OF PUBLIC SAFETY TRAFFIC CRASH	KEPORT *DENOTES MA LOCAL INFORMATION	NDATORY FIELD FOR SUPPLEM	ENT REPORT	2023-	OCAL REPORT NUMBER							
PHOTOS TAKEN OH-2 K OH-3 OH-1P OTHER	HIT/SKIP		UNIT IN ERROR									
	Heath PD	0 4	NCIC*	1 - SOLVED	2 98 - ANIMAL 99 - UNKNOWN							
COUNTY* LOCALITY* LOCATION: CITY	CRASH DATE / TIME * CRASH SEVERITY											
4,5 1 2-VILLAGE HEATH	0.2142023, 0756 5 1- FATAL 2 - SERIOUS INJURY											
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	ROAD TYPE	LATITUDE DECIMAL DEGREES SUSPECTED										
	HEBRON	RD	40,027	7 1 4	MINOR INJURY SUSPECTED							
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD,	ROAD TYPE	LONGITUDE DE		INJURY POSSIBLE PROPERTY DAMAGE							
	CENTRAL		PK	-82,445	4 5 0	ONLY						
REFERENCE POINT DIRECTION FROM REFERENCE 1 - INTERSECTION 1 - NORTH IR -	ROUTE TYPE INTERSTATE ROUTE(TP) AL	ROAD TYPE - ALLEY HW - HIGHWAY R	D - ROAD	INTERSECTION RELATED								
2 MILE POST A 2 COUTU	FEDERAL US ROUTE AV	- AVENUE LA - LANE S	Q - SQUARE	WITHIN INTERSECTION OR ON APPROACH								
4 - WEST SR -	STATE ROUTE CR		T - STREET E - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES								
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE CT	- COURT PK - PARKWAY T	L - TRAIL	ROADWAY								
7 5 3 2-FEET 3 3-YARDS	ROUTE	- DRIVE PI - PIKE V - HEIGHTS PL - PLACE	VA - WAY	ROADWAY DIVIDED								
LOCATION OF FIRST HARMFUL EVEN	T MAN	NER OF CRASH COLLISION/IMPA	СТ	DIRECTION OF TRAVEL	MEDIAN	ITYPE						
1 - ON ROADWAY 9 - CROSSOVER  1 - ON SHOULDER 10 - DRIVEWAY	DETA	COLLISION 4-REAR-TO-REAR WEEN 5-BACKING		1 - NORTH	1 - DIVIDED FI ( < 4 FEET	LUSH MEDIAN						
11-RAILWAY G	RADE CROSSING VEHI	MOTOR ICLES IN 6-ANGLE		2 - SOUTH 3 - EAST	LUSH MEDIAN							
4 - ON ROADSIDE 12-SHARED US 5 - ON GORE TRAILS	SE PATHS OR TRAN 2 - REAF	NSPORT 7-SIDESWIPE, SAME R-END 8-SIDESWIPE, OPPO		4 - WEST	(≥4 FEET 3 - DIVIDED, D	EPRESSED MEDIAN						
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE	3 - HEAD				4 - DIVIDED, R (ANY TYPE	AISED MEDIAN						
7 - 0N RAMP 14-10LL BOOT 8 - 0FF RAMP 99-0THER/UN	· · ·				9 - OTHER/UNI	KNOWN						
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WO		CONTOUR	CONDITIONS	SURFACE						
The second secon	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST \ WARNING SIGN	WORK ZONE	3	_2							
T (AM ENGODOSMENT DOSOSNIT ) 3-1	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNIN  3 - TRANSITION AREA		1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRETE								
4-	INTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA		2 - STRAIGHT GRADE   2 - WET   2 - BLACKTO   BITUMIN   3 - CURVE LEVEL   3 - SNOW   3 - SUBALT   3 - SUBATT   3 - SUBATT								
ACTIVE SCHOOL ZONE 5-	OTHER	5 - TERMINATION ARE	ΞA	4-CURVE GRADE 4-ICE 3-BRICK/BLOCK								
<b>LIGHT CONDITION</b> 1 - DAYLIGHT	WEATHE 1 - CLEAR	ER 6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL,						
1 2 - DAWN/DUSK	.01 2-CLOUDY	7 - SEVERE CROSSWINDS			6 - WATER (STANDING, MOVING)	STONE 5 - DIRT						
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOKE 4 - RAIN	SNOW NG DRIZZLE		9 - OTHER/UNKNOWN								
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN							
NARRATIVE						To Book Marcon Mar						
UNIT 1 WAS STOPPED IN TH	E SR 79/HEBRON R	RD				Indicate the north direction with an "N" on the						
RIGHT SIDE THRU LANE HEA	-	F		ScenePD ™ - Evaluation Edition		compass diagram.						
UNIT 2 WAS TRAVELING SOL	JTHBOUND ON SR		Evaluation	Evaluation Edition		2						
THE RIGHT SIDE THRU LANE	AND STRUCK UNIT	F1 IN Evaluation Edition	ation Edition		Evaluation Edition							
THE REAR-END.		Evalu	Ev <u>Fi</u> Ev <u>Fi</u> Indition Edition	Evaluation Edition	dition (F <sub>0</sub>							
		Evaluation Edition			Not Evaluation							
		Evalu	Evaluation atlon Edition	Evaluation Edition Edition	- Californ							
		Evaluation Edition	D	Evaluation E	Evaluation Edition							
		Evaluation Edition	Evaluation	Evaluation Edition Edition	<u> </u>							
			2º	Evaluation E	Evaluation Edition							
		Evaluation Edition	ation Edition	Edilon		:=						
		_	1 1	Evaluation E	Evaluation Edition Evaluation Edition							
		Evalu Evaluation Edition	Evaluation ation Edition									
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED D	DATE/TIME RE	EPORT TAKEN BY						
02142023 0756 021	42023 0752	02142023 0	7 5 8 0	2142023	0828	POLICE AGENCY						
TOTAL TIME OTHER TOTA	L OFFICER'S NAME*	C <sub>H</sub>		CER'S NAME*		MOTORIST						
ROADWAY CLOSED INVESTIGATION TIME MINUT	Kamage		mart	W OFFICERS BARGE		SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)						
	O 7 -		O 7	officer's badge N	3 8	AND ENGLISHE REPORT SERVING UPPS)						

■ FIRST HARMFUL EVENT

1

■ MOST HARMFUL EVENT

OHIO DE OF PUBI SAFETY - SER	OF PUBLIC SAFETY MOTORIST / NON-MOTORIST					2 0 2 3 - 0 0 0 0 1 7 2 8											
UNIT #							DATE OF BIRTH AGE GENDER										
01	ANGELETTI, TERESA R									<b>/ 1</b>		9	4 3	F			
ADDRESS: STREET, CITY, STATE, ZIP  27 E POSTAL AVE NEWARK, OH 43055																	
<u> </u>		EMS AGENCY (NAME)	)	IN HIDED	TA VENITO	MEDICAL FACILITY	(NAME CITY)	SAFETY EQUIPMENT			SEA	TING POSIT	ION AID	BAG USAG	E EJECTION	TRAPPED	
INJURIES 5	TAKEN BY	AKEN			IAKEN TO.	MEDICAL FACILITY	(NAME, GITY)	USED 0 .4		T-Compli HELME	IANT		1	1 1	1	1 1	
OL STATE				OFFENS	SE CHAR	CHARGED LOCAL OFFENSE DESC						CI	CITATION NUMBER				
Е о н					CODE												
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	_	HOL / DRUG SUSPI		CONDITION	STATUS	ALCOH TYPE		ALUE	STATU		JG TEST(S	SELECT UP TO 4	
. 4			BY	1	=	_COHOL	RIJUANA	1	1 .	1			1	1			
UNIT #	NAME: LAST, F	FIRST, MIDDLE				TILK DIOG					DATE 0	F BIRTH			AGE	GENDER	
0 2	NAME: LAST, FIRST, MIDDLE  PIERCE, TIFFANY MAE								1 0 / 2 8 / 1 9 8 2 4 0 F								
	: STREET, CITY, ST								CONTACT PHONE - INCLUDE AREA CODE								
80 HAN	NCOCK ST I	NEWARK, OH 43055															
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED				SAFETY EQUIPMENT	□ D0.	T-Compli	SEA	TING POSIT	ION AIR	BAG USAG	E EJECTION	TRAPPED	
5	BY						0 4	MC HELMET 0 1				1 1					
OL STATE	E OPERATOR LICENSE NUMBER			OFFENSE CHARGED LOCAL CODE				DFFENSE DESCRIPTION						TATION NUMBER			
BO H				333.0	3.03					AL COU	OL TES	•т	21	213373 DRUG TEST(S)			
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT		VER Tracted		OHOL / DRUG SUSPI	E <b>CTED</b> RIJUANA	CONDITION	STATUS	TYPE		ALUE	STATU	IS TYP		T SELECT UP TO 4	
4				5	=	THER DRUG		1	1	1			1	11			
UNIT#	# NAME: LAST, FIRST, MIDDLE								DATE 0	F BIRTH			AGE	GENDER			
L																	
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP							CONTA	CT PHO	ONE - IN	ICLUDE AREA	CODE					
TOTORI	T T							T					1	1	<del>     </del>		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED	FAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	USED USED		T-Compli HELME	IANT	TING POSIT	ION AIR	BAG USAG	E EJECTION	TRAPPED	
OL STATE		OPERATOR LICENSE NUMBER		OFFENSE CHARGED LOCAL		OFFENSE DESC					CI	CITATION NUMBER					
ORIS	OF ENGLASE NUMBER					CODE		JOHN HON									
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT			ALCC	HOL / DRUG SUSPI	ECTED	CONDITION		ALCOH TYPE		ST ALUE	STATU		JG TEST(S	T SELECT UP TO 4	
	SELECT OF 10 2		BY	TRACTED	=		RIJUANA		STATUS	'''		ALUL	Jana	.5	KESOE	1 355501 07 10 4	
LTN II	JRIES	SEATING POSITION		IR BAG	OT	THER DRUG OL CLAS	s	OL RESTRIC	TION(S)		DIVE D	DISTRA	CTION		TEST STA	TUS	
1 - FATAL	JRILJ	1 - FRONT - LEFT SIDE	1 - NOT DEP			1 - CLASS A		1 - ALCOHOL INTER		2000	- NOT DIS		GIIGN	and the second second	NE GIVEN	1100	
	D SERIOUS INJURY (MOTORCYCLE DRIVER) 2 - DEPLOYE 2 - FRONT - MIDDLE 3 DEPLOYE					2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES			2 - MANUALLY OPERATING AI ELECTRONIC COMMUNICA			TION 3-TEST GIVEN CONTAMINATED					
4 - POSSIBLE I	E INJURY 3 - FRONT - RIGHT SIDE 4 - DEPLOYE		ED BOTH FRONT / SIDE 4 - REGULAR CLASS			4 - FARM WAIVER			DEVICE (TEXTING, TYPING, DIALING)			' SAMPLE / UNUSABLE					
5 - NO APPARE	- NO APPARENT INJURY 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - NOT APP		LICABLE (OHIO = D) MENT 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					
	NJURED TAKEN BY 5- SECOND - MIDDLE			6 - NO VALID OL & CLASS B BUS				OR-TRAILER 4-TALKING ON HAND- COMMUNICATION D E LICENSE 5-OTHER ACTIVITY W			G ON HAND-H	DEVICE		IKNOWN			
	/TREATED AT SCENE 7-THIRD - LEFT SIDE		7 - EXCEPT TRAC  1ECTION OL ENDORSEMENT 8 - INTERMEDIAT			ACTIVITY WI	H AN 1 NONE										
2 - EMS 3 - POLICE	0 THIRD MIDDLE					RESTRICTIONS	RESTRICTIONS 9 - LEARNER'S PERMIT			ELECTRONIC DEVICE 6 - PASSENGER				2 - BL00D			
	9-OTHER/UNKNOWN 9-THIRD-RIGHT SIDE 3-TOTALLY		EJECTED P - PASSENGER RESTRICT			RESTRICTIONS	CTIONS 7 - OTHE			- OTHER DISTRACTION 3 - URINE INSIDE THE VEHICLE 4 - BREATH							
SAFETY E	10 - SLEEPER SECTION 0F TRUCK CAB 4 - NOT APP					10 - LIMITED TO DAY	MPLOYMENT 8 - OTHER DISTRACT			DISTRACTION							
1 - NONE USED	1 - NONE USED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA			RAPPED R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTHI				9	THE VEHICLE 9 - OTHER / UNKNOWN		DRUG TEST TYPE						
	2- SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, B- LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA		JED BY SPECI			(SPECIAL BRAK	3 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND			CONDITION			1 - NONE				
	CARGO AREA 2 CDCCD			VICAL MEANS  X - TANKER / HAZMAT			CONTROLS, OR OTHER ADAPTIVE DEVICES)		1	1 - APPARENTLY NORMAL			2 - BLOOD 3 - URINE				
FORWARD F	FORWARD FACING 13-TRAILING UNIT NON			ECHANICAL MEANS			14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT			2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED,			4 - OTHER				
	6 - CHILD RESTRAINT SYSTEM – REAR FACING (NON-TRAILING UNIT)						AIR BRAKES  16 - OUTSIDE MIRROR			ANGRY, DISTURBED)			DRUG TEST RESULT(S)				
	7 - BOOSTER SEAT 15 - NON-MOTORIST						17 - PROSTHETIC AID			4- ILLNESS 5- FELL ASLEEP, FAINTED,			1 - AMPHETAMINES 2 - BARBITURATES				
9 - PROTECTIV	8 - HELMET USED 99 - OTHER / UNKNOWN 9 - PROTECTIVE PADS USED						18 - OTHER			FATIGUED, ETC. 6- UNDER THE INFLUENCE			3 - BENZODIAZEPINES				
(ELBOW, KN	(ELBOW, KNEES, ETC.) 10 - REFLECTIVE CLOTHING									OF MEDICATIONS / DRUGS / ALCOHOL			4 - CANNABINOIDS 5 - COCAINE				
11 - LIGHTING -	11 - LIGHTING - PEDESTRIAN											OTHER / UNKNOWN 6 - OPIATES / OPIOID			S		
/ BICYCLE O	YCLE ONLY ER/UNKNOWN											7 - OTHER 8 - NEGATIVE RESULTS					