OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION		FIC C			<b>RT</b> NFORMATI		MANDATORY	FIELD FO	OR SUPPI	LEMEN	IT REPOR		2 0 2		LOCAL RE		0 3	083		
M PHOTOS TAKEN  OH-1P  OH-1P											CIC*	,	HIT/SKIP   NUMBER OF UNITS   UNIT IN ER							
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP*  4.5 1 2 - VILLAGE 3 - TOWNSHIP  HEATH											OAD TVD		CRAS	H DATE /	тіме* 165		1- 2-	SH SEVERITY FATAL SERIOUS INJURY		
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 WEST HEBRON										- 1	ROAD TYP				8 2	108190	3 -	SUSPECTED MINOR INJURY		
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH REFERENCE ROAD NAME (ROAD, MILEPOST, HO									#)		ROAD TYP				DECIMAL DEGI			SUSPECTED INJURY POSSIBLE		
2-SOUTH 3-EAST 4-WEST 4-WEST										L		┟	- 8 4 2 8 6 7 5- PROPERTY DAMAG							
REFERENCE POIN  1 - INTERSECT  2 - MILE POST  3 - HOUSE #	POINT RSECTION POST SE #  DIRECTION FROW REFERENCE 1 - NORTH US - FEDERAL US ROUTE SR - STATE ROUTE SR - STATE ROUTE  ROUTE TYPE IR - INTERSTATE ROUTE SR - STATE ROUTE BL - BOULEVARD CR - CIRCLE SR - STATE ROUTE  CR									SQ r ST	- ROAD - SQUARE - STREET - TERRAC		INTERSECTION RELATED  WITHIN INTERSECTION OR ON APPROACH  WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
FROM REFERENCE	FROM REFERENCE UNIT OF MEASURE 1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE PI - P										- TRAIL - WAY	ROADWAY  ROADWAY DIVIDED								
LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY/ALLEY ACCESS 3 - IN MEDIAN 11 - RAILWAY GRADE CROSSING 4 - ON ROADSIDE 12 - SHARED USE PATHS OR 5 - ON GORE TRAILS  MANNER OF CRASH 1 - NOT COLLISION 4 BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 7 2 - REAR-END E								5 - BAC 6 - ANC 7 - SID 8 - SID	AR-TO-RE CKING	AR SAME D	IRECTION TE DIRECTIO	L	1 · 2 · 3 ·	OF TRAVE NORTH SOUTH EAST WEST	EL L	MEDIAN TYPE  1 · DIVIDED FLUSH MEDIAN ( < 4 FEET )  2 · DIVIDED FLUSH MEDIAN ( ≥ 4 FEET )  3 · DIVIDED, DEPRESSED MEDIAN 4 · DIVIDED, RAISED MEDIAN (ANY TYPE)  9 · OTHER/UNKNOWN				
WORKERS PRESENT  LAW ENFORCEMENT PRESENT  LAW ENFORCEMENT PRESENT  2 - LANE SHIFT/CROSSOVER  3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK  4 - INTERMITTENT OR MOVING WORK								1 - BEFO WAR 2 - ADVA 3 - TRAN 4 - ACTI	CRASH INDRE THE INTING SIGNANCE WAR INSITION A VITY ARE	IST WO GN RNING AREA EA	ORK ZONE AREA	1 - 2 - 3 -	CONTOUR  3  1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE			<b>1</b>	NS	SURFACE  2 1-CONCRETE 2-BLACKTOP, BITUMINOUS, ASPHALT 3-BRICK/BLOCK		
LIGHT CONDITION  1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN								RE CROS /ING SAN ZING RA	ID, SOIL, I IN OR FRI				9 - OTHER/UNKNOWN			), MUD, D GRAVEL ER (STAN ING) SH ER/UNKN	DING,	4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER/UNKNOWN		
NARRATIVE BOTH UNIT	S WE	RE ON	PRIV	ATE P	ROPE	RTY				1		1.1						Indicate the north direction with an "N" on the compass diagram.		
UNIT 2 WA	SINT	THE RI	GHT L	ANE.				-			Evalu		Evaluation E	valuation Edition		-		·		
UNIT 1 WA	S BEH	IIND U	NIT 2						Evaluation Edition	Evaluation	on Edition Unit 2					t To Scal	uation Edition			
UNIT 1 STRUCK UNIT 2 IN THE REAR.										Evaluation Edition  Evaluation Edition										
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0 3 2 0 2 0 2							032				0.5			202		™E 7 1 6	N/I	POLICE AGENCY		
TOTAL TIME ROADWAY CLOSED INVESTIGATION TIME TOTAL MINUTES SCHUMACHER											KED BY OF	FICER	R'S NAMI	*				MOTORIST SUPPLEMENT		
er van demokreterakskomine – (1990-1990-1994) (1999)	OFFICER'S BADGE NUMBER									Η.	Снеске		FFICER'		NUMBER			(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)		
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OHIO DEI OF PUBLI SAFETY - SERVI	OHO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST										3 -	LOCAL RE				3			
UNIT #										D	DATE	OF BIRTH		Ī	AGE	GENDER			
0 1	KEENE, DONALD EUGENE								0 4	<sub>_</sub> / <sub>_</sub> 3	0	<b>/ 1</b>	9 6	4 .	5 8	M			
2	ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE																		
₽		AVE NEWARK, OH 43		<b>U</b> (				U											
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDT	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) USED USED 0 .4					F-COMPLIA HELME	ANT	ATING POSITI	1	AG USAGE	EJECTION 1	TRAPPED 1			
OL STATE		ICENSE NUMBER		OFFENS	OFFENSE CHARGED LOCAL (				RIPTION		LMET 0 1			CITATION NUMBER					
ОН	OT ENATOR E				CODE								0117	OTTATION NOMBER					
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	/ER ALCOHOL / DRUG SUSPECTED				CONDITION			COHOL TEST			DRUG TEST STATUS   TYPE   RES						
	SELECT UP TO 2		TRACTED ALCOHOL MARIJUA			RIJUANA		STATUS			VALUE	STATUS		E RESUL	SELECT UP TO 4				
4			1 OTHER DRUG				1	1	1	• ∟		_1	1		 L				
UNIT #	NAME: LAST, F		v						0 ,5			OF BIRTH	9 6	2	AGE 5 .9 .	GENDER M			
- 12222	: STREET, CITY, ST	O, WILLIAM ANTHON	T						O   5   /   1   7   /   1   9   6   3     5   9     M										
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INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUI						SE	ATING POSITI	ON AIR B	N AIR BAG USAGE EJECTION TRAPPED						
5	TAKEN BY							USED O 4		HELME	DMPLIANT O 1			1		1			
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010														1	<u> </u>				
MON-MON-MON-MON-MON-MON-MON-MON-MON-MON-	INJURED EMS AGENCY (NAME) TAKEN BY			INJUREDT	TAKEN TO	MEDICAL FACILITY	SAFETY EQUIPMENT USED	D <sub>MC</sub>	T-COMPLIA	ANT	ATING POSITI	ON AIR B	AG USAGE	EJECTION	TRAPPED				
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OL STATE		FERATUR LICENSE NUMBER				CODE					· · · · · · · · · · · · · · · · · · ·								
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		RIVER ALCOHOL / DRUG SU			ECTED	CONDITION	STATUS		COHOL TEST				JG TEST(S) PE RESULT SELECT UP TO 4				
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TNJI	JRIES	SEATING POSITION		IR BAG	☐ 0 <sup>-</sup>	THER DRUG OL CLAS	\$	OL RESTRIC	TION(S)		PTVE	R DISTRAC	CTION		TEST STA	TIIS			
1 - FATAL	, 1120	1 - FRONT - LEFT SIDE	1 - NOT DEP			1 - CLASS A	_	1 - ALCOHOL INTER		CONTRACTOR DESCRIPTION	2000000000	STRACTED			NE GIVEN				
	D SERIOUS INJURY (MOTORCYCLE DRIVER)  D MINOR INJURY 2 - FRONT - MIDDLE		2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C			2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES			ALLY OPERATI RONIC COMMU			ST REFUSED ST GIVEN, CON	ITAMINATED			
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE	ED BOTH FRO	NT / SIDE	4 - REGULAR CLASS	4 - FARM WAIVER		DEVICE (TEXTING, TYP DIALING)			YPING,	ING, SAMPLE / UNUSABLE							
5 - NO APPAREN	NT INJURY	4 - SECOND – LEFT SIDE (MOTORCYCLE PASSENGER)	LICABLE MENT UNKNO	WW.	(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A			IG ON HANDS- JNICATION DE		E 5 - TEST GIVEN, RESULTS							
	1-NOTTRANSPORTED 5-SECOND - MIDDLE 6-SECOND - RIGHT SIDE			6 - NO VALID OL &						4 - TALKING ON HAND-HELD RAILER COMMUNICATION DEVIC				NE CONTRACTOR OF THE CONTRACTO					
/TREATED A	/TREATED AT SCENE 7-THIRD - LEFT SIDE			ECTION		7 - EXCEPT TRACTO 8 - INTERMEDIATE	LICENSE 5 - OTHER ACTIVIT			ACTIVITY WIT	WITH AN ALCOHOL T			ST TYPE					
2 - EMS 3 - POLICE	O TUIDD MIDDLE		1 - NOT EJECTED H - HAZMAT 2 - PARTIALLY EJECTED M - MOTORCYCLE					RESTRICTIONS 9 - LEARNER'S PER	( 2100=1			RONIC DEVICE NGER		2 - BL00D					
	9 - OTHER / UNKNOWN 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION		3 - TOTALLY EJECTED P - PASSENGER					RESTRICTIONS  10 - LIMITED TO DAY		7 - OTHER DISTRACTION				3 - URINE 4 - BREATH					
SAFETY E	SAFETY EQUIPMENT OF TRUCK CAB			LICABLE		11 - LIMITED TO EMP	8 - OTHER DISTRACTION OUTSIL												
1 - NONE USED	ENCLOSED CARGO AREA			RAPPED		12 - LIMITED - OTHE 13 - MECHANICAL DE	THE VEHICLE 9 - OTHER / UNKNOWN				DRUG TEST TYPE								
	3 - LAP BELT ONLY USED PICK-UP WITH CAP)		1 - NOTTRAPPED S - SCHOOL BUS 2 - EXTRICATED BY T - DOUBLE & TRIPLETRAILERS					(SPECIAL BRAKI	ES, HAND	CONDITION				1 - NONE 2 - BLOOD					
	& LAP BELT USED RAINT SYSTEM –	12 - PASSENGER IN UNENCLOSED CARGO AREA	ICAL MEANS Y		X - TANKER / HAZMAT	ADAPTIVE DEVI		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT				3 - URINE							
FORWARD FA	ACING	13 - TRAILING UNIT	CHANICAL MI	EANS			14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT			AL IMPAIRME DNAL (E.G., DEP		4 - OTHER							
6 - CHILD RESTI REAR FACIN	RAINT SYSTEM – G	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)					AIR BRAKES  16 - OUTSIDE MIRRO	AIR BRAKES  16 - OUTSIDE MIRROR			ISTURBED)		DRUG TEST RESULT(S)  1-AMPHETAMINES						
7 - BOOSTER SE		15 - NON-MOTORIST 99 - OTHER / UNKNOWN		17 - PROSTHETIC AID	7 - PROSTHETIC AID			SLEEP, FAINTE	ED,	2 - BARBITURATES									
9 - PROTECTIVE	9 - PROTECTIVE PADS USED							18 - OTHER	FATIGUED, ETC. 6- UNDER THE INFL			THE INFLUEN							
	(ELBOW, KNEES, ETC.) 0 - REFLECTIVE CLOTHING									OF MEDICATIONS / DRUGS / ALCOHOL				4 - CANNABINOIDS 5 - COCAINE					
11 - LIGHTING - I	11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY									9-	OTHER	UNKNOWN 6 - OPIATES / OPIOIDS 7 - OTHER							
99 - OTHER / UNK															8 - NEGATIVE RESULTS				