OF PUBLIC SAFETY TRAFFIC CRASH	KEPORT *DENOTES MA LOCAL INFORMATION	NDATORY FIELD FOR SUPPLEME	ENT REPORT	2023-	O O O O O 3	* 4 1 6						
PHOTOS TAKEN OH-1P OTHER	REPORTING AGENCY NAME*		HIT/SKIP NUMBER OF UNITS UNIT IN ERROR									
SECONDARY CRASH PRIVATE PROPERTY	Heath PD		NCIC*   <b>507</b>	2 1-SOLVED 0 2 0 1 98-ANIMAL 99-UNKNOWN								
COUNTY* LOCALITY* 1 - CITY 4 5 1 2 - VILLAGE HFATH	CRASH DATE / TIME * CRASH SEVERITY											
3-TOWNSHIP	03272023, 2158 3 2-SERIOUS INJURY											
ROUTE TYPE ROUTE NUMBER PREFIX 1- NORTH 2 - SOUTH 3 - EAST 4 WEST	3 MINOPINILIPY											
	SWAINFORD REFERENCE ROAD NAME (ROAD, I	MII EDOST HOUSE #1	D R ROAD TYPE	LONGITUDE		SUSPECTED INJURY POSSIBLE						
2 - SOUTH 3 - EAST	50 SWAINFORD	mile of the open and the open a	NOAD TITLE			PROPERTY DAMAGE						
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE			INTERSECTION RELATED							
2 MILE DOST 2 COUTH		- ALLEY HW- HIGHWAY R - AVENUE LA - LANE SI	WITHIN INTERSECTION OR ON APPROACH									
3- HOUSE # 3- EAST	STATE ROUTE BL	- BOULEVARD MP - MILEPOST S	Q - SQUARE T - STREET	WITHIN INTE	RCHANGE AREA NUM	EA NUMBER OF APPROACHES						
DISTANCE DISTANCE CR -	NUMBERED COUNTY ROUTE I		E - TERRACE L - TRAIL	ROADWAY								
1-MILES TR- 2 2-FEET 2 3-VARDS	/A - WAY	ROADWAY DIVIDED										
LOCATION OF FIRST HARMFUL EVEN		- HEIGHTS PL - PLACE  NER OF CRASH COLLISION/IMPAGE	e <b>T</b>	DIRECTION OF TRAVE	L MEDIAN	LTVDE						
1 - ON ROADWAY 9 - CROSSOVER	1-NOT	COLLISION 4 - REAR-TO-REAR	•	1 - NORTH	1 - DIVIDED F	LUSH MEDIAN						
	DADE OROSCINIC TWO	MOTOR 5-BACKING MOTOR 6-ANGLE		2 - SOUTH 3 - EAST		LUSH MEDIAN						
4 - ON ROADSIDE 12 - SHARED US 5 - ON GORE TRAILS	SE PATHS OR TRAM	NSPORT 7 - SIDESWIPE, SAME R-END 8 - SIDESWIPE, 0PP0		4 - WEST (≥4 FEET) 3 - DIVIDED, DEPRESSED M								
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE 7 - ON RAMP 14 - TOLL BOOT	3 - HEAD		1	4 - DIVIDED, RAISED MEDIA (ANY TYPE)								
8 - OFF RAMP 99-OTHER/UN	· · · · · · · · · · · · · · · · · · ·				9 - OTHER/UN	KNOWN						
☐ WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WO		CONTOUR	CONDITIONS	SURFACE						
	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST V WARNING SIGN		1	1	2						
LAW ENFORCEMENT PRESENT	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNIN  3 - TRANSITION AREA	ACCESSION OF THE PERSON OF THE	1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,						
l — I	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AREA 5 - TERMINATION ARE	ĒΑ	3 - CURVE LEVEL	3 - SNOW	RITHMINOUS						
LIGHT CONDITION	WEATHE	R		4 - CURVE GRADE 4 - ICE 3 - 9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, 4 - 1								
1 - DAYLIGHT	1 - CLEAR	6 - SNOW		9 - OTTIEN ON KNOWN	OIL, GRAVEL	4 - SLAG, GRAVEL, STONE						
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG, SMOG, SMOKE	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT,	.ND, SOIL, DIRT, SNOW MOVING)									
4 - DARK — ROADWAY NOT LIGHTED 5 - DARK — UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FREEZI 99 - OTHER / UNKNOWN	NG DRIZZLE		7 - SLUSH 9 - OTHER/UNKNOWN	9 - OTHER/UNKNOWN						
9-OTHER/UNKNOWN					y contended to							
NARRATIVE UNIT 2 WAS PARKED ON SW	ATNEODD DDTVE I	INIT 4 - 1 1 1 1 1	į į	1. 1 1 1	A	Indicate the north direction with						
STRUCK THE DRIVER SIDE T						Tan "N" on the compass diagram.						
UNIT 2. UNIT 1 LEFT BEHING			Evaluation	ScenePD ™ - Evaluation Edition  Evaluation Edition		-						
SIDE MIRROR. UNIT 1 UNKN	IOWN AT THIS TIM	Evaluation Edition	ation Edition	Edition	Evaluation Edition	=						
		Evalu	Evaluation Edition  Evaluation Edition  Evaluation Edition  Evaluation Edition									
		Evaluation Edition										
			Evaluation Edition  Evaluation Edition  Evaluation Edition  Evaluation Edition  Evaluation Edition									
			Unit 2	Evaluation Edition	Evaluation Edition Evaluation Edition							
Evaluation Edition  Evaluation Edition  Unit 1  Evaluation Edition												
SWAINFORD DR Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition												
		Evaluation Edition	ation Edition		Evaluation Edition							
			Evaluation ation Edition	Evaluation Edition Edition	Edition							
		Evaluation Edition		Trancite (877) 908-4777								
CRASH REPORTED DATE / TIME  0,3,2,7,2,0,2,3,	DISPATCH DATE / TIME	ARRIVAL DATE / TIME 0 3 2 7 2 0 2 3 2	2060	3 2 7 2 0 2 3	Andrews Strategical Co.	POLICE AGENCY						
TOTAL TIME OTHER TOTAL				CER'S NAME*		MOTORIST						
ROADWAY CLOSED INVESTIGATION TIME MINUT			unt			SUPPLEMENT (CORRECTION OR ADDITION						
	O 7 -		O 7	officer's badge n	O O	TO AN EXISTING REPORT SENT TO ODPS)						

OHIO DEPARTMENT
OF PUBLIC SAFETY
SAFETY - SERVICE - PROTECTION

■ FIRST HARMFUL EVENT

■ MOST HARMFUL EVENT

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OHIO DEI OF PUBLI SAFETY - SERV	OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST / NON-MOTORIST					2 0	2	3 -	OCAL REI	O O	_	<b>4 1</b>	6					
UNIT # <b>0 1</b>	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GET							GENDER				
ADDRESS:	S: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE									
ОН												I						
INJURIES	INJURED EMS AGENCY (NAME) TAKEN			INJUREDT	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT					USAGE	EJECTION	TRAPPED			
5 OL STATE	BY COPERATOR LICENSE NUMBER			OFFENS	SE CHAE	RGEN	LOCAL	L L	9 9 NSE DESC	MC HELMET 0 1				الـ	6 1 1			
ADDRESS:  OH  INJURIES  OL STATE	TE OPERATOR LICENSE NUMBER				OFFENSE CHARGED LOCAL OFFE			0112										
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER Tracted	_	DHOL / DRUG SUSPI LCOHOL   MAI	ECTED RIJUANA	CON	DITION	STATUS	TYPE			STATUS	TYPE	RESULT	SELECT UP TO 4	
				9		THER DRUG		9	) 	_1	1	•		1	1		لــالــالــ	
UNIT #	NAME: LAST, F							,					BIRTH			AGE	GENDER	
0 2	WOLFE, J	IOSHUA ISAAC								0 6 / 1 3 / 1 9 8 8 3 4 M								
3241 R		D HEATH, OH 43056								CONTACT PHONE - INCLUDE AREA CODE  7 .4 .0 .7 .5 .5 .9 .7 .0 .6								
<u> </u>	ES INJURED EMS AGENCY (NAME)			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  SAFETY EQUIPME USED			EQUIPMENT					N AIR BAG USAGE EJECTION TRAPPED						
OL STATE		OPERATOR LICENSE NUMBER		OFFENS	OFFENSE CHARCED LOCAL			OFFF.	NSE DESC						TATION NUMBER			
O H	O. ERATOR E.	IK LIVENSE MUMBEK			OFFENSE CHARGED LOCAL O CODE			3, FE	OFFENSE DESCRIPTION			'			CITATION NUMBER			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIST	VER Tracted		DHOL / DRUG SUSPI	ECTED Rijuana	CON	DITION	STATUS	ALCOH TYPE			STATUS	DRUG Type	TEST(S) RESULT	SELECT UP TO 4	
4			BY 		=	THER DRUG	KIJUANA			1	1			_1	1			
UNIT#	* NAME: LAST, FIRST, MIDDLE										DATE OI	BIRTH			AGE	GENDER		
ADDRESS:	STREET, CITY, ST.	ATE, ZIP								CONTA	CT PHO	NE - INC	CLUDE AREA (	CODE				
ADDRESS:		EMS AGENCY (NAME)		INJUREDT	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)		EQUIPMENT		r Causer	SEA	TING POSITIO	N AIR BAG	USAGE	EJECTION	TRAPPED	
	TAKEN BY					USED	NCE DECC	Шмс	DOT-COMPLIANT MC HELMET									
OL STATE	UPERATUR L	ICENSE NUMBER	OFFENSE CHARGED LOCAL CODE			UFFE	NSE DESU	CRIPTION				CITAL	CITATION NUMBER					
OL CLASS	ENDORSEMENT SELECT UP TO 2			VER TRACTED	ALCO	DHOL / DRUG SUSPECTED CO		CON	CONDITION		ALCOHOL TEST STATUS   TYPE   VALUE   S			STATUS	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4			
	ļ		ВУ		=	LCOHOL MAI THER DRUG	RIJUANA			ļ								
INJU	IRIES	SEATING POSITION	A	IR BAG		OL CLAS	s	OL	RESTRIC	TION(S)	D	RIVER	DISTRAC	TION	TE	ST STA	TUS	
1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT - LEFT SIDE 1 - NOT DEP (MOTORCYCLE DRIVER) 2 DEPLOYE		LOYED 1 - CLASS A ED FRONT 2 - CLASS B			1 - ALCOHOL INTERLOCK DEVICE 2 - CDL INTRASTATE ONLY				1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN			1 - NONE GIVEN 2 - TEST REFUSED				
3 - SUSPECTED	MINOR INJURY	JRY 2 - FRONT - MIDDLE 3 - DEPLOYE		ED SIDE 3 - CLASS C			3 - CORRECTIVE LENSES				ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING,							
4 - POSSIBLE IN 5 - NO APPAREN		4 - SECOND - LEFT SIDE	4 - DEPLOYE 5 - NOT APP				4 - FARM WAIVER 5 - EXCEPT CLASS A BUS			3-	DIALING) 3 - TALKING ON HANDS-FREE			4 - TEST GIVEN, RESULTS KNOWN				
INJURED	(MOTORCYCLE PASSENGER)  7 - SECOND – MIDDLE  7 - SECOND – MIDDLE						6 - EXCEPT CLASS A & CLASS B BUS			COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD			5 - TEST GIVEN, RESULTS UNKNOWN					
1 - NOT TRANSP /TREATED A			7 - EXCEPT TR.    IECTION   OL ENDORSEMENT   8 - INTERMED.					TOR-TRAILER COMMUNICATIO				ALCOHOL TEST TYPE						
2 - EMS	(MOTORCYCLE SIDE CAR) 1 - NOT EJE		CTED H - HAZMAT			RESTRICTIONS				ELECTRONIC DEVICE  6 - PASSENGER			1 - NONE 2 - BLOOD					
3 - POLICE 9 - OTHER / UNK	JNKNOWN 9-THIRD-RIGHT SIDE 3-TOTALLY					9 - LEARNER'S PERMIT RESTRICTIONS			7 -	7 - OTHER DISTRACTION INSIDE THE VEHICLE			3 - URINE					
SAFETY E	10 - SLEEPER SECTION 4 - NOT APPLICATION OF TRUCK CAB 4 - NOT APPLICATION OF TRUCK CAB		LICABLE	ICADLE IN-TANKER			10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT			8 - OTHER DISTRACTION OUTSIDE			4 - BREATH 5 - OTHER					
1 - NONE USED 2 - SHOULDER F	SED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, 1 - NOT TRAPPED		RAPPED PPED	R-THREE-WHEEL MOTORCYCLE 12 - LIMITED -			LIMITED – OTHER  MECHANICAL DEVICES			THE VEHICLE 9 - OTHER / UNKNOWN			DRUG TEST TYPE					
3 - LAP BELT ON	BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA		3 - 30HUUL DU3			(SPECIAL BRAKES, HAND CONTROLS, OR OTHER				CONDITION				1 - NONE 2 - BLOOD				
5 - CHILD REST	5 - CHILD RESTRAINT SYSTEM - CARGO AREA		3 - FREED BY NON-MECHANICAL MEANS			X - TANKER / HAZMAT	T ADAPTIVE DEV 14 - MILITARY VEHI						ARENTLY NORMAL SICAL IMPAIRMENT		3 - URINE 4 - OTHER			
6 - CHILD REST	FORWARD FACING 13 - TRAILING UNIT  - CHILD RESTRAINT SYSTEM 14 - RIDING ON VEHICLE EXTERIOR (NON TOALLING UNIT)							TOR VEHICLE BRAKES	S WITHOUT	S WITHOUT 3 - EMOTIONAL (E.G., DEP ANGRY, DISTURBED)		IAL (E.G., DEPR	ESSED,					
	REAR FACING (NON-TRAILING UNIT) 7 - BOOSTER SEAT 15 - NON-MOTORIST					16 - OUTSIDE MIRROR			4- ILLNESS				1 - AMPHETAMINES					
8 - HELMET US	3 - HELMET USED 99 - OTHER / UNKNOWN						17 - PROSTHETIC AID 18 - OTHER				5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.				ITURATES ODIAZEPINI	ES		
(ELBOW, KN	- PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)											6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS /ALCOHOL			4 - CANNABINOIDS 5 - COCAINE			
10 - REFLECTIVE	PEDESTRIAN												JNKNOWN		6 - OPIAT	ES / OPIOID	S	
/ BICYCLE OF 99 - OTHER / UNK																7 - OTHER 8 - NEGATIVE RESULTS		