OFFICIAL PRINCIPAL TRAFFIC CRASH F	LOCAL REPORT NUMBER*										
OH-2	2024-00004415										
CECONDARY CRASH	REPORTING AGENCY NAME* Heath PD	0.4	NCIC*	HIT/SKIP 2 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR  O 1 98 - ANIMAL					
A THURSTERNITE		1307	2 - UNSOLVED		CRASH SEVERITY						
4 5 1 2-VILLAGE HEATH	, VILLAGE, TOWNSHIP*		0.5082024, 0709, 5 1-FATAL								
3-TOWNSHIP	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		2 - SERIOUS INJURY SUSPECTED					
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WFST	HEBRON		R D	40,026	1 0 8	3 - MINOR INJURY SUSPECTED					
1 11 11 11 11 11 11 11 11 11 11 11 11 1	REFERENCE ROAD NAME (ROAD, M.	ILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES	4 - INJURY POSSIBLE					
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	888		1 [ [	-82,442	7 0 4	5 - PROPERTY DAMAGE ONLY					
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE			INTERSECTION RE	LATED					
3 2-MILE POST 2-SOUTH US-			D - ROAD Q - SQUARE	WITHIN INTERSECTION OR ON APPROACH							
3- HOUSE # 3- EAST 4-WEST SR-	STATE RUUTE		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							
	ROUTE DR - [	/A - WAY	ROADWAY DIVIDED								
LOCATION OF FIRST HARMFUL EVENT		HEIGHTS PL - PLACE  ER OF CRASH COLLISION/IMPAGE	т	DIRECTION OF TRAVE	L M	EDIAN TYPE					
1 - ON ROADWAY 9 - CROSSOVER  0 6 2 - ON SHOULDER 10 - DRIVEWAY/	ALLEY ACCESS BETWI			1 - NORTH 1 - DIVIDED FLUSH MEDIAN (<4 FEET)							
3 - IN MEDIAN 11-RAILWAY GF 4 - ON ROADSIDE 12-SHARED US	RADE CROSSING VEHIC	LESIN 6-ANGLE	DIDECTION	2 - SOUTH 3 - EAST	DED FLUSH MEDIAN FEET )						
5 - ON GORE TRAILS	2 - REAR-I	END 8-SIDESWIPE, OPPO	SITE DIRECTION	4-WEST	DED, DEPRESSED MEDIAN DED, RAISED MEDIAN						
7 - ON RAMP 14-TOLL BOOTH		ON 9-OTHER/UNKNOW	/N	(ANY TYPE) 9 - OTHER/UNKNOWN							
8 - OFF RAMP 99-OTHER/UNI											
WORK ZONE RELATED 1 - L	WORK ZONE TYPE  ANE CLOSURE	LOCATION OF CRASH IN WO 1 - BEFORE THE 1ST V		CONTOUR 1	CONDITIONS 1	SURFACE 1					
3-V	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING SIGN 2 - ADVANCE WARNIN	G AREA	1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRE							
LAW ENFORCEMENT PRESENT	OR MEDIAN  NTERMITTENT OR MOVING WORK	3 - TRANSITION AREA 4 - ACTIVITY AREA	Z-SIKAIGHI GRADE Z-WEI								
	OTHER	5 - TERMINATION ARE	Α	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	BITUMINOUS, ASPHALT					
LIGHT CONDITION	WEATHER			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIR	T, 4 - SLAG, GRAVEL,					
1 - DAYLIGHT 2 - DAWN/DUSK		6 - SNOW 7 - SEVERE CROSSWINDS	SSWINDS 01L, GRAVEL 6-WATER (STANDING,								
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOKE	8 - BLOWING SAND, SOIL, DIRT, 9 - FREEZING RAIN OR FREEZI	o, SOIL, DIRT, SNOW MOVING)								
5 - DARK – UNKNOWN ROADWAY LIGHTING	NO DINIELLE		9 - OTHER/UNKNOW	/N							
9 - OTHER / UNKNOWN NARRATIVE						^ Y-4'-4-1111-					
Units one and two were park	ed at the rear of 88	8				Indicate the north direction with an "N" on the					
Hebron Rd, both making deli	veries. Unit one beg	gan 🗀 🗀		ScenePD ™ - Evaluation Editi	on	compass diagram.					
to drive out, passing by unit t				Evaluation							
unit one sideswiped the right	side mirror of unit	twoEvaluation Edition	Evaluation Edition	Evaluation Edition							
			Evaluation Edition	Evaluation Evaluation Edition	Evaluation Edition						
		Evaluation Edition	Evaluation Edition	888 Hebron Rd Evaluation	Evaluation Edition	-					
		Evaluation Edition	Evaluation Edition	Evaluation Edition	Lation	-					
				Evaluation Evaluation	Evaluation Edition Edition	N					
		Evaluation Edition	Evaluation Edition		Evaluation EditieN	) Scale					
			Evaluation Edition	Evaluation Evaluation Edition	Edition						
		Evaluation Edition		Evaluation	Evaluation Edition						
		Evaluation Edition	Evaluation Edition	Evaluation Edition							
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	<del></del>	Trancite (877) 908-4777 SCENE CLEARED I	DATE / TIME	REPORT TAKEN BY					
The section of the se	82024 0712 0		7 2 4 0	5082024	2015-041-035 301510/05125	POLICE AGENCY					
TOTAL TIME OTHER TOTAL	OFFICER'S NAME*	Сн	ECKED BY OFFI	CER'S NAME*		MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINUTE	Danks		ubis	APPROPRIE TABLE		SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)					
	O 7 -		D T	Y OFFICER'S BADGE N	5 2	come entertain incrys), sent (9.00FS).					

J FIRST HARMFUL EVENT

1

Ì

Ũ	OHIO DEPARTMENT OF PUBLIC SAPETY MOTORIST / NON-MOTORIST							2 0	2		O O				5		
	UNIT # <b>0 1</b>	NAME: LAST, FIRST, MIDDLE UNKNOWN,							DATE OF BIRTH AGE GENDER							GENDER	
MOTORIST / NON-MOTORIST	ADDRESS:	STREET, CITY, STA	TE, ZIP						CONTA	ACT PHO	NE - IN	1	1 1				
OM-MO	INJURIES 5	INJURED E TAKEN BY	EMS AGENCY (NAME)		INJURED.	TAKEN TO			SAFETY EQUIPMENT		T-COMPLI	ANT	ATING POSITIO	N AIR BA	IG USAGE	EJECTION 1	TRAPPED 1
IST / N	OL STATE		ICENSE NUMBER		OFFEN	SE CHAF			OFFENSE DESC	CRIPTION			41—	CITATION NUMBER			
MOTOR	OL CLASS	ENDORSEMENT	RESTRICTION SELECT	UPTO 3 DRI	VER ALCOHOL		OHOL / DRUG SUSPECTED		CONDITION		ALCOH	IOL TEST		DRU		G TEST(S	
		SELECT UP TO 2			TRACTED 9	П		RIJUANA	9	STATUS	TYPE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	/ALUE	STATUS 1	1 TYPE	RESULT	SELECT UP TO 4
	UNIT #	UNIT # NAME: LAST, FIRST, MIDDLE				OTHER DIGG					DATE 0	F BIRTH			AGE	GENDER	
ī	O 2	STREET, CITY, STA	ATE.ZIP							CONTACT PHONE - INCLUDE AREA CODE				CODE			
OTORIS		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	··· <b>-,</b>											ı			
MOTORIST / NON-MOTORIST	INJURIES	INJURED E	EMS AGENCY (NAME)		INJURED.	TAKEN TO	D: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DOT-COMPLIANT SEATING POSITION MC HELMET			ON AIR BAG USAGE EJECT		EJECTION	TRAPPED	
ORIST /	OL STATE	OPERATOR L	ICENSE NUMBER	OFFENSE CH			RGED LOCAL CODE		OFFENSE DESC	CRIPTION				CITA	CITATION NUMBER		
MOT	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	_	DHOL / DRUG SUSPI	E <b>CTED</b> Rijuana	CONDITION	STATUS	ALCOH TYPE		ST /ALUE	STATUS	DRU	G TEST(S	SELECT UP TO 4
						=	THER DRUG					J. L.	T DIDTU				Locuses
	UNIT #	NIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDE							GENDER	
FORIST	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE								
OM-NO	INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO					MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			T DOT-COMPLIANT SEATING POSITION MC HELMET			ON AIR BA	IG USAGE	EJECTION	TRAPPED		
MOTORIST / NON-MOTORIST	OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN:	SE CHAF			OFFENSE DESC					CITA	CITATION NUMBER		
MOTOR	OL CLASS	ENDORSEMENT	RESTRICTION SELECT	UPTO 3 DRI	VER	AI CO	OHOL / DRUG SUSPI	CODE	CONDITION	ALCOHOL TEST				DRUG TEST(S)			
	OL OLAGO			TRACTED	ALCOHOL MARIJUANA OTHER DRUG				STATUS TYPE VALUE		/ALUE	STATUS TY		TYPE RESULT SELECT UP TO 4			
	INJU	RIES	SEATING POSITION	A	AIR BAG		OL CLASS	S	OL RESTRIC	TION(S		RIVER	DISTRAC	TION		TEST STA	TUS
	1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOY				1 - ALCOHOL INTER 2 - CDL INTRASTAT	TE ONLY 2 - MAI ENSES ELE DEV DIA			OT DISTRACTED IANUALLY OPERATING AN LECTRONIC COMMUNICATIO EVICE (TEXTING, TYPING,		1 - NONE GIVEN 2 - TEST REFUSED			
	3 - SUSPECTED MINOR INJURY 2 - FRONT - MIDDLE		3 - DEPLOY	ED SIDE		3 - CLASS C 4 - REGULAR CLASS (OHIO = D)		3 - CORRECTIVE LE			ELECTR			SAMPLE / UNUSABLE			
	5 - NO APPARENT IN HIRY 4 - SECOND - LEFT SIDE 5			4 - DEPLOY	ED BOTH FRO PLICABLE			INT / SIDE			4 - FARM WAIVER 5 - EXCEPT CLASS	DIALING) TALKING ON HANDS-FREE				REE	
	INJURED TAKEN BY  (MOTORCYCLE PASSENGER)  9 - DEPLOY  5 - SECOND - MIDDLE			MENT UNKNOWN 5 - M/C MOPED ONLY 6 - EXCEPT CLAS 6 - NO VALID OL & CLASS B BU				6 - EXCEPT CLASS	S A COMMUNICATION				EVICE 5 - TEST GIVEN, RESULTS				
	1 - NOT TRANSPORTED 6 - SECOND - RIGHT SIDE					7 - EXCEPT TRACTO				1 TACINITO ON TIARD II				D			
	/TREATED AT SCENE 7-THIRD - LEFT SIDE 2-EMS (MOTORCYCLE SIDE CAR) 1			Programme and the					8 - INTERMEDIATE RESTRICTIONS					H AN 1 NONE			
	3-POLICE 8-THIRD-MIDDLE 2-				ARTIALLY EJECTED M - MOTORCYCLE 9 - LE			9 - LEARNER'S PER		6 - PASSENGER			2 - BLOOD 3 - URINE				
	10 CLEEDED SECTION			ALLY EJECTED P - PASSENGER  T APPLICABLE N - TANKER			RESTRICTIONS 10 - LIMITED TO DAY		7 - OTHER DISTRACTION INSIDE THE VEHICLE			4 - BREATH					
0.00	SAFETY EQUIPMENT  OF IRUCK CAB  11. PACCENCED IN CTUED				Q - MOTOR SCOOTER 11 - LIMITED TO EM			THE VEHICLE			OUTSIDE	ITSIDE 5 - OTHER					
	1 - NONE USED 11 - FASSENGER IN OTHER ENCLOSED CARGO AREA 2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOT TRAPPED				R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTHI S - SCHOOL BUS 13 - MECHANICAL D				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			2 - EXTRICATED BY T - DOUBLE & TRIPLE TRAILERS			(SPECIAL BRAK CONTROLS, OR C	THER		CONDITION			2 - BLOOD				
	5 - CHILD RESTRAINT SYSTEM – CARGO AREA		3 - FREED BY NON-MECHANICAL MEANS				ADAPTIVE DEVI		1 - APPARENTLY NORMAL ONLY 2 - PHYSICAL IMPAIRMENT			3 - URINE 4 - OTHER					
	FORWARD FACING 13 - TRAILING UNIT  6 - CHILD RESTRAINT SYSTEM - 14 - RIDING ON VEHICLE EXTERIOR		NON-MIL	NON-WECHANICAL MEANS				15 - MOTOR VEHICLE AIR BRAKES	ES WITHOU	WITHOUT 3 - EMOTIONAL (E.G., DEPRESS							
	REAR FACING (NON-TRAILING UNIT)						16 - OUTSIDE MIRRO		ANGRY, DISTURBED) 4- ILLNESS			DRUG TEST RESULT(S)  1-AMPHETAMINES					
	7 - BOOSTER SEAT 15 - NON-MOTORIST 8 - HELMET USED 99 - OTHER / UNKNOWN						17 - PROSTHETIC AID 18 - OTHER			5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			2 - BARBITURATES				
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)							10-UITEK			6- UNDER THE INFLUENCE			3 - BENZODIAZEPINES 4 - CANNABINOIDS			
	10 - REFLECTIVE CLOTHING									OF MEDICATIONS / DRUGS /ALCOHOL			5 - COCAINE 6 - OPIATES / OPIOIDS				
13	1 - LIGHTING - F / BICYCLE ON	HTING – PEDESTRIAN CYCLE ONLY									9-	OTHER/	UNKNOWN		6 - 0PI 7 - 0TH		18
9	- OTHER / UNKNOWN													8 - NEGATIVE RESULTS			