OHIO DEPARTMENT TRAFFIC C	RASH RE	LOCAL REPORT NUMBER*										
PHOTOS TAKEN OH-2	OH-3	The state of the s	2024-	000	00789							
SECONDARY CRASH PRIVATE F	الما ا	PORTING AGENCY NAME* eath PD		NCIC* HIT/SKIP NUMBER OF UNITS UNIT 0 4 5 0 7 1-SOLVED 0 1 0 1								
COUNTY* LOCALITY* LOC		LLAGE, TOWNSHIP*	<u> </u>	2- UNSOLVED CRASH DATE / TIME * CRASH SE								
1 - CITY 2 - VILLAGE 3 - TOWNSHIP	HEATH		0,1252024, 1330, 5 1- FATAL 2- SERIOUS INJURY									
	1 - NORTH LOC 2 - SOUTH	CATION ROAD NAME		ROAD TYPE	LATITUDE DE	CIMAL DEGREES	SUSPECTED					
000		BEAVER RUN		R D	39,990	4 1 8	3 - MINOR INJURY SUSPECTED					
		FERENCE ROAD NAME (ROAD	, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES	4 - INJURY POSSIBLE					
E .		HORNWOOD		D R	-82,488	6 1 0	5 - PROPERTY DAMAGE ONLY					
REFERENCE POINT DIRECTION		ROUTE TYPE	ROAD TYPE			INTERSECTION R	ELATED					
1 - INTERSECTION 1 - NOF 1 - NOF 2 - MILE POST 4 2 - SOU	TTI TTI			D - ROAD Q - SQUARE	WITHIN INTE	RSECTION OR ON A	APPROACH					
3 - HOUSE # 4 - WE	ST	ATE ROUTE BL		T - STREET	WITHIN INTE	RCHANGE AREA	NUMBER OF APPROACHES					
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASU	RE	MBERED COUNTY ROUTE CT		E - TERRACE L - TRAIL		ROADWA	Υ					
0 . 3 1 - MIL 2 - FEE 3 - YAF	ET ROL	JIE I	R - DRIVE PI - PIKE W E - HEIGHTS PL - PLACE	/A - WAY	ROADWAY DIVIDED							
LOCATION OF FIRST HARM			INER OF CRASH COLLISION/IMPAG	эт	DIRECTION OF TRAVE	L	MEDIAN TYPE					
THE THE PROPERTY OF THE PARTY O	CROSSOVER DRIVEWAY/ALL	FY ACCESS ■ BET	COLLISION 4-REAR-TO-REAR WEEN 5-BACKING		1 - NORTH		VIDED FLUSH MEDIAN 4 FEET)					
3 - IN MEDIAN 11-	RAILWAY GRAD	E CROSSING	OMOTOR HICLES IN 6-ANGLE	ANGLE 3 - EAST 2 - DIVIDED								
5 - ON GORE	SHARED USE P. TRAILS	2 - REA	ANSPORT 7 - SIDESWIPE, SAME AR-END 8 - SIDESWIPE, OPPO:		4-WEST	3 - DI	VIDED, DEPRESSED MEDIAN					
0-001SIDE IIIAI II WAI	BIKE LANE TOLL BOOTH	3 - HEA	AD-ON 9-OTHER/UNKNOW	/N		(A	VIDED, RAISED MEDIAN NY TYPE)					
	OTHER/UNKNO	OWN				9 - OT	HER/UNKNOWN					
WORK ZONE RELATED		ORK ZONE TYPE	LOCATION OF CRASH IN WO		CONTOUR	CONDITION						
WORKERS PRESENT		IE CLOSURE IE SHIFT/CROSSOVER	1 - BEFORE THE 1ST V WARNING SIGN		1 - STRAIGHT LEVEL	1	2					
LAW ENFORCEMENT PRESENT		RK ON SHOULDER MEDIAN	2 - ADVANCE WARNIN 3 - TRANSITION AREA		1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,						
ACTIVE SCHOOL ZONE	4 - INTI 5 - OTH	ERMITTENT OR MOVING WORK	4 - ACTIVITY AREA 5 - TERMINATION ARE	- Λ	3 CUDVE LEVEL 3 SNOW							
	3-0111				4 - CURVE GRADE	4 - ICE	ASPHALT 3 - BRICK/BLOCK					
LIGHT CONDITION 1 - DAYLIGHT		WEATH 1 - CLEAR	6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, D OIL, GRAVEL	IRT, 4 - SLAG, GRAVEL, STONE					
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	١	2 - CLOUDY	7 - SEVERE CROSSWINDS E 8 - BLOWING SAND, SOIL, DIRT,	***************************************								
4 - DARK – ROADWAY NOT LIGH		4 - RAIN	9 - FREEZING RAIN OR FREEZI	RAIN OR FREEZING DRIZZLE 7 - SLUSH								
5 - DARK – UNKNOWN ROADWAY 9 - OTHER / UNKNOWN	LIGHTING	5 - SLEET, HAIL	99 - OTHER/UNKNOWN			9 - OTHER/UNKNO	OWN					
NARRATIVE							Indicate the north					
UNIT 1'S RIGHT SIDE	WENT O	FF THE ROAD TO	THE				direction with an "N" on the					
RIGHT. UNIT 1 TURNE	D BACK	ONTO THE ROAD	. UNIT		ScenePD ™ - Evaluation Edition		compass diagram.					
1 WENT COMPLETELY	OFF THE	ROADWAY TO T		Evaluation	Evaluation Edition							
RIGHT AND STRUCK A			Evaluation Edition	ation Edition		Evaluation Edition	luation Edition					
CONTINUED FORWAR	D, GETTI	NG STUCK IN A		Evaluation ation Edition	Evaluation Edition Edition	Edition						
MUDDY FIELD.			Evaluation Edition		Evaluation	Evaluation Edition	luation Edition					
			Evaluation Edition	Evaluation ation Edition	Evaluation Edition	Not T						
					Evaluation	Evaluation Edition	idation Edition					
			Unit vplu	Example of ation Edition	Edition	Constitution of the Consti						
					Evaluation Edition	Evaluation Edition	Mation Edition					
			Evaluation Edition	Evaluation ation Edition	Edition	Eva	luation Edition					
			-	Evaluation	Evaluation Edition	Evaluation Edition	2-					
			Evaluation Edition	ation Edition	Trancite (877) 908-4777							
CRASH REPORTED DATE / TIME	DISI	PATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED I	REPORT TAKEN BY						
0,1,252,024, 1,330	0125	2024 1335	01252024 1	3 4 6 0	1252024	1506	POLICE AGENCY					
TOTAL TIME OTHER ROADWAY CLOSED INVESTIGATION TIM	TOTAL E MINUTES	officer's NAME* Schumacher	Сн		CER'S NAME*		MOTORIST SUPPLEMENT					
TOTAL TO SERVICE TO SE			ADGE NUMBER*	CHECKED I	SY OFFICER'S BADGE N	IUMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)					
1 5 6 0	1 8 6	0 7 -		0 7	- 1	4 7						

99 - OTHER / UNKNOWN

4

49 - FIRE HYDRANT

30 - GUARDRAIL FACE

J FIRST HARMFUL EVENT

BARRIER

36 - MEDIAN OTHER BARRIER

2

42 - CULVERT

■ MOST HARMFUL EVENT

OHIO DEF OF PUBLI SAFETY - SERVI	CHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST						2 0 2 4 - 0 0 0 0 0 7 8 9									
UNIT#									D	ATE OF BIRTH		$\overline{}$	AGE	GENDER		
0 1	DIALLO, MAMADOU LAMARANA SS: STREET, CITY, STATE, ZIP							0 1 / 1 5 / 1 9 8 0 4 4 M								
₹		COLUMBUS, OH 4322	27						CONTA	CT PHUI	NE - INCLUDE AREA	CODE			.∎.	
INJURIES		EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)			Complite	SEATING POSIT	ION AIR BA	G USAGE	EJECTION	TRAPPED	
_5	TAKEN BY							USED 0 4	DOT-COMPLIANT O 1			_ _1	1 1 1			
OL STATE	OL STATE OPERATOR LICENSE NUMBER			OFFEN	SE CHAF	RGED	LOCAL CODE	OFFENSE DESC	RIPTION	I	'	CITA	CITATION NUMBER			
ОН					331.34 X ALL			ALL OTHER				125	12524001			
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT		VER Tracted		DHOL / DRUG SUSPI LCOHOL MAI	ECTED RIJUANA	CONDITION	STATUS	TYPE	VALUE	STATUS		RESUL	SELECT UP TO 4	
_1				1		THER DRUG		1	_1	1	•	1	1			
UNIT#	NAME: LAST, F	FIRST, MIDDLE								D	ATE OF BIRTH			AGE	GENDER	
ــــــــــــــــــــــــــــــــــــــ									ш		1 1 1					
ADDRESS:	STREET, CITY, STA	ATE, ZIP							CONTA	CT PHOI	NE - INCLUDE AREA	CODE				
INJURIES	INJURED	EMS AGENCY (NAME)		INHIBED	TAKENTO	MEDICAL FACILITY	(NAME CITY)	SAFETY EQUIPMENT			SEATING POSIT	ION ATD DA	C HEACE	EIECTION	TRAPPED	
1110011120	TAKEN BY	Ello Adelto I (IAME)		INCORED				USED	DOT-COMPLIANT SEATING POSITION MC HELMET			AIR	AIR BAG USAGE EJECTION TRAFFED			
OL STATE	OPERATOR L	∐ R LICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL			OFFENSE DESC	RIPTION	I		CITA	CITATION NUMBER			
				CODE												
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	_	OHOL / DRUG SUSPI		CONDITION	STATUS	ALCOHO TYPE	L TEST VALUE	STATUS		G TEST(S RESUL	SELECT UP TO 4	
			BY		=	LCOHOL MAI THER DRUG	RIJUANA	ļ	ļ	ļ. ,		<u>l</u>			0 0 1	
UNIT #	NAME: LAST, F	FIRST, MIDDLE			<u></u>	THER BROOK				D	ATE OF BIRTH	<u> </u>		AGE	GENDER	
										1 1	1 1 1	1 1 1		1 1		
ADDRESS:	STREET, CITY, ST	ATE, ZIP							CONTA	CT PHO	NE - INCLUDE AREA	CODE				
				_				_								
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		T-COMPLIA		ION AIR BA	IG USAGE	EJECTION	TRAPPED	
OL STATE	BY	ICENSE NUMBER		OFFENSE CHARGED LOCAL OFFEN			OFFENSE DESC			HELMET		CITATION NUMBER				
OLSTATE	OPERATUR L	ICENSE NUMBER		UFFER	SE UHAP	KUED	CODE	UFFENSE DESC	KIPIIUN			CITA	IIION N	UWBER		
OL CLASS	ENDORSEMENT	RESTRICTION SELECT		VER	ALC	OHOL / DRUG SUSPI	LLL ECTED	CONDITION		ALCOHO		LOTATUO		G TEST(S		
	SELECT UP TO 2		BY	TRACTED		LCOHOL MAI	RIJUANA		STATUS	TYPE	VALUE	STATUS	TYPE	KESUL	SELECT UP TO 4	
TNIII	RIES	SEATING POSITION		AIR BAG	0	THER DRUG OL CLAS	c	OL RESTRIC	TION(S)		• LLLL	CTION		IEST STA	TIIS	
1 - FATAL	KIES	1 - FRONT - LEFT SIDE	1 - NOT DEF			1 - CLASS A	5	1 - ALCOHOL INTER			NOT DISTRACTED	GIIUN		IE GIVEN	1103	
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY	2 EDON'T MIDDLE		ED FRONT 2 - CLASS B ED SIDE 3 - CLASS C			2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION			2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED				
4 - POSSIBLE IN	IBLE INJURY 3 - FRONT - RIGHT SIDE 4-			OYED BOTH FRONT / SIDE 4 - REGULAR CLASS			4 - FARM WAIVER		DEVICE (TEXTING, TYPING, DIALING)			SAMPLE / UNUSABLE				
5 - NO APPAREN	(MOTORCYCLE PASSENGER)			NOT APPLICABLE (OHIO = D) DEPLOYMENT UNKNOWN 5 - M/C MOPED ONLY				5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A			3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE			4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS		
	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	9-DEPLUT	WENT UNKN	OWN	6 - NO VALID OL		& CLASS B BUS		4 - 1	TALKING ON HAND-H	HELD		(NOWN		
1 - NOT TRANSP /TREATED AT		7 - THIRD - LEFT SIDE	E,	JECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		5 - 1	COMMUNICATION DI OTHER ACTIVITY WI	TH AN	ALC 1 - NON		ST TYPE	
2 - EMS 3 - POLICE		(MOTORCYCLE SIDE CAR) 8-THIRD – MIDDLE	1 - NOT EJE	CTED LLY EJECTED		H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9 - LEARNER'S PER	MIT		ELECTRONIC DEVIC PASSENGER	E	2 - BLO			
9 - OTHER / UNK	NOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY			P - PASSENGER		RESTRICTIONS		7-	OTHER DISTRACTION		3 - URII 4 - BRE			
SAFETY E	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP	PLICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DAY		8-4	INSIDE THE VEHICL OTHER DISTRACTION		5 - OTH			
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		RAPPED		R-THREE-WHEEL MC	TORCYCLE	12 - LIMITED - OTHE			THE VEHICLE OTHER / UNKNOWN		DR	UG TEST	TYPE	
3 - LAP BELT ON	ELT ONLY USED ILY USED	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOT TRA 2 - EXTRICA			S - SCHOOL BUS T - DOUBLE & TRIPLE	TRAILERS	13 - MECHANICAL D (SPECIAL BRAK CONTROLS, OR O	ES, HAND		CONDITIO	N	1 - NON			
	LAP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHAN 3 - FREED B	NICAL MEAN: RY	S	X - TANKER / HAZMAT		ADAPTIVE DEVI	CES)	1 - /	APPARENTLY NORM.		2 - BL0 3 - URII			
FORWARD FA		13 - TRAILING UNIT		CHANICAL M	EANS			14 - MILITARY VEHIO			PHYSICAL IMPAIRM EMOTIONAL (E.G., DE		4 - OTH	ER		
6 - CHILD REST	RAINT SYSTEM – G	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)						AIR BRAKES 16 - OUTSIDE MIRRO		A	NGRY, DISTURBED)				ESULT(S)	
7 - BOOSTER SE		15 - NON-MOTORIST 99 - OTHER / UNKNOWN						17 - PROSTHETIC AII		5 - F	LLNESS ELL ASLEEP, FAINT	ED,		PHETAMINES BITURATES		
8 - HELMET USI 9 - PROTECTIVE	PADS USED	77 - OTTILITY DIVINIVO WIN						18 - OTHER		F	ATIGUED, ETC. INDER THE INFLUEI		3 - BEN	IZODIAZEPIN	ES	
(ELBOW, KNE 10 - REFLECTIVE										0	F MEDICATIONS / D ALCOHOL		4 - CAN 5 - COC	INABINOIDS AINE		
11 - LIGHTING - F	PEDESTRIAN										THER / UNKNOWN		6 - OPIA	ATES / OPIOID	S	
/ BICYCLE ON	VLY												7 - 0TH	ER		