OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*								
PHOTOS TAKEN OH-2 OH-3	2023-	0000	5085						
SECONDARY CRASH PRIVATE PROPERTY	Heath DD	0 4	NCIC*	HIT/SKIP 1 - SOLVED L	NUMBER OF UNITS O 1	UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN			
COUNTY* LOCALITY* LOCATION: C	ITY, VILLAGE, TOWNSHIP*			CRASH DATE / T		RASH SEVERITY			
4 5 1 2 - VILLAGE HEATI				05072023	1107 5	1 - FATAL 2 - SERIOUS INJURY			
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST			ROAD TYPE	LATITUDE DEC	STORETS STOREN SAN INTERNAL	SUSPECTED 3 - MINOR INJURY			
T MEST	INDUSTRIAL		PY	40,034		SUSPECTED			
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST			ROAD TYPE	LONGITUDE DE - 8 42	B 9 6	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE			
	619 Industrial Pkw			<u> </u>		ONLY			
1 - INTERSECTION FROM REFERENCE 1 - NORTH IF	ROUTE TYPE R - INTERSTATE ROUTE(TP) AL	ROAD TYPE - ALLEY HW - HIGHWAY R	D - ROAD	l —	NTERSECTION RELATERSECTION OR ON APPR	April 10 Strap 5			
3 - HOUSE # 3 - EAST	BI BENAL OS ROOTE		Q - SQUARE T - STREET			JMBER OF APPROACHES			
DISTANCE DISTANCE C	R - STATE ROUTE CR -	- CIRCLE OV - OVAL T	E - TERRACE	williamie	ROADWAY	JMBER OF AFFROAGHES			
FROM REFERENCE UNIT OF MEASURE 1 - MILES TI 2 - FEET	NUMBERER TOWNSHIP		L - TRAIL VA - WAY	ROADWAY DIV					
L L J 3 - YARDS	HE -	- HEIGHTS PL - PLACE		L KOADWAT DIV	1000				
LOCATION OF FIRST HARMFUL EVE 1 - ON ROADWAY 9 - CROSSOVI		NER OF CRASH COLLISION/IMPA COLLISION 4-REAR-TO-REAR	СТ	DIRECTION OF TRAVEL	ti Calculation	IAN TYPE D FLUSH MEDIAN			
	TWO	VEEN 5-BACKING MOTOR 6-ANGLE		1 - NORTH 2 - SOUTH	(< 4 FE				
4 - ON ROADSIDE 12-SHARED	USE PATHS OR TRAN	NSPORT 7-SIDESWIPE, SAMI		3 - EAST 4 - WEST	(≥4 FE				
6 - OUTSIDE TRAFFIC WAY 13-BIKE LAN	DETILAL	,			4 - DIVIDEI	D, RAISED MEDIAN			
7 - ON RAMP 14-TOLL BOX 8 - OFF RAMP 99-OTHER/					(ANY TY 9 - OTHER/				
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WO	RK ZONE	CONTOUR	CONDITIONS	SURFACE			
	- LANE CLOSURE 2 - LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST \ WARNING SIGN	WORK ZONE	2	2	2			
	3 - WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNIN 3 - TRANSITION AREA			1 - DRY	1 - CONCRETE			
	- INTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA		2 - STRAIGHT GRADE 3 - CURVE LEVEL	2-WET 3-SNOW	2 - BLACKTOP, BITUMINOUS, ASPHALT			
	5 - OTHER	5 - TERMINATION ARI	-A	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK			
LIGHT CONDITION 1 - DAYLIGHT	1 - CLEAR	R 6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE			
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	04 2 - CLOUDY	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT,	WONS		6 - WATER (STANDING, MOVING)	5 CONTROL 50			
4 - DARK – ROADWAY NOT LIGHTED	9 - FREEZING RAIN OR FREEZI		7 - SLUSH	9 - OTHER/UNKNOWN					
5 - DARK — UNKNOWN ROADWAY LIGHTIN 9 - OTHER/ UNKNOWN	G 5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN				
NARRATIVE						Indicate the north			
Unit 1 was traveling south	•				1	direction with an "N" on the compass diagram.			
drove off the right side of the utility pole.	ne road and struck a	n L		ScenePD ™ - Evaluation Edition					
utility pole.		Evaluation Edition	Evaluation aution Edition	Evaluation Edition	Evaluation E				
				Pkwy. Evaluation Edition	Evaluation Edition	atton			
		Evaluation Edition	uation Edition	L CONTO	Evaluation E	dition			
			Evaluation	Evaluation Edition	Evaluation Edition				
		Evaluation Edition Utility			Evaluation Edition	dition			
		Utility Evaluation Edition	Evaluation Edition	Evaluation Edition					
		5-VBIDAROTI EURON	,800	Naluation Edition	Evaluation Edition Evaluation Edition	dition			
		Evaluation Edition	valuation Edition	Edition Edition Edition Examination Edition (Republic Press)	N Ebd	dition			
		-	/ Funkani-	Evaluation Edition	Evaluation Edition Not To Scale	2-			
		Evaluation Edition	uation Edition	Trancite (877) 908-4777					
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED	Gradie Cold and Dr. North Enthances (1871)	REPORT TAKEN BY			
05072023 1107 050	072023 1108	05072023 1	1140	5072023	1204	POLICE AGENCY MOTORIST			
TOTAL TIME OTHER TO ROADWAY CLOSED INVESTIGATION TIME MINI			HECKED BY OFFI	CER'S NAME*		SUPPLEMENT			
	OFFICER'S BAD	GE NUMBER*	Снескер	BY OFFICER'S BADGE N	UMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)			
	0 7 -	1 4 5	0 7	- 1	3 0				

0E3

OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST							2 0 2 3 - 0 0 0 0 5 0 8 5									
UNIT#								D	ATE OF BI	RTH		T	AGE	GENDER		
0 1	DEAVERS, FREDRICK BURTON										6 /				5 9	M
	: STREET, CITY, S'	tate,zip N NEWARK, OH 4305	:5						CONTA	ACT PHO	NE - INCLUD	E AREA CO	DDE			
	INJURED	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT			SEATING	POSITION	AIR BAG	USAGE	EJECTION	TRAPPED
5	TAKEN BY		INSURED TAKE					USED 0 4		T-COMPLIA HELME		1	1		1	1
OL STATE	OPERATOR I	LICENSE NUMBER		OFFEN	SE CHAF	RGED	LOCAL	OFFENSE DESC	RIPTION	I			CITAT	ION N	UMBER	
OH		.														
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT		IVER TRACTED		DHOL / DRUG SUSPI LCOHOL MAI	ECTED RIJUANA	CONDITION	STATUS		VALUI	Ε 5	STATUS	TYPE	RESULT	T SELECT UP TO 4
_4			.	7	⊟ ∘	THER DRUG		1	1	1	• ـ		1	1		
UNIT #	NAME: LAST,	FIRST, MIDDLE	•		•					D	ATE OF BI	RTH			AGE	GENDER
									ш					_		
ADDRESS:	: STREET, CITY, S	TATE, ZIP							CONTA	CT PHO	NE - INCLUD	E AREA CO	DDE			
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED	TAKENTO	· MEDICAL FACILITY	(NAME CITY)	SAFETY EQUIPMENT			SFATING	POSITION	I AID BAG	HSAGE	FIECTION	TRAPPED
INSCRIES	TAKEN BY	Emo Adeno F (Maine)		INDUNED				USED	DOT-COMPLIANT SEATING POSITION				AIR BAG USAGE EJECTION TRAPPE			INALLED
OL STATE	OPERATOR I	LICENSE NUMBER		OFFEN	SE CHAF	RGED	LOCAL	OFFENSE DESC	RIPTION	ı			CITAT	ION N	UMBER	
							CODE									
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	IVER TRACTED		OHOL / DRUG SUSP		CONDITION	STATUS	ALCOHO TYPE	L TEST VALU	E S	STATUS	DRU(RESULT	T SELECT UP TO 4
			BY		=	LCOHOL MAI THER DRUG	RIJUANA			ļ.,				1		
UNIT #	NAME: LAST,	FIRST, MIDDLE								D	ATE OF BI	RTH		T	AGE	GENDER
														_ _]
ADDRESS:	STREET, CITY, S	TATE, ZIP							CONTA	СТ РНО	NE - INCLUD	E AREA CO	DDE	'		•
									ш		1	1	1 1			
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		T-COMPLIA		POSITION	AIR BAG	USAGE	EJECTION	TRAPPED
OL STATE			OFFENSE CHARGED LOCAL		OFFENSE DESC			CITAT	CITATION NUMBER							
							CODE									
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER TRACTED		OHOL / DRUG SUSP		CONDITION	STATUS		L TEST VALU	E S	STATUS	DRU(RESULT	T SELECT UP TO 4
	ļ		ВУ		=	LCOHOL MAI THER DRUG	RIJUANA			ļ						
INJU	JRIES	SEATING POSITION		AIR BAG	L u	OL CLAS	s	OL RESTRIC	TION(S)	DF	RIVER DIS	TRACT	ION	T	EST STA	ATUS
L-FATAL	SERIOUS INJURY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEF			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTATI			NOT DISTRAC				E GIVEN	
	MINOR INJURY	INJURY 2 - FRONT - MIDDLE 3 - DEPLOY						- CORRECTIVE LENSES			2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING TYPING.			J-TEST GIVEN, CONTAININATED		
	4 SECOND LEET SIDE		4 - DEPLOY 5 - NOT APP	ED BOTH FRONT / SIDE 4 - REGULAR CLASS (OHIO = D)			4 - FARM WAIVER 5 - EXCEPT CLASS A		DIALING) 3 - TALKING ON HANDS-FREE			SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN				
		(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE		MENT UNKN	OWN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS A			COMMUNICAT	ION DEVI	CE		T GIVEN, RES	SULTS
1 - NOT TRANSP		6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER		TALKING ON H COMMUNICAT					ST TYPE
/TREATED AT 2 - EMS	T SCENE	7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOT EJE	JECTION ECTED		OL ENDORSE	MENT	8 - INTERMEDIATE RESTRICTIONS	LICENSE		OTHER ACTIV		AN	1 - NON	E	
B - POLICE	C THIRD DIGHT CIDE		LLY EJECTED	DECEDIO			9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER 2 - BLOOD 7 - OTHER DISTRACTION 3 - URINE							
10 - SLEEPER SECTION 4 - NOT AP		LICABLE N-TANKER 10-1			10 - LIMITED TO DAY	Υ	INSIDE THE VEHICLE			4 - BREATH						
SAFETY E	QUIPMENT	11 - PASSENGER IN OTHER	Т	RAPPED		Q - MOTOR SCOOTER	TODOVOLE	11 - LIMITED TO EMP			OTHER DISTR THE VEHICLE		UTSIDE _	5 - OTHI		
2 - SHOULDER B	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOT TRA	APPED		R - THREE-WHEEL MO S - SCHOOL BUS	JIOKCYCLE	13 - MECHANICAL DE	VICES	9-	OTHER / UNK	10WN		1 - NON	EUG TEST	TYPE
- SHOULDER & LAF BELL USED		VICAL MEANS Y - TANKER / HAZMAT			CONTROLS, OR OTHER ADAPTIVE DEVICES)		1.	CONDITION 1 - APPARENTLY NORMAL			2 - BLOOD 3 - URINE					
5 - CHILD RESTRAINT SYSTEM – CARGO AREA 3 FORWARD FACING 13 - TRAILING UNIT			3 - FREED BY NON-MECHANICAL MEANS			14 - MILITARY VEHICLES ONLY		2 - 1	2 - PHYSICAL IMPAIRMENT			4 - OTHER				
	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)						15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT		EMOTIONAL (I Angry, disturb			DRUG	TEST RE	ESULT(S)
7 - BOOSTER SE		15 - NON-MOTORIST						16 - OUTSIDE MIRRO 17 - PROSTHETIC AID			ILLNESS	CAINTED			PHETAMINES	3
3 - HELMET US		99 - OTHER / UNKNOWN						18 - OTHER		- 1	FELL ASLEEP, FATIGUED, ET).			BITURATES ZODIAZEPIN	IES
DENTECTIVE	DANG HEED									6-1	JNDER THE IN			A CANI	NABINOIDS	
(ELBOW, KNE	EES, ETC.)										OF MEDICATIO	NS / DRUC	GS			
9 - PROTECTIVE (ELBOW, KNE 0 - REFLECTIVE 1 - LIGHTING - F / BICYCLE ON	EES, ETC.) E CLOTHING PEDESTRIAN									1	OF MEDICATIO 'ALCOHOL OTHER / UNKN		SS	5 - COCA		DS