OHIO DEPARTMENT T	RAFFIC CI	L	OCAL REPORT N	UMBER*												
OH-2 OH-3 LOCAL INFORMATION									0 0 0	04092						
PHOTOS TAKEN OH-1P OTHER REPORTING AGENCY PRIVATE PROPERTY Heath PD						0	NCIC* 4 5 0 7	HIT/SKIP								
COUNTY* LOCALITY*	/ILLAGE,TOWNSHI					CRASH DATE / T		CRASH SEVERITY								
4 5 1 1 2.	EATH		04122023	l _	1 - FATAL											
E ROUTE TYPE ROUTE NU	OCATION ROAD	NAME			ROAD TYPE	LATITUDE DEC		2 - SERIOUS INJURY SUSPECTED								
2-SOUTH 2-SOUTH 3-EAST 3-EAST Parkview							D R	40,038	3 - MINOR INJURY SUSPECTED							
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH REFERENCE ROAD NAI					, MILEPOST, H	OUSE #)	ROAD TYPE	LONGITUDE DE	4 - INJURY POSSIBLE							
2 - SOUTH   2 - SOUTH   4 - WEST   HEBRON							R D	- 8 42	981	5 - PROPERTY DAMAGE ONLY						
REFERENCE POINT	DIRECTION	- WEST	ROUTE TYPI	Ē		ROAD TYPE		]	NTERSECTION R							
1 - INTERSECTION 2 - MILE POST	- O MUE DOOT							WITHIN INTER	RSECTION OR ON A	APPROACH						
3 - HOUSE #									_							
DISTANCE DISTANCE CR - NUMBERED COUNTY ROUTE CR - CIRCLE OV - OVAL									ROADWA	Y						
LONG THE CONTRACTOR OF THE CON	1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE PI - PIKE WA - WAY								ROADWAY DIVIDED							
5 8	3-YARD	os			E - HEIGHTS	PL - PLACE			1							
LOCATION 1 - ON ROADWA	N OF FIRST HARM AY 9 - C	FUL EVENT ROSSOVER				<b>H COLLISION/IMP</b> 4 - REAR-TO-REAR	ACT	DIRECTION OF TRAVEL		MEDIAN TYPE						
0 1 2-0N SHOULD	ER 10-0	DRIVEWAY/AL	LEY ACCESS	2 BET	TWEEN O MOTOR	5 - BACKING 5 - ANGLE		2-SOUTH	( <	1 - DIVIDED FLUSH MEDIAN ( < 4 FEET )						
171 2014 3014 3014 301	3 - IN MEDIAN 11-RAILWAY GRADE CROSSING VEHICLES IN 4 - ON ROADSIDE 12-SHARED USE PATHS OR TRANSPORT							3 - EAST 4 - WEST	(≥	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)						
5 - ON GORE 6 - OUTSIDE TR	10.5	TRAILS BIKE LANE		2 - REA 3 - HEA		3 - SIDESWIPE, 0PI 9 - OTHER / UNKNO			1	- DIVIDED, DEPRESSED MEDIAN - DIVIDED, RAISED MEDIAN						
7 - ON RAMP	14-7	TOLL BOOTH OTHER/UNKI	NOWN							NY TYPE) HER/UNKNOWN						
8 - OFF RAMP				DF	LOCATIO	IN OF CRASH IN W	ODY ZONE	CONTOUR	CONDITION	NS SURFACE						
WORK ZONE RELA			<b>WORK ZONE TY!</b> ANE CLOSURE	rE.	15 DEDITO DE 1000 - 100	- BEFORE THE 1ST		1	1	2						
WORKERS PRESEN	NT.		ANE SHIFT/CROS ORK ON SHOULD		2	WARNING SIGN - ADVANCE WARNI	NG AREA		1 - DRY	1 - CONCRETE						
LAW ENFORCEMEN	NT PRESENT L	OR	MEDIAN			- TRANSITION ARE	Α		2 - WET	2 - BLACKTOP,						
ACTIVE SCHOOL Z	ONE	4 - IN 5 - OT	TERMITTENT 01 HER	RIVIUVING WURI	20°	- ACTIVITY AREA - TERMINATION A	REA	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT						
LIGHT O	CONDITION		·	WEATH	IER		****	4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, D	3 - BRICK/BLOCK						
1 - DAYLIGHT			1 - CL		6 - SNOW			) a differentiation	OIL, GRAVEL	VEL STONE						
1 2 - DAWN/DUSK 7 - SEVI 3 - DARK – LIGHTED ROADWAY 3 - FOG, SMOG, SMOKE 8 - BLOW						CROSSWINDS G SAND, SOIL, DIR	T, SNOW		6 - WATER (STAN MOVING)							
4 - DARK – ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZ						IG RAIN OR FREE: / UNKNOWN	ZING DRIZZLE		7 - SLUSH	1975 - Horde I Antonidae - Catalina Geruzzina - Soci						
9 - OTHER/ UNK		Liamina	A - 9E	EEJ, DAIL	, outrown			9 - OTHER/UNKN	OWN							
NARRATIVE										Indicate the north direction with						
Unit 2 was st										an "N" on the compass diagram.						
was traveling	south on	Parkvi	ew Dr an	id rear ei	nded			ScenePD ™ - Evaluation Edition		, tompare and						
Unit 2.	<u> </u>					Evaluation Edition	Evaluation	Evaluation Edition								
						\	"	Evaluation E	Evaluation Edition dition	aluation Edition						
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Evaluation Edition  Evaluation Edition  Evaluation Edition  Evaluation Edition										aluation Edition						
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						Evaluation Edition	1 1 1	Trancite (877) 908-4777	1 1 1 1 1							
CRASH REPORTED I		10000	SPATCH DATE /			RIVAL DATE / TIM		SCENE CLEARED		REPORT TAKEN BY POLICE AGENCY						
04122023			2023	انسانسانسا	0412			4122023	1656	POLICE AGENCY  MOTORIST						
TOTAL TIME OTHER TOTAL OFFICER'S NAME*  ROADWAY CLOSED INVESTIGATION TIME MINUTES RISCH							HECKED BY OFFI	SUPPLEMENT								
	OFFICER'S BADGE NUMBER'						Снескер	(CORRECTION OF ADDITION TO AN EXISTING REPORT SENT TO ODPS)								
2	2 0	3 8	0	7 -	1 1	5 3	0 7	- <b>1</b>	3 8							

■ FIRST HARMFUL EVENT

■ MOST HARMFUL EVENT

OHIO DEF OF PUBLI SAFETY - SERVI	OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST								2 0 2 3 - 0 0 0 0 4 0 9 2									
UNIT #										D	ATE OF	BIRTH			AGE	GENDER		
0 1	PIERCE, STEPHANIE REBECCA								1 0 / 1 8 / 1 9 9 5 2 7 F									
E	ADDRESS: STREET, CITY, STATE, ZIP  838 WABASH AVE ZANESVILLE, OH 43701																	
INJURIES	RIES INJURED EMS AGENCY (NAME) INJURE					URED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED				D01	T-COMPLIA	SEATI	NG POSITIO	N AIR BAG	USAGE	EJECTION	TRAPPED	
<u>5</u>	BA								0 4		HELME		1	11	1 1 1			
INJURIES  OL STATE  OH  OH  OH  OH  OH  OH  OH  OH  OH  O					OFFENSE CHARGED LOCAL CODE				NSE DESC	RIPTION				CITAT	CITATION NUMBER			
										AL COU	L TEST		DRUG TEST(S)					
≥ OL CLASS	SELECT UP TO 2	RESTRICTION SELECT		TRACTED	_	DHOL / DRUG SUSPI LCOHOL   MAI	ECTED RIJUANA	CON	IDITION	STATUS		VAL		STATUS	TYPE		SELECT UP TO 4	
_4			1 OTHER DRUG				1	L	_1	1	•		1	1				
UNIT #	NAME: LAST, F	FIRST, MIDDLE		· · · · · · · · · · · · · · · · · · ·						D	ATE OF	BIRTH			AGE	GENDER		
0 2	D_2 PAXTON, ROBIN ELAINE										0 4 / 0 6 / 1 9 6 2 6 1 F							
ADDRESS:	STREET, CITY, ST.									CONTA	CT PHO	NE - INCL	UDE AREA C	ODE	_	_		
INJURIES		HEATH, OH 43056 EMS AGENCY (NAME)		INJURED T	TAKEN TO	TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN				SEATING POSITION				N AIR RAG	AIR BAG USAGE EJECTION TRAPPED			
NON 5	TAKEN			USED					DOT-COMPLIANT 0 1				1	1 1 1				
ADDRESS: 770 ALI INJURIES 5 0L STATE 0 H	TATE OPERATOR LICENSE NUMBER							OFFE	NSE DESC	SE DESCRIPTION			CITA			ATION NUMBER		
<b>Е</b> О Н	1				CODE													
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED		DHOL / DRUG SUSPI	E <b>CTED</b> RIJUANA	CON	IDITION	STATUS		VAL		STATUS	DRUG Type	TEST(S) RESULT	SELECT UP TO 4	
4		BY			1 DOTHER DRUG			1		1 ,	1				1 1			
UNIT #												DATE OF BIRTH				AGE	GENDER	
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE								
010	I			T						ш				1 1				
ADDRESS:	INJURED   I TAKEN BY				INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPIUSED				EQUIPMENT	DOT-COMPLIANT SEATING POSITION AT MC HELMET				N   AIR BAG	R BAG USAGE   EJECTION   TRAPPED			
OL STATE	OPERATOR L	ICENSE NUMBER	OFFENSE CHARGED LOCAL CODE			OFFE	NSE DESC	RIPTION				CITAT	CITATION NUMBER					
										AL 201101 TECT								
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2			VER ALCOHOL / DRUG SUS		ICTED COND		CONDITION STATUS			TYPE VALUE S			TATUS TYPE RESULT				
					□ ∘	THER DRUG						•	[					
	RIES	SEATING POSITION		AIR BAG OL CLAS			S	4	RESTRIC		CONTRACTOR DESCRIPTION	DRIVER DISTRACTION  1 - NOT DISTRACTED						
1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEPLOYED 2 - DEPLOYED FRONT			1 - CLASS A 2 - CLASS B	1 - ALCOHOL INTERLOCK DEVICE 2 - CDL INTRASTATE ONLY			2-	2 - MANUALLY OPERATING A							
3 - SUSPECTED		R INJURY 2 - FRONT - MIDDLE		ED SIDE		3 - CLASS C	3 - CORRECTIVE LENSES				ELECTRONIC COMMUNICA DEVICE (TEXTING, TYPIN			ATION 3-TEST GIVEN CONTAMINATED				
4 - POSSIBLE IN 5 - NO APPAREN	PPARENT IN HIRY 4 - SECOND - LEFT SIDE					4 - REGULAR CLASS (OHIO = D)				DIALING) A BUS 3-TALKING ON H			N HANDS-FF	A - TEST CIVEN RESULTS KNO				
TNIIIDED	(MOTORCYCLE PASSENGER)  URED TAKEN BY  5 - SECOND – MIDDLE		9 - DEPLOYMENT UNKNOWN 5 - M/C MOPED ONLY 6 - NO VALID OL				6 - EXCEPT CLASS A & CLASS B BUS				COMMUNICATION DEVICE			5 - TEST GIVEN, RESULTS UNKNOWN				
1 - NOT TRANSP	ANSPORTED 6 - SECOND - RIGHT SIDE						7 - EXCEPT TRACTOR-TRAIL						ICE	ALCOHOL TEST TYPE				
7 TREATED AT 2 - EMS	REATED AT SCENE 7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)		1 - NOT EJECTED H - HAZMAT				MENT		TERMEDIATE STRICTIONS	LICENSE 5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE			AN 1 - NONE					
3 - POLICE	O THIRD DIGHT CIDE		2 - PARTIALLY EJECTED M			M - MOTORCYCLE 9 - LEARNER'S PE				RMIT 6 - PASSENGER				2 - BLOOD 3 - URINE				
9 - OTHER / UNK	10 - SLEEPER SECTION					P - PASSENGER N - TANKER			10 - LIMITED TO DAYLIGHT ONLY			7 - OTHER DISTRACTION INSIDE THE VEHICLE			4 - BREATH			
1 - NONE USED	FETY EQUIPMENT OF TRUCK CAB  ONE LISED 11 - PASSENGER IN OTHER			Q - MOTOR SCOOTER				11 - LIMITED TO EMPLOYMENT 12 - LIMITED - OTHER				8 - OTHER DISTRACTION OUTSIDE THE VEHICLE			5 - OTHER			
2 - SHOULDER B	- SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS,		1 - NOT TRAPPED S - 2 - EXTRICATED BY MECHANICAL MEANS T - 3 - FREED BY NON-MECHANICAL MEANS			R - THREE-WHEEL MC S - SCHOOL BUS	13 - MECHANICAL DE (SPECIAL BRAKE CONTROLS, OR O' ADAPTIVE DEVI( 14 - MILITARY VEHICLE AIR BRAKES		EVICES	9-	9 - OTHER / UNKNOWN			DRUG TEST TYPE 1-NONE				
	3 - LAP BELT ONLY USED PICK-UP WITH CAP) 4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED					T - DOUBLE & TRIPLE X - TANKER / HAZMAT			THER		CONDITION			2 - BLOOD				
	5 - CHILD RESTRAINT SYSTEM – CARGO AREA FORWARD FACING 13 - TRAILING UNIT					A - TANNER / HAZWAT					1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)			3 - URINE 4 - OTHER				
6 - CHILD REST	6 - CHILD RESTRAINT SYSTEM — 14 - RIDING ON VEHICLE EXTERIOR								S WITHOUT					DRUG TEST RESULT(S)				
	REAR FACING (NON-TRAILING UNIT) 7 - BOOSTER SEAT 15 - NON-MOTORIST								TSIDE MIRRO	1211200				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.)										6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS				4 - CANNABINOIDS			
	- REFLECTIVE CLOTHING - LIGHTING – PEDESTRIAN										/ ALCOHOL 9- OTHER / UNKNOWN				5 - COCAINE 6 - OPIATES / OPIOIDS			
/ BICYCLE ON	/ BICYCLE ONLY														7 - OTHER			
AA - OLHEK / ONK	- OTHER / UNKNOWN														8 - NEGATIVE RESULTS			