OHIO DEPARTMENT OF PUBLIC SAFETY TRAFFIC	CRASH I	LOCAL REPORT NUMBER*									
□ 0H-2	X 0H-3	2024-	00002	2,3,0,0							
PHOTOS TAKEN OH-1P SECONDARY CRASH DEDIVA		REPORTING AGENCY NAME* Heath PD	0 4	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR 1 - SOLVED 0 2 98 - ANIMAL 2 - UNSOLVED 0 2 99 - UNKNOWN							
COUNTY* LOCALITY*	IE I KOI EKIT	Y, VILLAGE, TOWNSHIP*		CRASH DATE / TIME * CRASH							
4 5 1 1-CITY 2-VILLAGE	HEATH	0.3082024 1547 5 1-FATAL									
ROUTE TYPE ROUTE NUMBER PREF	IX 1 - NORTH	LOCATION ROAD NAME		ROAD TYPE	2 - SERIOUS INJURY						
S R 79	2 - SOUTH 3 - EAST			40,024227 3-MINOR INJURY SUSPECTED							
		REFERENCE ROAD NAME (ROA	AD, MILEPOST, HOUSE #)	LONGITUDE DECIMAL DEGREES 4-INJURY POSSIBL							
ROUTE TYPE ROUTE NUMBER PREF	2 - SOUTH 3 - EAST	1010 Hebron Rd.			-82 4 4 7	- PROPERTY DAMAGE					
REFERENCE POINT DIRECTI	_ 4-WESI	ROUTE TYPE			NTERSECTION RELATE	ONLY D					
	NORTH IR -	INTERSTATE ROUTE(TP)		D - ROAD	WITHIN INTERSECTION OR ON APPROACH						
3- HOUSE # 2 3-	EAST	I EDERAL OS ROOTE		Q - SQUARE T - STREET	WITHIN INTER	TERCHANGE AREA NUMBER OF APPROACHES					
DISTANCE DISTAN	ICE CR-	NUMBERED COUNTY ROUTE		E - TERRACE							
<u> </u>		NUMBERED TOWNSHIP		L - TRAIL /A - WAY	ROADWAY DIVIDED						
	YARDS	ROUTE	HE - HEIGHTS PL - PLACE		KOADWAT DIV	, DED					
LOCATION OF FIRST H 1 - ON ROADWAY	ARMFUL EVEN 9 - CROSSOVER		ANNER OF CRASH COLLISION/IMPAC OT COLLISION 4 - REAR-TO-REAR	т	DIRECTION OF TRAVEL	Hamilton se sos and	N TYPE				
0 1 2-ON SHOULDER	10-DRIVEWAY/	ALLEY ACCESS 2 B	ETWEEN 5 - BACKING WO MOTOR		1 - NORTH , 2 - SOUTH	(< 4 FEE1					
3 - IN MEDIAN 4 - ON ROADSIDE	11-RAILWAY G 12-SHARED US	RADE CROSSING V	EHICLES IN 6-ANGLE RANSPORT 7-SIDESWIPE, SAME	DIRECTION	3 - EAST 4 - WEST	2 - DIVIDED I (≥4 FEE1	VIDED FLUSH MEDIAN 4 FEET)				
5 - ON GORE 6 - OUTSIDE TRAFFIC WAY	TRAILS 13-BIKE LANE		EAR-END 8 - SIDESWIPE, OPPOS		4-WEST	DEPRESSED MEDIAN RAISED MEDIAN					
7 - ON RAMP	14-TOLL BOOTE	H Silli	EAD-ON 9-OTHER/UNKNOW	r IN	(ANY TYPE) 9 - OTHER/UNKNOWN						
8 - OFF RAMP	99-OTHER/UN										
WORK ZONE RELATED	1-	WORK ZONE TYPE LANE CLOSURE	1 - BEFORE THE 1ST V		CONTOUR 1	conditions 2	SURFACE 2				
WORKERS PRESENT	2 -	LANE SHIFT/CROSSOVER	WARNING SIGN 2 - ADVANCE WARNIN	C ARFA							
LAW ENFORCEMENT PRESENT		WORK ON SHOULDER OR MEDIAN	3 - TRANSITION AREA		1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRETE 2 - STRAIGHT GRADE 2 - WET 2 - BLACKTOP,						
ACTIVE SCHOOL ZONE		INTERMITTENT OR MOVING WO OTHER	RK 4 - ACTIVITY AREA 5 - TERMINATION ARE	Α	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT				
LIGHT CONDITION		WEAT	THED			4 - ICE	3 - BRICK/BLOCK				
1 - DAYLIGHT		1 - CLEAR	6 - SNOW		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL, STONE						
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADW	ΔΥ	SNOW	6 - WATER (STANDING, MOVING) 5 - DIRT								
4 - DARK – ROADWAY NOT LI	NG DRIZZLE	7 - SLUSH 9 - OTHER/UN									
5 - DARK – UNKNOWN ROAD 9 - OTHER / UNKNOWN	WAY LIGHTING	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	I I		N/V	Indicate the north				
Unit 1 was traveling							direction with an "N" on the				
Unit 2 was following			il i		ScenePD ™ - Evaluation Edition		compass diagram.				
stopped for traffic a			o and	Evaluation Evaluation	Evaluation Edition						
crashed into the rea	r of Unit	1.	Evaluation Edition	7 //		Evaluation Edition	on —				
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CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME REPORT TAKEN BY											
03082024 154	7 030	82024 1550	03082024 1	5 5 2 0	3082024	1638	POLICE AGENCY				
TOTAL TIME OTHER TOTAL OFFICER'S NAME* ROADWAY CLOSED INVESTIGATION TIME MINUTES Peterson CHECKED BY OFFICER'S NAME* Smart							MOTORIST SUDDIEMENT				
overest of the second of the s	MINOI	1 CCC13011	BADGE NUMBER*		BY OFFICER'S BADGE N	UMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)				
0 4 6	4 6	0 7 -		D 7	- 1	3 8	- Committee of the Comm				

OHIO DEE OF PUBLI SAFETY - SERVE	OHIO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST						2 0	2	4 - 0 (3 0	0			
UNIT #										DATE OF BIRTH			AGE	GENDER		
01	THOMPSON, GRACE MCKENNA							0 9 / 1 8 / 2 0 0 3 2 0 F								
₽	ADDRESS: STREET, CITY, STATE, ZIP CONTACT PHONE - INCLUDE AREA CODE															
<u> </u>	D TERRACE DR HEATH, OH 43056 IRIES INJURED TAKENTO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT										SEATING POSIT	ION ATD DA	AG USAGE	EJECTION	TRAPPED	
NOOKIES	TAKEN BY			INJUNED	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED O .4 .				F-COMPLIA HELME	ANT	1		1	1		
OL STATE				OFFENS	SE CHAR	RGED	LOCAL	OFFENSE DESC				_	CITATION NUMBER			
OH	J PERATUR LIBERSE NUMBER				OFFENSE CHARGED LOCAL OFFENSE DES			NI TION				STATION NOMBER				
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	VER TRACTED			CONDITION	STATUS		OL TEST VALUE	STATUS		G TEST(S RESULT	SELECT UP TO 4			
_4		BY		1 OTHER DRUG			1	1	1		1	1				
UNIT#	NAME: LAST, F	T, FIRST, MIDDLE								D	ATE OF BIRTH			AGE	GENDER	
0 2	BORDERS	S, KYLE RITCHEY							1 0	__ / __ 1	L 9 / 1	9 9	2	3 1	M	
ADDRESS:	STREET, CITY, ST	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
3407 F/	ALLSBURG	RD NEWARK, OH 43	8055													
INJURIES 5	INJURED I TAKEN BY	EMS AGENCY (NAME)		INJURED 1	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			SAFETY EQUIPMENT USED 0 4	T DOT-COMPLIANT SEATING POSITION OF 1		ION AIR BA		EJECTION 1	TRAPPED 1		
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAR	RGED	LOCAL	OFFENSE DESC	RIPTION	l		CITA	CITATION NUMBER			
Во н				333.0	3		CODE	333.03				145	145030824002			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	ALCO	HOL / DRUG SUSPE		CONDITION	ALCOHOL TEST STATUS TYPE VALUE		STATUS	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4				
. 4	322201 01 102		BY	_	=	_	RIJUANA	1	1	1	VALUE	1	1	. KEGGE	00000101104	
	NAME LAST	TOOT MADDLE		1	U 01	OTHER DRUG			<u> </u>						LCENDED	
UNIT #	NAME: LAST, F	-IRST, MIDDLE								U	DATE OF BIRTH			AGE	GENDER	
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE							
ORI									CONTA			CODE				
INJURIES	INJURED I	EMS AGENCY (NAME)		INJUREDT	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT			SEATING POSIT	ION AIR BA	AG USAGE	EJECTION	TRAPPED	
NON .	TAKEN BY			USED			DOT-COMPLIANT MC HELMET									
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED LOCAL			OFFENSE DESC	CRIPTION			CITA	CITATION NUMBER				
TORII							CODE									
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		HOL / DRUG SUSPE		CONDITION	STATUS		VALUE	STATUS		G TEST(S RESULT	SELECT UP TO 4	
	l		BY		=	_COHOL MAF THER DRUG	RIJUANA		ļ	ļ].			
INJU	RIES	SEATING POSITION	A	IR BAG		OL CLASS	3	OL RESTRIC	TION(S)		RIVER DISTRA	CTION		TEST STA		
1 - FATAL		1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP			1 - CLASS A		1 - ALCOHOL INTER			NOT DISTRACTED			NE GIVEN		
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY	2 - FRONT - MIDDLE	2 - DEPLOYI 3 - DEPLOYI				2 - CDL INTRASTAT 3 - CORRECTIVE LE			2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION		2 - TEST REFUSED N 3 - TEST GIVEN, CONTAMINATED				
4 - POSSIBLE IN		3 - FRONT – RIGHT SIDE 4 - DEPLOYE		D BOTH FRONT / SIDE 4 - REGULAR CLASS			4 - FARM WAIVER			DEVICE (TEXTING, TYPING, DIALING)			SAMPLE / UNUSABLE			
5 - NO APPAREN	APPARENT INJURY 4 - SECOND - LEFT SIDE 5 - NOT APP (MOTORCYCLE PASSENGER) 5 - NOT APP		E M/C MODED ONLY			5 - EXCEPT CLASS	J- IALKING 0									
	RED TAKEN BY 5- SECOND - MIDDLE			WENT UNKNO	6 - NO VALID OL & CLASS B BUS			4 - TALKING ON HAND-HEL			ELD	D UNKNOWN				
1 - NOT TRANSP /TREATED A		7 - THIRD - LEFT SIDE	E.	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE			OTHER ACTIVITY WI		ATTO SECURITY OF THE PARTY OF T	OHOL TES	ST TYPE	
2 - EMS		(MOTORCYCLE SIDE CAR) 8 - THIRD – MIDDLE	1 - NOT EJE			H - HAZMAT		RESTRICTIONS			ELECTRONIC DEVICE	Ē	1 - NON 2 - BLO			
3 - POLICE 9 - OTHER / UNK	PULICE 2- PARTIE		3 - TOTALLY	LY EJECTED M - MOTORCYCLE 9 - LEARNER'S EJECTED P - PASSENGER RESTRICTIO			9- LEARNER'S PER RESTRICTIONS	7 - OTHER DISTRACTI				3 - URINE				
SAFETY F	AFETY EQUIPMENT 10 - SLEEPER SECTION 4 - NOT APP		LICABLE N - TANKER 10 - LIMITED TO DA							4 - BREATH UTSIDE 5 - OTHER						
1 - NONE USED	QOII III ENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	TI	RAPPED		Q - MOTOR SCOOTER R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE			THE VEHICLE				TVDE	
	2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOT TRA		PPED S - SCHOOL BUS 13 - MECHANICAL I						DRUG TEST TYPE 1 - NONE							
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED			2 - EXTRICATED BY MECHANICAL MEANS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT			CONTROLS, OR O ADAPTIVE DEVI	THER	ER CONDITION			2 - BL00D				
	5 - CHILD RESTRAINT SYSTEM – CARGO AREA FORWARD FACING 13 - TRAILING UNIT		3 - FREED BY NON-MECHANICAL MEANS			A - TAINNER / NAZWAI		14 - MILITARY VEHIC	1 ATTAICEITET HORINA			3 - URINE 4 - OTHER				
6 - CHILD RESTI	6 - CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR						15 - MOTOR VEHICLES WITHOUT AIR BRAKES			3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		DRUG TEST RESULT(S)				
	REAR FACING (NON-TRAILING UNIT) 7 - BOOSTER SEAT 15 - NON-MOTORIST						16 - OUTSIDE MIRROR		4-	4- ILLNESS		1 - AMPHETAMINES				
8 - HELMET US	8 - HELMET USED 99 - OTHER / UNKNOWN						17 - PROSTHETIC AID 18 - OTHER			5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			2 - BARBITURATES 3 - BENZODIAZEPINES			
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)						20 - OTHER			6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS		3 - BENZODIAZEPINES 4 - CANNABINOIDS				
10 - REFLECTIVE	CLOTHING									1	/ALCOHOL		5 - COC		ıc.	
11 - LIGHTING - I / BICYCLE OF										9-1	OTHER / UNKNOWN		6 - 0PI	ATES / OPIOID IER	i d	
99 - OTHER / UNK	99 - OTHER / UNKNOWN													8 - NEGATIVE RESULTS		