDE A	REA CODE					
<u> </u>			MS AGENCY (NAME)		INJURED '	TAKEN TO: N	MEDICAL FACILITY (NAME	CITY)	SAFETY EQUIPMENT	330-	600-047	SEATING	TAIR BA	G USAGE	EJECTION	TRAPPED		
P P Z	5	TAKEN BY 1	, , , , , , , , , , , , , , , , , , , ,		,		,	,	USED 4		T-COMPLIAN HELMET	POSITION 1			1	Indirec		
Z OL	STATE		ICENSE NUMBER		OFFENS	E CHARG	iED	LOCAL	OFFENSE DESCRI	PTION				TION N				
OIOR	ЭН	UG948643						CODE						11011111	DIVIDER			
₹	CLASS	ENDORSEMEN		DRIN	/ER	ALCOH	HOL / DRUG SUSP	ECTED	CONDITION	А	LCOHOL	. TEST		DRUG TEST(S)				
	4	6		DIST BY	RACTED	_	_			STATUS	TYPE	VALUE	STATUS	TYPE		SELECT UP TO 4		
5-	IIT #	NAME: LAST	, FIRST, MIDDLE		1	OTHE	R DRUG		1	1	1		1	1				
		IVAIVIE. LAST	, FIRST, MIDDLE								DA	ATE OF BIRTH			AGE	GENDER		
	ORESS:	STREET, CITY, S	STATE, ZIP							CONT	ACT PHON	JE - INCLUDE A	REA CODE					
TOR																		
OTORIST / NON-MOTORI	URIES	INJURED E	MS AGENCY (NAME)		INJURED 1	TAKEN TO: N	MEDICAL FACILITY (NAME,	CITY)	SAFETY EQUIPMENT	Про	T-COMPLIAN	SEATING POSITION	AIR BA	G USAGE	EJECTION	TRAPPED		
ν /		ВУ			э.				MC HELMET									
SISS OF 3	STATE	OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED LOCAL OFFENSE DESCRIP				PTION	TION			CITATION NUMBER					
5	CLASS	ENDORSEMEN	T						· ·									
OL.	LLASS	LINDORSEINEN	RESTRICTION SELECT UP TO 3		RACTED ALCOHOL / DRUG SUSPECTED  ALCOHOL MARIJUANA		CONDITION	ALCOHOL STATUS TYPE		VALUE STATUS		DRUG TEST(S		SELECT UP TO 4				
				ВУ		ОТНЕ	R DRUG											
	INJU	IRIES	SEATING POSITION		IR BAG		OL CLA	ss	OL RESTRICT	rion(s	) DRIV	ER DISTRA	CTION	T	ST STA	TUS		
1 - FATA 2 - SUSF		SERIOUS	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DE 2 - DEPLOY	ED FRONT		1 - CLASS A		1 - ALCOHOL INTER DEVICE	LOCK		T DISTRACTED NUALLY OPERAT	ING AN	1 - NON 2 - TEST	E GIVEN REFUSED			
INJU 3 - SUSF	RY		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE 4 - DEPLOYED BOTH			2 - CLASS B 3 - CLASS C	2 - CDL INTRASTATE 3 - CORRECTIVE LEN		ONLY ELECTRONIC		DEVICE	3 - TEST GIVEN,					
INJU 4 - POSS	RY		4 - SECOND - LEFT SIDE FRONT/SIDE (MOTORCYCLE PASSENGER) 5 - NOT APPLIC			PLICABLE 4 - REGULAR CLASS 5 - EXCEPT CLASS A			BUS	(TEX		/ UNUSABLE 4 - TEST GIVEN						
		NT INJURY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	9 - DEPLOY	MENT UN	KNOWN	(OHIO = D) _ 5 - M/C MOPED (	ONLY	6 - EXCEPT CLASS A & CLASS B BUS		CON	KING ON HANDS AMUNICATION I	DEVICE		LTS KNOW	/N		
INJU	JRIES	TAKEN BY	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	EJECTION  6 - NO VALID OL  1 - NOT EJECTED				7 - EXCEPT TRACTOR 8 - INTERMEDIATE L RESTRICTIONS				DEVICE	VICE RESULTS UNKNOWN					
		SPORTED	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	2 - PARTIAL	LY EJECTE	D	OL ENDORS	EMENT	9 - LEARNER'S PERM RESTRICTIONS	IIT	ELEC	TRONIC DEVICE		1 - NON	E	STIYPE		
2 - EMS		AT SCENE	10 - SLEEPER SECTION OF TRUCK CAB	3 - TOTALLY EJECTED 4 - NOT APPLICABLE		1 4 5	H - HAZMAT 10 - LIMITED TO		10 - LIMITED TO DA	INSIDE		HER DISTRACTION  DE THE VEHICLE	R DISTRACTION 2		2 - BLOOD 3 - URINE			
3 - POL		NKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT,	TRAPPED  1 - NOT TRAPPED		D	P - PASSENGER 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12		11 - LIMITED TO EMPLOYMENT 12 - LIMITED - OTHER		OUTSIDE THE VEHICLE			4 - BREATH 5 - OTHER				
			BUS, PICK-UP WITH CAP)  12 - PASSENGER IN	2 - EXTRICA		ANS	N - TANKER	OTER	13 - MECHANICAL D (SPECIAL BRAKE	S, HAND		TER / UNKNOWN	VI I	DRU 1 - NON	JG TEST	ТҮРЕ		
1 - NON	100	QUIPMENT	UNENCLOSED CARGO AREA 13 - TRAILING UNIT	3 - FREED B	Υ		R - THREE-WHEE	MOTOR SCOOTER CONTROLS, OR THREE-WHEEL ADAPTIVE DEVIC		CES)	OTHER (ES) 1 - APPARENTLY NORMAL			2 - BLOC 3 - URIN	DD			
USEC	)	BELT ONLY	14 - RIDING ON VEHICLE EXTERIOR			MOTORCYCLE S - SCHOOL BUS			15 - MOTOR VEHICL WITHOUT AIR B	ES	3 - EMC	OTIONAL (E.G., ESSED, ANGRY,		4 - OTHE	R			
4 - SHO	ULDER 8	ILY USED & LAP BELT	(NON-TRAILING UNIT) 15 - NON-MOTORIST				T - DOUBLE & TR	IPLE	16 - OUTSIDE MIRRO 17 - PROSTHETIC AII		DISTU	JRBED) JESS			TEST R	ESULT(S)		
	D RESTR	AINT SYSTEM	99 - OTHER / UNKNOWN					ZMAT	18 - OTHER		5 - FELL ASLEEP, F. FATIGUED, ETC		D,	2 - BARB	ITURATES ODIAZEPIN			
6 - CHIL		RAINT SYSTEM					GENDE	R			MED	DER THE INFLUEN	NCE OF		IABINOIDS			
7 - BOO		AT					F - FEMALE					OHOL IER / UNKNOWN	30.34		ES / OPIO	IDS		
	TECTIVE	PADS USED					M - MALE U - OTHER / UNK	NOWN							TIVE RESU	LTS		
10 - REF	LECTIVE	NEES, ETC) CLOTHING PEDESTRIAN																
/ BI	CYCLE O																	

OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER 23MPD0269					
UNIT #		ST, FIRST, MIDDLE	DA	AGE	GENDER							
2	BRENNA	AMAN, MAZIKINE			M							
								09/26/2019 3  CONTACT PHONE - INCLUDE AREA CODE				
<u>a</u>		HOCTON, OH, 43812					CONTACT PHON	E - INCLUDE AR	EA CODE			
	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (	NAME, CITY)	SAFETY EQUIPMENT		SEATING	AIR BAG USA	GE EJECTION	TRAPPED	
5	TAKEN BY 1				6	MC HELMET	POSITION 4	1	1	1		
UNIT #	NAME: LA	ST, FIRST, MIDDLE					DA	TE OF BIRTH		AGE	GENDER	
2 BRENNAMAN, TINSLEY								06/23/2022				
ADDRESS: STREET, CITY, STATE, ZIP							06/23/2022 0  CONTACT PHONE - INCLUDE AREA CODE					
ADDRESS: STREET, CITY, STATE, ZIP  24709 SR 83, COSHOCTON, OH, 43812												
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (N	NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	GE EJECTION	TRAPPED	
5	ву 1	J			6	MC HELMET	6	1	1	1		
UNIT #	NAME: LA	ST, FIRST, MIDDLE	-				DA		AGE	GENDER		
ADDRESS:	STREET, CIT	Y, STATE, ZIP	¥ u		***************************************	***************************************	CONTACT PHONE - INCLUDE AREA CODE					
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (N	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING AIR BAG US		GE EJECTION	TRAPPED		
UNIT #	NAME:   A	ST, FIRST, MIDDLE					☐MC HELMET	TE OF BIRTH		1.55		
Oitil #	Traine. Do	31, TRS1, MIDDLE					DA	TE OF BIRTH		AGE	GENDER	
ADDRESS:	STREET, CIT	Y, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (N	NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USA	SE EJECTION	TRAPPED	
	IN	URIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG	ISAGE		
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY  1 - NOT TRANSPORTED / FOR REA 2 - EMS 7 - BOOD 3 - POLICE 8 - HELM 9 - OTHER / UNKNOWN 9 - PRO (ELB  GENDER 10 - REF F - FEMALE / BI  M - MALE / BI		VEHICL 2 - SHOULE 3 - LAP BEL 4 - SHOULE 5 - CHILD F FORWA 6 - CHILD F REAR F, 7 - BOOSTE 8 - HELMET 9 - PROTEC (ELBOW 10 - REFLEC 11 - LIGHTI / BICYC	E OCCUPANT DER BELT ONLY USED IT ONLY USED DER & LAP BELT USED RESTRAINT SYSTEM - RESTRAINT SYSTEM - RESTRAINT SYSTEM - ACING ER SEAT	IT - LEFT SIDE FORCYCLE DRIVE IT - MIDDLE IT - RIGHT SIDE ND - LEFT SIDE ORCYCLE PASSE ND - MIDDLE ND - RIGHT SIDE ORCYCLE	2 - DEPLO 3 - DEPLO 4 - DEPLO FRONT 5 - NOT A 9 - DEPLO CAR)  1 - NOT E 2 - PARTIA E		EJECTION  EJECTED  ALLY EJECTED  APPLICABLE  TRAPPED  TRAPPED  CATED BY  ANICAL MEANS					
S	ST, FIRST, MI	DDLE					10000	TE OF BIRTH		AGE	GENDER	
	STREET, CIT	Y, STATE, ZIP					09/29/2004 18 M  CONTACT PHONE - INCLUDE AREA CODE					
4096 TR 271, MILLERSBURG, OH, 44654												
NAME: LAST, FIRST, MIDDLE							330-473-0281  DATE OF BIRTH AGE				GENDER	
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
NAME: LA	ST, FIRST, MI	DDLE					DATE OF BIRTH			AGE	GENDER	
ADDRESS:	STREET, CITY	r, STATE, ZIP			***************************************		CONTACT PHONE - INCLUDE AREA CODE					