OF PUBLIC SAFETY TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT											CAL REPO	RT NUMBER	*					
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION									202	3 -	0 0	0 0 2	8 3 5					
SECONDARY CRASH	#30.00m3/s	REPORTING AGENCY NAME*  Heath PD  0 4 5 0 7							HIT/SKIP   NUMBER OF UNITS   UNIT IN ERROR   1 - SOLVED   0 2   0 1 98 - ANIMAL   99 - UNKNOWN									
COUNTY* LOCALITY*						DATE / TI		CRA	SH SEVERITY									
4 5 1 2 - VI 3 - TO			03142	023	0253		- FATAL - SERIOUS INJURY											
ROUTE TYPE ROUTE NUM				ROAD TYPE	4 0 0	TUDE DECI	1854	SUSPECTED										
		_ <b>C</b> _T							3 - MINOR INJURY SUSPECTED									
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST 4-WEST						OUSE #)		ROAD TYPE		TUDE DEC		4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE						
The state of the s			W. N.	R D	8,	3 8 2		J	ONLY									
REFERENCE POINT 1 - INTERSECTION	- ALLEY	ROAD TYP		D - ROAD	l 🗖 with			<b>ION RELATE</b> R ON APPROA										
2 - MILE POST 3 - HOUSE #	- AVENUE - BOULEVARD	LA - LANE MP - MILEP		Q - SQUARE T - STREET					L									
4 - WEST SR - STATE ROUTE SR - CIRCLE OV - OV.  DISTANCE DISTANCE CR - NUMBERED COUNTY ROUTE								E - TERRACE	WITH THE COMPANDER OF ALT RE									
FROM REFERENCE	FROM REFERENCE UNIT OF MEASURE 1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE PI - PIKE WA - WAY																	
3 3 6											ROADWAY DIVIDED							
LOCATION (	OF FIRST HARMI	FUL EVENT			INER OF CRAS			CT	DIRECTION of			MEDIA	Augustian men					
0 1 2-ON SHOULDER	R 10-D	RIVEWAY/A	ALLEY ACCESS	■ BET	TWEEN O MOTOR	5 - BACKING			180 200	ORTH OUTH	I .	1 - DIVIDED FLUSH MEDIAN (<4 FEET)						
3 - IN MEDIAN 4 - ON ROADSIDE			RADE CROSSING E PATHS OR	VEH	HICLES IN	5 - ANGLE 7 - SIDESWI	PE, SAME	DIRECTION	3 - E			2 - DIVIDED FLUSH MEDIAN (≥4 FEET)						
5 - ON GORE 6 - OUTSIDE TRA		RAILS IKE LANE		2 - RE <i>A</i> 3 - HE <i>A</i>		3 - SIDESWI 9 - OTHER/	- 10						DEPRESSED MEDIAN RAISED MEDIAN					
7 - ON RAMP	14-T	OLL BOOTH		Saller	(D-ON	ZZOTTEK	3141(1404	VIV	(ANY TYPE) 9 - OTHER/UNKNOWN									
8 - OFF RAMP		THER? ON	WORK ZONE TY	DE .	LOCATIO	N OF CRAS	L TN MO	DV ZONE	CONTOU	IR	COND	ITIONS	SURFACE					
WORK ZONE RELATE		1 - L	ANE CLOSURE	r E.		BEFORE TI	HE 1ST	WORK ZONE	1		3		2					
WORKERS PRESENT			ANE SHIFT/CROS ORK ON SHOULD		2	WARNING ' ADVANCE -		G AREA	1 - STRAIGHT	LEVEL	∟∟ 1 - DRY		1 - CONCRETE					
LAW ENFORCEMENT	PRESENT	C	R MEDIAN NTERMITTENT o			- TRANSITIO - ACTIVITY			2 - STRAIGHT		2 - WET		2 - BLACKTOP, BITUMINOUS,					
ACTIVE SCHOOL ZON	IE:		THER		20-	- TERMINAT		ĒΑ	3 - CURVE LE' 4 - CURVE GR		3 - SNOW 4 - ICE		ASPHALT					
LIGHT CO	NDITION			WEATH	IER				9 - OTHER/UN		5 - SAND, M							
1 - DAYLIGHT 3 2 - DAWN/DUSK			1-CL <b>06</b> 2-CL		6 - SNOW 7 - SEVERE	CROSSWIN	DS				OIL, GRA 6 - WATER (	STANDING, 5 - DIRT						
3 - DARK - LIGHTED ROADWAY 3 - FOG, SMOG, SMOKE							9	SNOW NG DRIZZLE			MOVING 7 - SLUSH		9 - OTHER/UNKNOWN					
5 - DARK – UNKNO	OWN ROADWAY L		100	EET, HAIL	99 - OTHER			NG DRIZZEE			7 - SLUSH 9 - OTHER/U	JNKNOWN						
9-OTHER/UNKN	OWN	V.5000.5050.5050.5000.505																
NARRATIVE UNIT 2 WAS II	HEGALLY	/ DARI	(FD ON O	AK CT II	NTT 1							_ A	Indicate the north direction with an "N" on the					
WAS SALTING													compass diagram.					
BACKED INTO	_					_		Evaluation	ScenePD ™ - Evalu				1-					
						Evaluation		ation Edition	Control		Evaluation Ed	Evaluation Edition						
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						Evaluation		ation Edition	Trancite (877) 9	108-4777								
CRASH REPORTED DA			ISPATCH DATE /		Sacrato	RIVAL DATE			SCENE CL		ATE / TIME		EPORT TAKEN BY					
03142023	0 2 5 3	0314	12023	0 2 5 6	0314	2 0 2 3	0	3 1 0 0	3142	023	03	40	POLICE AGENCY MOTORIST					
TOTAL TIME OTHER TOTAL OFFICER'S NAME* ROADWAY CLOSED INVESTIGATION TIME MINUTES Bubis							CHECKED BY OFFICER'S NAME*					SUPPLEMENT						
OFFICER'S BADGE NUMBER							┤''	CHECKED BY OFFICER'S BADGE NUMBER*  (CORRECTION 10 AM EXISTING REPO					(CORRECTION OF ADDITION TO AN EXISTING REPORT SENT TO ODPS)					
			0	7 -	-	5 2		0 7		1 ,		0						

OHIO DEI OF PUBLI SAFETY - SERV	IN DEPARTMENT PUBLIC SAFETY MOTORIST / NON-MOTORIST									2 0 2 3 - 0 0 0 0 2 8 3 5									
UNIT #											DATE O	F BIRTH			AGE	GENDER			
0 1	HAINES, GERALD HUNTER S: STREET, CITY, STATE, ZIP									1- 1		/ 2		1	2 2	M			
	ADDRESS: STREET, CITY, STATE, ZIP  30707 CR 22 RD WARSAW, OH 43844																		
0				SEA	TING POSITI	ON AID R	AG USAGE	EJECTION	TRAPPED										
INJURIES  5	TAKEN BY	EMS AGENCY (NAME)	INSURED	TAKENTO	: MEDICAL FACILITY	(MAME, OI) 17	SAFETY EQUIPMENT USED 0 .4		T-COMPL HELMI	IANT		1		1	1				
OL STATE	OPERATOR L	ICENSE NUMBER	OFFEN:	SE CHAF	RGED	LOCAL	OFFENSE DESC					_	CITATION NUMBER						
Е о н			CODE																
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		OHOL / DRUG SUSP		CONDITION	STATUS		OL TES	ALUE	STATUS		G TEST(S	SELECT UP TO 4			
. 2 .	ļ		BY	1	=	LCOHOL MAI THER DRUG	RIJUANA	1	. 1	. 1			. 1	1					
UNIT #	NAME: LAST, F					OTHER DROG					DATE O	F BIRTH		<u> </u>	AGE	GENDER			
0 2	SMITH, T	REVOR CASEY								1					4 1	ļ. ,			
	STREET, CITY, ST.	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE										
1710 O	1710 OAK CT B HEATH, OH 43056																		
INJURIES	IRIES INJURED EMS AGENCY (NAME)							SAFETY EQUIPMENT	DOT-COMPLIANT				ON AIR B	N AIR BAG USAGE EJECTION TRAPPE					
5	BY							0 1	MC HELMET 1 5					1					
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED LOCAL CODE				OFFENSE DESC	RIPTION	N				CITATION NUMBER					
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	UPTO 3 DRIV	/ER ALCOHOL / DRUG SUSPEC			L L	CONDITION		ALCOH	OHOL TEST			DRU	G TEST(S	)			
OL GLAGO	SELECT UP TO 2			TRACTED		_	RIJUANA		STATUS	TYPE	V.	ALUE	STATUS		RESUL	SELECT UP TO 4			
4	لــالــا				07	THER DRUG			1	1	J • L		1	1		لــالــالــ			
UNIT #	UNIT # NAME: LAST, FIRST, MIDDLE										DATE OF BIRTH				AGE	GENDER			
ADDDESS											CONTACT BUONE PROPER ASSE								
SINOTO SI	ADDRESS: STREET, CITY, STATE, ZIP										CONTACT PHONE - INCLUDE AREA CODE								
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED.	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT			SEA	TING POSITI	ON AIR B	AG USAGE	EJECTION	TRAPPED			
NON	TAKEN BY							USED		T-COMPL HELMI	IANT	1							
OL STATE	E OPERATOR LICENSE NUMBER			OFFENSE CHARGED LOCAL			OFFENSE DESC	RIPTION			CITA	CITATION NUMBER							
				CODE															
≥ OL CLASS	L CLASS ENDORSEMENT RESTRIC		DIST	RACTED -		HOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST STATUS TYPE VALUE					DRUG TEST(S) TYPE   RESULT SELE					
	ļ. ,, ,		BY		=	LCOHOL MAI THER DRUG	RIJUANA		<u> </u>				l,						
INJU	IRIES	SEATING POSITION	A	IR BAG		OL CLAS	s	OL RESTRIC	TION(S	0	RIVER	DISTRAC	TION		TEST STA	TUS			
1 - FATAL	- FATAL 1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)					1 - CLASS A 2 - CLASS B		RLOCK DEVICE 1 - NOT DISTRACTED  'E ONLY 2 - MANUALLY OPERATIN'			NC AN	1 - NONE GIVEN G AN 2 - TEST REFUSED							
	USPECTED MINOR INJURY 2 - FRONT - MIDDLE		3 - DEPLOYED SIDE			3 - CLASS C				2	ELECTRONIC COMMUNIC DEVICE (TEXTING, TYPIN			CATION 3 - TEST GIVEN, CONTAMINATED					
	- POSSIBLE INJURY 3 - FRONT - RIGHT SIDE NO ADDADENT INJURY 4 - SECOND - LEFT SIDE		4 - DEPLOYED BOTH FRONT / SIDE 4 - REGULAR CLASS (OHIO = D)					4 - FARM WAIVER 5 - EXCEPT CLASS	A DUE	DIALING)				4_TEST CIVEN RESULTS KNOWN					
	(MOTORCYCLE PASSENGER)		9 - DEPLOYMENT UNKNOWN 5 - M/C MOPED ONLY					6 - EXCEPT CLASS		COMMUNICATION DEVIC				E 5-TEST GIVEN, RESULTS					
	1 - NOTTRANSPORTED 6 - SECOND - RIGHT SIDE		6 - NO VALID OL					& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE:				.D					
	/TREATED AT SCENE 7 - THIRD - LEFT SIDE 2 - EMS (MOTORCYCLE SIDE CAR)		EJECTION OL ENDORSEMEN  1-NOT EJECTED H-HAZMAT					8 - INTERMEDIATE RESTRICTIONS			5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE			1 - NONE					
3 - POLICE	3 - POLICE 8 - THIRD - MIDDLE		2 - PARTIAL			M - MOTORCYCLE		9 - LEARNER'S PER	RMIT	MIT 6 - PASSENGER				2 - BLOOD 3 - URINE					
9 - OTHER / UNK	9 - OTHER / UNKNOWN 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION		3 - TOTALLY EJECTED P - PASSENGER 4 - NOT APPLICABLE N - TANKER					RESTRICTIONS  10 - LIMITED TO DAYLIGHT ONLY			7 - OTHER DISTRACTION INSIDE THE VEHICLE			4 - BREATH					
	SAFETY EQUIPMENT  OF TRUCK CAB			Q - MOTOR SCOOTER 1:					11 - LIMITED TO EMPLOYMENT			DISTRACTION HICLE	OUTSIDE	5 - OTHER					
1 - NONE USED 2 - SHOULDER E	2 - SHOULDER BELT ONLY USED  ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,			TRAPPED  R - THREE-WHEEL MOTORCYCLE  1 - NOT TRAPPED  S - SCHOOL BUS					12 - LIMITED – OTHER 13 - MECHANICAL DEVICES			UNKNOWN		DRUG TEST TYPE 1 - NONE					
	3 - LAP BELT ONLY USED PICK-UP WITH CAP) 4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED		2 - EXTRICATED BY MECHANICAL MEANS T - DOUBLE & TRIPLE TRA				TRAILERS	(SPECIAL BRAK CONTROLS, OR O	CONDITION				2 - BL00D						
5 - CHILD REST	5 - CHILD RESTRAINT SYSTEM - CARGO A		3 - FREED BY NON-MECHANICAL MEANS			X - TANKER / HAZMAT	ADAPTIVE DEVICES)  14 - MILITARY VEHICLES ONLY			1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT			3 - URINE 4 - OTHER						
FORWARD FA 6 - CHILD RESTI	ACING RAINT SYSTEM –	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR					15 - MOTOR VEHICLE	15 - MOTOR VEHICLES WITHOUT AIR BRAKES		E THIOTORE INITIALITY			o,						
REAR FACIN	REAR FACING (NON-TRAIL						16 - OUTSIDE MIRRO	ıR	4-	ANGRY, DIS			DRUG TEST RESULT(S)  1-AMPHETAMINES						
	7 - BOOSTER SEAT 15 - NON-MOTORIST 8 - HELMET USED 99 - OTHER / UNKNOWN							17 - PROSTHETIC AID 18 - OTHER			5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			2 - BARBITURATES					
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)							10-UINEK			6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS			3 - BENZODIAZEPINES 4 - CANNABINOIDS					
10 - REFLECTIVE	10 - REFLECTIVE CLOTHING										/ALCOHOL 9- OTHER / UNKNOWN			5 - COCAINE 6 - OPIATES / OPIOIDS					
	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY									9-	OTHER/U	UNKNOWN		6 - 0PI 7 - 0TH		19			
99 - OTHER / UNKNOWN														8 - NEGATIVE RESULTS					