OF PUBLIC SHAREST TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT										LOCAL REPORT NUMBER*						
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION									2	0 2	4 -	0 (0 (0 1	299	
SECONDARY CRAS	OH-1P OH-1P		REPORTING AGENCY NAME* Heath PD 0 4 5 0 7						HIT/SKIP							
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE TOWNSHIP*							2					ME*			99 - UNKNOWN SH SEVERITY	
4 5 1 2 - VILLAGE HEATH										0520	024	190	1 , 5	360	FATAL	
		RO	OAD TYPE		LATIT	UDE DEC	IMAL DEGRE	ES		SERIOUS INJURY SUSPECTED						
S R 79	3	- SOUTH - EAST - WEST	HEBRON				F	R D	4.0	0,0	287	7 3 3	3		MINOR INJURY SUSPECTED	
(Charles Comments), Comments	NUMBER PREFIX 1		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)					OAD TYPE		LONGI	TUDE DEC	IMAL DEGR	EES	4 -	INJURY POSSIBLE	
ROUTE TYPE ROUTE N	3		869						-82,44,213,5 5-PROPERTY DAMA(
REFERENCE POINT	E		ROAD TYPE	INTERSECTION RELATED												
1 - INTERSECTION 2 - MILE POST	FROM REFERENCE 1 - NOR 2 - SOU	TH	NTERSTATE ROL EDERAL US ROL	514	- ALLEY - AVENUE	HW - HIGHWAY	ROAD		WITHI	IN INTER	TERSECTION OR ON APPROACH					
3 - HOUSE #	3 - EAS 4 - WES	T 03-1	TATE ROUTE	BL	MP - MILEPOS	T ST -	STREET	WITHI	HIN INTERCHANGE AREA NUMBER OF APPROACHES							
DISTANCE FROM REFERENCE	ISTANCE DISTANCE CR - NUMBERED COUNTY ROUTE CR - CIRCLE OV - OVAL TE - TE											RO	ADWA	1		
9 2	1 - MILES 2 - FEET 3 - YARDS TR - NUMBERED TOWNSHIP ROUTE DR - DRIVE PI - PIKE WA - WAY HE - HEIGHTS PL - PLACE								ROADWAY DIVIDED							
	LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT										TRAVEL			MEDIAN	ТҮРЕ	
	1 - ON ROADWAY 9 - CROSSOVER 1 - NOT COLLISION 4 1 - ON SHOULDER 10 - DRIVEWAY/ALLEY ACCESS 2 BETWEEN 5								1 - NORTH				1 - DIVIDED FLUSH MEDIAN (<4 FEET)			
3-IN MEDIAN 11-RAILWAY GRADE CROSSING VEHICLES IN							CAME DI	DECTION	2 - SOUTH 3 - EAST				2 - DIVIDED FLUSH MEDIAN (≥4 FEET)			
4 - ON ROADSIDE 12-SHARED USE PATHS OR TRANSPORT 7 - SIDESWIPE, SAME DIRECTION 5 - ON GORE TRAILS 2 - REAR-END 8 - SIDESWIPE, OPPOSITE DIRECTION														- DIVIDED, DEPRESSED MEDIAN		
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE 3 - HEAD-ON 9 - OTHER / UNKNOWN 7 - ON RAMP 14-TOLL BOOTH									(4				1A)	DIVIDED, RAISED MEDIAN (ANY TYPE)		
8 - OFF RAMP 99-OTHER/ UNKNOWN										9 - 01				THER/UNKNOWN		
WORK ZONE RELA	ATED		WORK ZONE TY Ane Closure	PE		ON OF CRASH IN WORK ZONE - BEFORE THE 1ST WORK ZONE				CONTOUR			NDITION 1	S	SURFACE	
WORKERS PRESE	ENT		ANE CLOSURE ANE SHIFT/CROS	SSOVER		WARNING SIGN									2	
LAW ENFORCEME	ENT PRESENT L		ORK ON SHOULD R MEDIAN	DER	14 100	2 - ADVANCE WARNING AREA 3 - TRANSITION AREA				1 - STRAIGHT LEVEL 1 - DRY 2 - STRAIGHT GRADE 2 - WET					1 - CONCRETE 2 - BLACKTOP,	
ACTIVE SCHOOL 2	ZONE		ITERMITTENT O THER	R MOVING WORK	RK 4 - ACTIVITY AREA 5 - TERMINATION AREA					3 - CURVE LEVEL 3 - SNOW					BITUMINOUS, ASPHALT	
LICHT	CONDITION			WEATH						4 - CURVE GRADE 4 - ICE				D.T.	3 - BRICK/BLOCK	
1 - DAYLIGHT	CONDITION		1 - CL		6 - SNOW					9 - OTHER/UNKNOWN 5 - SAND, M OIL, GRA						
3 2 - DAWN/DUS	K GHTED ROADWAY		01 2 - CL 3 - F0			E CROSSWINDS NG SAND, SOIL, DIRT, SNOW				6 - WATER (S MOVING)				, 3-piki		
4 - DARK – ROA	ADWAY NOT LIGHT		4 - RA	IN	9 - FREEZIN	ING RAIN OR FREEZING DRIZZLE				7 - SLUSH				9 - OTHER/UNKNOW		
9 - OTHER / UN	KNOWN ROADWAY NKNOWN	LIGHTING	5 - SL	5 - SLEET, HAIL 99 - OTHER/UNKNOWN						9 - 0THER/L				WN		
NARRATIVE		MOCEUMO (1990) (1990) (1990)					1		1.	1	TI			Ŵ	Indicate the north	
Unit 1 was tı	_			_											direction with an "N" on the compass diagram.	
Unit 1 rear e			-	-					Scene	PD ™ - Evalu	ation Edition			· V	compass diagram.	
When Unit 1							Evaluation	Evaluation Edition		aluation Editio	n			N		
into the vehi	icle infront	of the	m. That v	ehicle ha	ad no	Evaluation Edit	tion				Evaluation Ed	Evaluatio	Eval n Edition	uation edition	· =	
damage.						Evaluation Edit	Evaluation	Evaluation Edition	Edition Ev.	aluation Editio	/	SR 79				
						_		nui 5	Ev	raluation Editio	E Muation Ed	Evaluatio		uation Edition	- -	
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		-				Evaluation Edit	tion		Tra	ancite (877) 9	08-4777					
CRASH REPORTED	RIVAL DATE / 1					EARED D			110000	PORT TAKEN BY POLICE AGENCY						
02052024					0205	2024		0 4 0				15	46		MOTORIST	
TOTAL TIME OTHER TOTAL OFFICER'S NAME* ROADWAY CLOSED INVESTIGATION TIME MINUTES RISCH							Снеск	ED BY OFFI	CER'S	NAME*				H	SUPPLEMENT	
.	2 0			OFFICER'S BA			T	CHECKED E	y OFF	ICER'S E	BADGE N	UMBER'		1 -	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)	
	2 0	6 7	0	7 -	, 1 , !	5 , 3	Jh							1		

OHIO DEP OF PUBLIC SAFETY - SERVICE	ONIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST									2 4 - 0 0		BER 2 9	9				
UNIT #									DATE OF BIRTH AGE GENDER								
01	RUSSELL	, CHRISTOPHER JOH	0 6 / 1 5 / 1 9 7 2 5 1 M														
ADDRESS:	RESS: STREET, CITY, STATE, ZIP CONTACT PHONE - INCLUDE AREA CODE																
252 GRI	252 GREGORY DR NEWARK, OH 43055																
INJURIES	TAKEN	EMS AGENCY (NAME)	INJURED.	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED					SEATING POSITIO		AIR BAG USAGE EJECTION TRAPPED 2 1 1						
5	J BY							0 4	∟ МС НЕ	LMET 0 1	MET 0 1 2						
OL STATE						RGED	CODE		OFFENSE DESCRIPTION			CITATION NUMBER					
O H	ENDODOENENT	RESTRICTION SELECT		DRIVER ALCOHOL / DRUG SUSPE				333.03	A1 (COHOL TEST	020524001 DRUG TEST(S)						
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT		TRACTED AL		DHOL / DRUG SUSPI LCOHOL MAI		CONDITION	STATUS T				SELECT UP TO 4				
_4						THER DRUG		1	1 1	<u> </u>	1	1					
UNIT#	NAME: LAST, F	FIRST, MIDDLE						•		DATE OF BIRTH		AGE	GENDER				
0 2	OWENS,	QUINN NICOLE	1 1 /	0 1 / 1	9 9 5	2 8	F										
ADDRESS:	STREET, CITY, ST	ATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE													
6165 BI	BEECHER RD GRANVILLE, OH 43023																
	INJURED EMS AGENCY (NAME)		INJURED TAKEN TO:			: MEDICAL FACILITY	(NAME, CITY)	USED DOT-Co		MPLIANT		AIR BAG USAGE EJECTION TRAPPED					
5	BY	TOPNOT NUMBER						0 4		LMEI	CITATION NUMBER						
OL STATE	UPERATUR L	ICENSE NUMBER ■		UFFEN	SE CHAF	KGED	LOCAL	UFFENSE DESC	RIPIIUN		CITAIL	CITATION NOWBER					
5	ENDORSEMENT	RESTRICTION SELECT	TUPTO3 DRIVER ALC			DHOL / DRUG SUSPI	CTED	CONDITION	AL	COHOL TEST		DRUG TEST(S)				
OL GLASS	SELECT UP TO 2			TRACTED	_	_	RIJUANA		STATUS T	YPE VALUE			SELECT UP TO 4				
_4				1	0	THER DRUG		1 1 1			1	1					
UNIT#	NIT # NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH		AGE	GENDER				
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE							
Θ	THURED	EMC ACENOV (MANE)		I		MEDICAL FACILITY		CAFETY FAULDMENT		CEATING DOCUTION	N AVD DAG II						
INJUKIE2	INJURED EMS AGENCY (NAME) INJURED TAKEN BY					: MEDICAL FACILITY	(NAME, CITY)	USED	DOT-CO	MPLIANT	AIR BAG USAGE EJECTION TRAPPED						
OL STATE				OFFENSE CHARGED LOCAL					RIPTION		CITATION NUMBER						
						CODE											
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	RIVER ALCOHOL / DRUG SUSPECTE			ECTED	CONDITION	AL(OHOL TEST YPE VALUE	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4							
	SELECT OP 10 2		BY DISTRACTED		=	ALCOHOL MARIJUAN											
L		SEATING POSITION		AIR BAG	□ º	THER DRUG OL CLAS	s	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TEST STA					
1 - FATAL	1 - FRONT - LEFT SIDE		1 - NOT DEPLOYED			1 - CLASS A	,	1 - ALCOHOL INTER		1 - NOT DISTRACTED		1 - NONE GIVEN					
	TED SERIOUS INJURY (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE		2 - DEPLOY			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPERATIN ELECTRONIC COMMUN	VICATION 3-TEST GIVEN CONTAMINATED						
	4 - POSSIBLE INJURY 3 - FRONT – RIGHT SIDE		3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE			4 - REGULAR CLASS		4 - FARM WAIVER	NOEO	DEVICE (TEXTING, TYP DIALING)	ING, SAMPLE / UNUSABLE						
5 - NO APPAREN	5 - NO APPARENT INJURY 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER		5 - NOT APPLICABLE (OHIO = D) O DEDLOYMENT UNIVOCAN 5 - M/C MOPEI					5 - EXCEPT CLASS A		3 - TALKING ON HANDS-FI COMMUNICATION DEV							
INJURED '	INJURED TAKEN BY 5- SECOND - MIDDLE				9 - DEPLOYMENT UNKNOWN 6 - NO VALID OL					4 - TALKING ON HAND-HE	LD	UNKNOWN					
	TTRANSPORTED 6 - SECOND – RIGHT SIDE REATED AT SCENE 7 - THIRD – LEFT SIDE			EJECTION OL ENDORSEMENT					R-TRAILER LICENSE	COMMUNICATION DEV 5 - OTHER ACTIVITY WITH	ΔN	ALCOHOL TEST TYPE					
2 - EMS	O THIRD MIDDLE		1 - NOT EJECTED H - HAZMAT					RESTRICTIONS	ELECTRONIC DE		1 - NONE 2 - BLOOD						
3 - POLICE 9 - OTHER / UNK	3 - POLICE 3 - THIRD - RIGHT SIDE 9 - THIRD - RIGHT SIDE		2 - PARTIALLY EJECTED M - MOTORCYCLE 3 - TOTALLY EJECTED P - PASSENGER					9 - LEARNER'S PER RESTRICTIONS	MIT	7 - OTHER DISTRACTION		3 - URINE					
	SAFETY EQUIPMENT 10 - SLEEPER SECTION OF TRUCK CAB		4 - NOT APP			N - TANKER		10 - LIMITED TO DAY									
1 - NONE USED	11 DACCENCED IN OTHER			Q - MOTOR SCOOTER TRAPPED R - THREE-WHEEL MOTORCYCLE					R	THE VEHICLE	3010.52	DRUG TEST TYPE					
	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 3 - LAP BELT ONLY USED PICK-UP WITH CAP)		1 - NOT TRA			S - SCHOOL BUS		13 - MECHANICAL DI (SPECIAL BRAK		9 - OTHER / UNKNOWN	1 - NONE						
4 - SHOULDER &		12 - PASSENGER IN UNENCLOSED				T - DOUBLE & TRIPLE	TRAILERS	CONTROLS, OR O ADAPTIVE DEVI	THER	CONDITION 1 - APPARENTLY NORMAL		2 - BL00D					
5 - CHILD RESTRAINT SYSTEM – FORWARD FACING		CARGO AREA 13 - TRAILING UNIT	Y X - TANKER / HAZMAT CHANICAL MEANS				14 - MILITARY VEHIC		2 - PHYSICAL IMPAIRMEN	NT 4-OTHER							
6 - CHILD RESTR	6 - CHILD RESTRAINT SYSTEM - 14 - RIDING ON VEHICLE							15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G., DEPR ANGRY, DISTURBED)		RUG TEST RE	SULT(S)				
	REAR FACING (NON-TI 7 - BOOSTER SEAT 15 - NON-MC							16 - OUTSIDE MIRRO		4- ILLNESS	1	- AMPHETAMINES					
8 - HELMET USE	8 - HELMET USED 99 - OTHER / UNKNOWN						17 - PROSTHETIC A			5 - FELL ASLEEP, FAINTED FATIGUED, ETC.	D, 2 - BARBITURATES 3 - BENZODIAZEPINES						
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)									6- UNDER THE INFLUENC OF MEDICATIONS / DRU	Ε ,	4 - CANNABINOIDS					
	- REFLECTIVE CLOTHING									/ALCOHOL	5	5 - COCAINE					
	GHTING – PEDESTRIAN BICYCLE ONLY									9- OTHER / UNKNOWN		6 - OPIATES / OPIOIDS 7 - OTHER					
99 - OTHER / UNK	OTHER / UNKNOWN										8	8 - NEGATIVE RESULTS					