| FPUBLIC SAFETY TRAFFIC CRASH | KEPORT *DENOTES MA LOCAL INFORMATION | NDATORY FIELD FOR SUPPLEME | ENT REPORT | 2023- | OCAL REPORT NUMBER | | | | | |
|--|--|--|--|--|---------------------------------------|---|--|--|--|--|
| PHOTOS TAKEN ON-2 ON-3 | REPORTING AGENCY NAME* | | HIT/SKIP NUMBER OF UNITS UNIT IN ERROR | | | | | | | |
| SECONDARY CRASH PRIVATE PROPERTY | Heath PD | 0 4 | NCIC* | 2 1 - SOLVED 2 - UNSOLVED | 020 | 1 98 - ANIMAL 99 - UNKNOWN | | | | |
| COUNTY* LOCALITY* 1 - CITY 4 5 1 2 - VILLAGE HEATH | | CRASH DATE / TIME* CRASH SEVERITY | | | | | | | | |
| 3-TOWNSHIP | 03262023 1302 5 2 - SERIOUS INJURY SUSPECTED | | | | | | | | | |
| S R 79 2-SOUTH 3-EAST | ROAD TYPE | 40 0 2 4 9 5 9 3-MINOR INJURY | | | | | | | | |
| — — — — — — — — — — — — — — — — — — — | REFERENCE ROAD NAME (ROAD, | MILEPOST, HOUSE #) | ROAD TYPE | LONGITUDE DE | | SUSPECTED INJURY POSSIBLE | | | | |
| ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | 1008 | | 1 F F | - 8, 44 | | PROPERTY DAMAGE ONLY | | | | |
| REFERENCE POINT DIRECTION FROM REFERENCE | ROUTE TYPE | ROAD TYPE | <u> </u> | | NTERSECTION RELATED | | | | | |
| 3 2-MILE POST 2-SOUTH US | | - ALLEY HW-HIGHWAY R - AVENUE LA - LANE S | WITHIN INTERSECTION OR ON APPROACH | | | | | | | |
| 3- HOUSE # 3- EAST | STATE ROUTE BL | | 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 | | | | | | |
| 2-FEET 1 13-YARDS | /A - WAY | ROADWAY DIVIDED | | | | | | | | |
| LOCATION OF FIRST HARMFUL EVEN | | NER OF CRASH COLLISION/IMPA | СТ | DIRECTION OF TRAVEL | . MEDIAN | ТҮРЕ | | | | |
| 1 - ON ROADWAY 9 - CROSSOVER 0 6 2 - ON SHOULDER 10 - DRIVEWAY | ALLEY ACCESS BETV | COLLISION 4-REAR-TO-REAR WEEN 5-BACKING | | 1 - NORTH | | 1 - DIVIDED FLUSH MEDIAN (<4 FEET) | | | | |
| | RADE CROSSING VEH | MOTOR ICLES IN 6-ANGLE VSPORT 7-SIDESWIPE, SAME | DIRECTION | 3 - EAST 2 - DIVIDED FLUSH MEDIAN | | | | | | |
| 5 - ON GORE TRAILS | 2 - REAF | R-END 8-SIDESWIPE, OPPO | SITE DIRECTION | 4 - WEST 3 - DIVIDED, DEPRESSED MED 4 - DIVIDED, RAISED MEDIAN | | | | | | |
| 7 - ON RAMP 14-TOLL BOOT | Н | J-UN 9-UTHER/UNKNUW | Ø IN | | (ANY TYPE) 9 - OTHER/UNKNOWN | | | | | |
| | WORK ZONE TYPE | LOCATION OF CRASH IN WO | DK 70NE | CONTOUR | CONDITIONS | SURFACE | | | | |
| | LANE CLOSURE | 1 - BEFORE THE 1ST V WARNING SIGN | | 1 | 9 | 2 | | | | |
| | LANE SHIFT/CROSSOVER WORK ON SHOULDER | 2 - ADVANCE WARNIN | ACCESSION OF THE PERSON OF THE | 1 - STRAIGHT LEVEL | 1 - DRY | 1 - CONCRETE | | | | |
| 4- | OR MEDIAN INTERMITTENT OR MOVING WORK | 3 - TRANSITION AREA 4 - ACTIVITY AREA | c | 2 - STRAIGHT GRADE 3 - CURVE LEVEL | 2 - BLACKTOP, BITUMINOUS, | | | | | |
| ACTIVE SCHOOL ZONE 5- | OTHER | 5 - TERMINATION ARE | Ā | 3 - CURVE LEVEL 4 - CURVE GRADE | ASPHALT 3 - BRICK/BLOCK | | | | | |
| LIGHT CONDITION 1 - Daylight | 1 - CLEAR | ER 6 - SNOW | | 9 - OTHER/UNKNOWN | 5 - SAND, MUD, DIRT, OIL, GRAVEL | 4 - SLAG, GRAVEL, STONE | | | | |
| 9 2 - DAWN/DUSK | 99 2 - CLOUDY | 7 - SEVERE CROSSWINDS | | 5 - DIRT | | | | | | |
| 3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED | 4 - RAIN | 8 - BLOWING SAND, SOIL, DIRT, 9 - FREEZING RAIN OR FREEZI | OR FREEZING DRIZZLE 7 - SLUSH | | | | | | | |
| 5 - DARK — UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN | 5 - SLEET, HAIL | 99 - OTHER / UNKNOWN | | | 9 - OTHER/UNKNOWN | | | | | |
| NARRATIVE | | - i i i | | | | Indicate the north | | | | |
| Parked vehicle reportedly st | | Les II | | | | direction with an "N" on the compass diagram. | | | | |
| The reporting party stated h private property (hotel park | • | | | ScenePD ™ - Evaluation Edition | | | | | | |
| | | | Evaluation ation Edition | Evaluation Edition Edition | | | | | | |
| unknown vehicle. No note was left and no report to the hotel was made. | | | | | | | | | | |
| | | Evaluation Edition | ation Edition | Not To Scale | Evaluation Edition Evaluation Edition | | | | | |
| | | Evalu | Evaluation ation Edition | Evaluation Edition | dition | | | | | |
| | | Evaluation Edition | A _z | Evaluation B | Evaluation Edition Evaluation Edition | | | | | |
| | | Evaluation Edition | Evaluation | Evaluation Edition Edition | 1008 S.R. 79 (Hampton Inn) | | | | | |
| | | | - 3; / | Evaluation E Evaluation Edition | Evaluation Edition Evaluation Edition | - | | | | |
| Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition | | | | | | | | | | |
| | | | Evaluation ation Edition | Evaluation Edition Edition | Evaluation Edition idition | .— | | | | |
| | | Evaluation Edition | | Trancite (877) 908-4777 | 1 1 1 1 1 1 1 1 1 1 | | | | | |
| CRASH REPORTED DATE / TIME | DISPATCH DATE / TIME | ARRIVAL DATE / TIME | 2110 | SCENE CLEARED | | PORT TAKEN BY POLICE AGENCY | | | | |
| | 62023 1303 OFFICER'S NAME* | | | 3262023 cer's name* | | MOTORIST | | | | |
| TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT | mart | | | SUPPLEMENT (CORRECTION OR ADDITION | | | | | | |
| 2 0 2 0 | O OFFICER'S BAI | | O CHECKED 6 | or officer's badge N | UMBER* | TO AN EXISTING REPORT SENT TO ODPS) | | | | |

OHIO DEPARTMENT
OF PUBLIC SAFETY
SAFETY - SERVICE - PROTECTION

| OHIO DEI OF PUBLI SAFETY - SERV | OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MARTY-SERVICE-PROTECTION | | | | | | 2 0 | 2 | 3 - | - O | | | | 7 | | | |
|---------------------------------------|--|--|---|-----------------------------|----------------------------------|--|--------------------------------------|---|---|---------------------|---|-------------------------------|------------------------|----------------------------------|-----------------------------|------------------|--|
| UNIT # 0 1 | | | | | | | | DATE OF BIRTH AGE GEND | | | | | | | | | |
| ADDRESS: | ADDRESS: STREET, CITY, STATE, ZIP | | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | | | |
| 010 | | | | | | | | | | | | | | | | | |
| ADDRESS: | INJURED TAKEN BY | EMS AGENCY (NAME) | INJURED TAKEN TO: | | | USED | | | | T-Comp | LIANT | EATING POSIT | | BAG USAG | E EJECTION | TRAPPED 1 | |
| | | | | OFFENS | | | | OFFENSE DESC | | | | ᆜ└ | CITATION NUMBER | | | | |
| OL STATE | | | | CODE CODE | | | | | | | | | | | | | |
| OL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT | | VER TRACTED | | OHOL / DRUG SUSPI | ECTED RIJUANA | CONDITION | STATUS | | HOL TE | VALUE | STATL | | E RESUL | T SELECT UP TO 4 | |
| | | | | 9 | = | THER DRUG | | 9 | 1 | 1 | _ • _ | | 1 | 1_ | | | |
| UNIT # | NAME: LAST, F | • | | | | | | | | , | | OF BIRTH | | _ | AGE | GENDER | |
| 0 2 | O'ROURK : STREET, CITY, ST | KE, ALAYNA MARIE | | | | | | | 0 2 / 0 7 / 1 9 9 7 2 6 F | | | | | | | | |
| | | ST MINERAL RIDGE, | OH 444 | 140 | | | | | | | | 7 1 | _ | 8 | 1 3 | 7 | |
| INJURIES | INJURED TAKEN | EMS AGENCY (NAME) | | INJURED T | | | | SAFETY EQUIPMENT | T DOT-COMPLIANT SEATING POSITION | | | | TION AIR | N AIR BAG USAGE EJECTION TRAPPED | | | |
| | ВУ | | | | | | | 0 1 | | HELN | /IET | 1 5 | _ _ | | | | |
| OL STATE | UA09602 | ICENSE NUMBER | | OFFENS | SE CHAI | RGED | LOCAL | OFFENSE DESC | RIPTIO | N | | | CI | CITATION NUMBER | | | |
| OL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT | | VER TRACTED | ALC | OHOL / DRUG SUSPI | ECTED | CONDITION | STATUS | | HOL TE | ST VALUE | STATU | | JG TEST(S | T SELECT UP TO 4 | |
| | 355501 07 10 2 | | BY | IRACIED | = | LCOHOL | RIJUANA | | 1 | 1 | | VALUE | 1 | 1 | L NESOL | 1 322201 07 10 4 | |
| UNIT # | NAME: LAST, F | FIRST, MIDDLE | | | Ц, | I HER DRUG | | | | | DATE | OF BIRTH | <u> </u> | | AGE | GENDER | |
| | | | | | | | | | | 1 | | | | | | | |
| ADDRESS: | : STREET, CITY, ST | ATE, ZIP | | | | | | | CONT | ACT PH | IONE - | INCLUDE ARE | A CODE | ' | | • | |
| O THUMBIES | TANINGE | EMC ACENOV (MANE) | | Traumpen | | MEDICAL FACILITY | | CAFETY FAULDMENT | | | | ATING BOOK | TION AVD | | | | |
| ADDRESS: | INJURED TAKEN BY | EMS AGENCY (NAME) | | INJURED | TAKENTO | : MEDICAL FACILITY | (NAME, CITY) | USED | | T-COMP HELIV | LIANT | EATING POSIT | IIUN AIR | BAG USAG | E EJECTION | TRAPPED | |
| OL STATE | OPERATOR L | □ Dr License Number | | OFFENSE CHARGED LOCAL (| | OFFENSE DESC | RIPTIO | N | | | CI | CITATION NUMBER | | | | | |
| <u> </u> | | | | | | | | | | | | | DRUG TEST(S) | | | | |
| OL CLASS | SELECT UP TO 2 | RESTRICTION SELECT | UP TO 3 DRI DIS BY | TRACTED | | OHOL / DRUG SUSPI LCOHOL MAI | ECTED RIJUANA | CONDITION | STATUS | | HOL TE | VALUE | STATU | | | T SELECT UP TO 4 | |
| | | | | | 0 | THER DRUG | | | | | _ •_ | | | | | | |
| 1 - FATAL | JRIES | SEATING POSITION 1-FRONT-LEFT SIDE | 1 - NOT DEF | AIR BAG PLOYED | | OL CLASS 1 - CLASS A | S | OL RESTRIC 1-ALCOHOL INTER | | CONTRACTOR NO. | | R DISTRA ISTRACTED | CTION | | TEST STA | ATUS | |
| 2 - SUSPECTED | D SERIOUS INJURY (MOTORCYCLE DRIVER) 2 - DEPLOYE | | ED FRONT 2 - CLASS B | | | 2 - CDL INTRASTATE ONLY | | | 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION | | | 2 - TEST REFUSED | | | | | |
| 3 - SUSPECTED 4 - POSSIBLE IN | ED MINOR INJURY 2 - FRONT - MIDDLE 3 - DEPLOYED 3 - FRONT - RIGHT SIDE 4 DEPLOYED | | ED SIDE 3 - CLASS C ED BOTH FRONT / SIDE 4 - REGULAR CLASS | | | 3 - CORRECTIVE LE 4 - FARM WAIVER | DEVICE (TEXTING, TYPING, DIALING) | | | | 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE | | | | | | |
| | APPARENT INJURY | | LICABLE (OHIO = D) | | | 5 - EXCEPT CLASS | | 3 - TALKING ON HANDS-FREE | | | 4 - TEST GIVEN, RESULTS KNOWN | | | | | | |
| INJURED | 5 - SECOND MIDDLE 9 - DEPLOYMENT UNKNOWN 5 - WIC MUPED UNLY 6 - EXCEPT CL | | | | | 6 - EXCEPT CLASS . & CLASS B BUS | | | | | | | | | | | |
| 1 - NOT TRANSP /TREATED A | | 6 - SECOND – RIGHT SIDE 7 - THIRD – LEFT SIDE | F | JECTION | | OL ENDORSE | MENT | 7 - EXCEPT TRACTO | | R | COMM | UNICATION D | EVICE | AL | COHOL TE | ST TYPE | |
| 2 - EMS | II JOLINE | (MOTORCYCLE SIDE CAR) | 1 - NOT EJE | | | H - HAZMAT | | 8 - INTERMEDIATE RESTRICTIONS | LICENSE | | | R ACTIVITY W RONIC DEVIC | | 1 - NO | | | |
| 3 - POLICE | 8 - THIRD - MIDDLE 2 - PARTIALLY EJECTE | | | DECEDICATIONS | | | | | | ıN | 2 - BLOOD 3 - URINE | | | | | | |
| 9 - OTHER / UNK | | 10 - SLEEPER SECTION OF TRUCK CAB | 4 - NOT APP | | | N - TANKER | | 10 - LIMITED TO DAY | | LY | INSIDE | ETHE VEHICL | .E | | REATH | | |
| 1 - NONE USED | QUIPMENT | 11 - PASSENGER IN OTHER | ī | RAPPED | | Q - MOTOR SCOOTER | TARCVOLF | 11 - LIMITED TO EM 12 - LIMITED - OTHE | | | THEV | R DISTRACTIO EHICLE | IN OU I STUE | | | | |
| | OULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1-NOT TRAPPED | | | | S - SCHOOL BUS 13 - MECHANICAL D | | | | | 9 - OTHER / UNKNOWN | | | | DRUG TEST TYPE 1-NONE | | | |
| | HOULDER & LAP BELL USED 11 THOUSENESS TO THE STREET | | NTED BY T - DOUBLE & TRIPLE TRAILERS NTED BY T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT | | | (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) | | CONDITION | | | | 2 - BL00D | | | | | |
| | | | 3 - FREED E NON-ME | REED BY ON-MECHANICAL MEANS | | | 14 - MILITARY VEHICLES 0 | | 2 Million Contract Contract | | | | 3 - URINE 4 - OTHER | | | | |
| 6 - CHILD REST | RAINT SYSTEM - | 14 - RIDING ON VEHICLE EXTERIOR | | | | | | 15 - MOTOR VEHICLE AIR BRAKES | ES WITHOU | T g | | IONAL (E.G., DE DISTURBED) | PRESSED, | | | ESULT(S) | |
| 7 - BOOSTER SE | | (NON-TRAILING UNIT) 15 - NON-MOTORIST | | | | | | 16 - OUTSIDE MIRRO | | 1 | 4- ILLNES | | | | MPHETAMINES | | |
| 8 - HELMET US | | 99 - OTHER / UNKNOWN | | | | | | 17 - PROSTHETIC AII 18 - OTHER | D | | | SLEEP, FAINT JED, ETC. | ΓED, | | ARBITURATES ENZODIAZEPIN | IEC | |
| 9 - PROTECTIVE (ELBOW, KN | | | | | | | | | | (| 6- UNDER | THE INFLUE | | | NNABINOIDS | LU | |
| 10 - REFLECTIVE | E CLOTHING | | | | | | | | | | / ALCOH | HOL | | | CAINE | ne | |
| 11 - LIGHTING - I / BICYCLE OF | NLY | | | | | | | | | | 7- UIHER | /UNKNOWN | | 7 - OT | IATES / OPIOI HER | 93 | |
| 99 - OTHER / UNK | KNOWN | | | | | | | | | | | | | 8 - NE | GATIVE RESU | LTS | |