OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*										
PHOTOS TAKEN OH-2 OH-3	2023-00000869										
SECONDARY CRASH PRIVATE PROPERT	Hooth DD		NCIC* 4 5 0 7	UNIT IN ERROR  98 - ANIMAL 199 - UNKNOWN							
COUNTY* LOCALITY* LOCATION: 0		CRASH DATE / TIME* CRASH SEVERITY									
4 5 1 2 - VILLAGE HEAT		0,1232023, 1811, 5 1-FATAL 2-SERIOUS INJURY									
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE	activity is search as for a contact of	SUSPECTED					
1 11 11 11 11 11 11 11 11 11 11 11 11 1	HOPEWELL		D R	40,038	3 4 1	3 - MINOR INJURY SUSPECTED					
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		D, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE		4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE					
	DOG LEG		RD	-82,404	300	ONLY					
2 MILE DOST 2 COUTU	S - FEDERAL US ROUTE	W - AVENUE LA - LANE	RD - ROAD SQ - SQUARE ST - STREET	INTERSECTION RELATED  WITHIN INTERSECTION OR ON APPROACH							
	R - STATE ROUTE R - NUMBERED COUNTY ROUTE	TE - TERRACE									
FROM REFERENCE UNIT OF MEASURE 1 - MILES T	R - NUMBERED TOWNSHIP		TL - TRAIL WA - WAY	ROADWAY							
2 8 2 2 - FEET 3 - YARDS	ROUTE	HE - HEIGHTS PL - PLACE		ROADWAY DIV	IDED						
3 - IN MEDIAN 11 - RAILWAY	ER AY/ALLEY ACCESS GRADE CROSSING USE PATHS OR  NE OTH  1 - NC BI TT VI TT 2 - RE 3 - HE	ANNER OF CRASH COLLISION/IMPA OT COLLISION 4 - REAR-TO-REAR OT COLLISION 5 - BACKING VO MOTOR HIGLES IN 6 - ANGLE RANSPORT 7 - SIDESWIPE, SAM CAR-END 8 - SIDESWIPE, OPP CAD-ON 9 - OTHER / UNKNO	E DIRECTION OSITE DIRECTION	DIRECTION OF TRAVE  1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	AN TYPE  PLUSH MEDIAN  TO PLUSH MEDIAN  TO DEPRESSED MEDIAN  PRAISED MEDIAN  PE)  INKNOWN						
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WO		CONTOUR	CONDITIONS	SURFACE					
	1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST WARNING SIGN		1 - STRAIGHT LEVEL	1 - DRY	_2					
LAW ENFORCEMENT PRESENT	3 - WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNII 3 - TRANSITION ARE		1 - CONCRETE 2 - BLACKTOP,							
1 <del></del> 1	4 - INTERMITTENT OR MOVING WO 5 - OTHER	RK 4 - ACTIVITY AREA 5 - TERMINATION AR	FΔ	2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW	BITUMINOUS, ASPHALT					
				4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK					
<b>LIGHT CONDITION</b> 1 - DAYLIGHT	1 - CLEAR	6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE					
3 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG. SMOG. SMO	7 - SEVERE CROSSWINDS KE 8 - BLOWING SAND, SOIL, DIRT	AND, SOIL, DIRT, SNOW MOVING)								
4 - DARK — ROADWAY NOT LIGHTED	4 - RAIN	9 - FREEZING RAIN OR FREEZ	RAIN OR FREEZING DRIZZLE 7 - SLUSH 9 - OT								
5 - DARK — UNKNOWN ROADWAY LIGHTIN 9 - OTHER / UNKNOWN	IG 5 - SLEET, HAIL	99 - OTHER/ UNKNOWN			9 - OTHER/UNKNOWN						
NARRATIVE		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			, N	Indicate the north					
Unit 2 was stopped on Hope					+	direction with an "N" on the compass diagram.					
light. Unit 1 did not stop, st	riking unit 2 from	pehind.		ScenePD ™ - Evaluation Edition		compass diagram.					
		Eva	Evaluation	Evaluation Edition Edition							
		Evaluation Edition		Evaluation	Evaluation Ed Evaluation Edition	ition					
		Evaluation Edition	Evaluation luation Edition	Evaluation Edition a Edition		-					
		-		SR - Evaluation Hopewell Drustion Edition		_					
		Evaluation Edition Unit 1	Evaluation luation Edition Unit 1	n Edition	Exaluation Ed	ition					
			Unit 1— Un Evaluatio	t 2 Evaluation Edition Were mov	Evaluation Edition	-					
		Evaluation Edition	luation Edition  Dog Leg Rd	prior to poice arriv	SPE Weduation Ed	ition					
			Evaluatio	Not To Scale Evaluation Evaluation Edition	। Expension Edition						
		Evaluation Edition	luation Edition		Evaluation Ed	ition					
			Evaluation	Evaluation Evaluation Edition	Edition	2-					
		Evaluation Edition		Trancite (877) 908-4777							
CRASH REPORTED DATE / TIME	DISPATCH DATE/TIME	ARRIVAL DATE / TIME		SCENE CLEARED	Selections Sections	REPORT TAKEN BY POLICE AGENCY					
	232023 1812			1232023	1844	MOTORIST					
	TAL OFFICER'S NAME*  WTES Harlow		<sub>нескев</sub> ву OFFI <b>mart</b>	CER'S NAME*	냙	SUPPLEMENT					
		BADGE NUMBER*	O CHECKED 7	BY OFFICER'S BADGE I	IUMBER*	(CORRECTION OF ADDITION TO AN EXISTING REPORT SENT TO ODPS)					
<b>0</b> , , , 2 , 0 , , , 5 , 3	<b>0</b> 7 -	1 5 4	<b>J</b> /		5 6						

OHIO DE OF PUBL SAFETY - SER	OHIO DEPARTMENT MOTORIST / NON-MOTORIST  OF PUBLIC SAFETY MOTORIST / NON-MOTORIST						2 0 2 3 - 0 0 0 0 0 8 6 9									
UNIT #	NAME: LAST, F	FIRST, MIDDLE						D	ATE OF BIRTH			AGE	GENDER			
01	THOMAS,	KELSEY ELIZABETH					0 6 / 2 8 / 1 9 9 9 2 3 F									
ADDRESS	DDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE															
580 S 2	580 S 2ND ST NEWARK, OH 43055															
INJURIES	INJURED I	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, C					(NAME, CITY)	SAFETY EQUIPMENT	D01	-Complia	SEATING POSITI	ON AIR BAG	USAGE	EJECTION	TRAPPED	
2 3		Heath FD	FD					0 4	MC HELMET 0 1			_ _2	2 1 1			
OL STATE	OPERATOR L	ATOR LICENSE NUMBER OFFENSE CHAP			SE CHAR	RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITAT	CITATION NUMBER			
ВО Н				333.0	3		X	333.03				N214725				
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	DIS.		TRACTED ALCOHOL / DRUG SUSPECTED  ALCOHOL MARIJUANA		CONDITION	ALCOHOL TEST STATUS TYPE VALUE			STATUS	STATUS TYPE RESULT SELECT UP TO 4					
. 4	ļ		BY	7	=	THER DRUG	KIJUANA	1 1	1 .	.1 .		1	1			
UNIT #	NAME: LAST, F	FIRST MIDDLE			Ш •	JIIIER DROG				D	ATE OF BIRTH			AGE	GENDER	
0 2		DAKOTA RYON							0 8	./ .2	6,/,1	9 9 3	3   2	2 9	М	
	: STREET, CITY, ST								CONTACT PHONE - INCLUDE AREA CODE							
☐ 1725 W	VATSON RE	) В <b>НЕАТН, ОН 430</b> 5	6							<b>6</b> .(			•			
INJURIES		EMS AGENCY (NAME)		INJURED	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT			1.0	— DOI	Complex	SEATING POSITI	ON AIR BAG	N AIR BAG USAGE EJECTION TRAPPED			
5	TAKEN BY					USED O 4	DOT-COMPLIANT O 1			1	1 1 1					
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL		OFFENSE DESC	CRIPTION			CITAT	CITATION NUMBER				
<b>Дон</b>							CODE									
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	_	OHOL / DRUG SUSPI		CONDITION	STATUS	ALCOHO TYPE	L TEST VALUE	STATUS	DRUG TYPE	RESULT	SELECT UP TO 4	
4			ВУ	1	=		RIJUANA	1	1	1 .		1	1			
UNIT #	NAME. LAST 5	EDET MIDDLE			υ	THER DRUG			ــــــــــــــــــــــــــــــــــــــ		ATE OF BIRTH		<u> </u>	AGE	GENDER	
ONII #	JNIT # NAME: LAST, FIRST, MIDDLE									AIL OF BIRTH			AUL	GENDER		
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE							
ORIS							CONTA		NE - INCLUDE AREA	CODE						
INJURIES	INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN							SAFETY EQUIPMENT			SEATING POSITI	ON AIR BAG	USAGE	EJECTION	TRAPPED	
NON	TAKEN BY			USED			DOT-COMPLIANT MC HELMET									
OL STATE	ATE OPERATOR LICENSE NUMBER OFFENSE			OFFENSE CHARGED LOCAL OFF			OFFENSE DESC	RIPTION			CITAT	CITATION NUMBER				
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	ALCO	OHOL / DRUG SUSPI		CONDITION	STATUS		L TEST VALUE	STATUS	DRU (	RESULT	SELECT UP TO 4	
			ВУ		=		RIJUANA									
L	JRIES	SEATING POSITION	L	IR BAG		THER DRUG OL CLASS	s	OL RESTRIC	TION(S)		RIVER DISTRAC	TION		EST STA		
1 - FATAL	***	1 - FRONT - LEFT SIDE	1 - NOT DEP			1 - CLASS A		1 - ALCOHOL INTER			NOT DISTRACTED		1 - NON			
	SERIOUS INJURY	(MOTORCYCLE DRIVER)  2 - FRONT – MIDDLE	2 - DEPLOYE				2 - CDL INTRASTAT 3 - CORRECTIVE LE			2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION			2 - TEST REFUSED			
4 - POSSIBLE II	ED MINOR INJURY 3- DEPLOY		ED BOTH FRONT / SIDE 4 - REGULAR CLASS			4 - FARM WAIVER		DEVICE (TEXTING, TYPING, DIALING)			3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE					
5 - NO APPAREI	5 - NO APPARENT INJURY 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - NOT APPL			E M/C MODED ONLY			5 - EXCEPT CLASS		3-	ALKING ON HANDS-FREE 4 - TEST GIVEN, R						
INJURED	ED TAKEN BY  5- SECOND - MIDDLE  6- NO VALID OL						6 - EXCEPT CLASS & CLASS B BUS	4		COMMUNICATION DE TALKING ON HAND-H	IAND-HELD UNKNOWN					
1 - NOT TRANSF						OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE					ALCOHOL TEST TYPE			
2 - EMS	- EMS (MOTORCYCLE SIDE CAR) 1 - NOT EJECTE			varidorio montro del co	TED H - HAZMAT RESTRICTIONS			ELECTRONIC DEVICE				1 - NONE 2 - BLOOD				
3 - POLICE	3 - POLICE 8 - THIRD - MIDDLE 2 - PARTIALL 9 - OTHER / UNKNOWN 9 - THIRD - RIGHT SIDE 3 - TOTALLY E			DECIDICATIONS							3 - URINE					
	10 - SLEEPER SECTION 4 - NOT APPL			LICABLE N-TANKER 10-LIMITED TO DAY			YLIGHT ONLY INSIDE THE VEHICLE				4 - BREATH					
1 - NONE USED	NOME LICED 11 - PASSENGER IN OTHER TO A D.E.D.					Q - MOTOR SCOOTER		11 - LIMITED TO EMI 12 - LIMITED - OTHE	THE VEHICLE			OUTSIDE				
	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOT TRAPPED				S - SCHOOL BUS 13 - MECHANICAL D			EVICES 9 - OTHER / UNKNOWN				DRUG TEST TYPE 1-NONE				
	3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA		ATED BY T - DOUBLE & TRIPLE TRAILERS CONTR NICAL MEANS X - TANKER / HAZMAT ADAPT BY			CONTROLS, OR O	(SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION			2 - BL00D				
5 - CHILD RESTRAINT SYSTEM – CARGO AREA 3 - FRE		3 - FREED B				ADAPTIVE DEVI		1 ALTAICEITEITIONIAL			3 - URINE					
FORWARD F	FORWARD FACING 13-TRAILING UNIT NON-MI		NUN-ME(	15 - MOTO			15 - MOTOR VEHICLE	.5 - MOTOR VEHICLES WITHOUT			RESSED,	4 - OTHER				
REAR FACIN	REAR FACING (NON-TRAILING UNIT)						AIR BRAKES 16 - OUTSIDE MIRRO	R		ANGRY, DISTURBED) 4- ILLNESS			DRUG TEST RESULT(S)  1 - AMPHETAMINES			
	7 - BOOSTER SEAT 15 - NON-MOTORIST 8 - HELMET USED 99 - OTHER / UNKNOWN				17 - PROSTHETIO			AID 5 - FELL ASLEEP, FAINTE			ED,					
9 - PROTECTIVE PADS USED				18 - OTHER			FATIGUED, ETC. 6- UNDER THE INFLUEN			CE	3 - BENZODIAZEPINES					
	(ELBOW, KNEES, ETC.)  10 - REFLECTIVE CLOTHING							OF MEDICATIONS / DRU / ALCOHOL								
11 - LIGHTING -	PEDESTRIAN										OTHER / UNKNOWN		6-OPIA	TES / OPIOID	S	
	BICYCLE ONLY THER / UNKNOWN											7 - 0THE 8 - NEG/	ER ATIVE RESUI	LTS		