FPUBLIC SAFETY TRAFFIC CRASH	<b>KEPORT</b> *DENOTES M LOCAL INFORMATION	IANDATORY FIELD FOR SUPPLEM	IENT REPORT	2023-	OCAL REPORT NUMBER					
PHOTOS TAKEN OH-1P OTHER	NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR								
SECONDARY CRASH PRIVATE PROPERTY	Heath PD	0	4 5 0 7	1 - SOLVED LJ 2 - UNSOLVED	020	99 - UNKNOWN				
COUNTY* LOCALITY* 1-CITY LOCATION: CIT LOCATION: CIT LOCATION: CIT LOCATION: CIT	CRASH DATE / TIME * CRASH SEVERITY  0 7122023 1502 5 1- FATAL									
3 - TUWNSHIP	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE	<u> </u>	SERIOUS INJURY SUSPECTED				
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	HEBRON		R D	4,0,020	MINOR INJURY SUSPECTED					
— — — — — — — — — — — — — — — — — — —	REFERENCE ROAD NAME (ROAD	), MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES 4 - INJURY POSS						
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	1170			- 8 4 4	9 0 5	PROPERTY DAMAGE ONLY				
REFERENCE POINT DIRECTION 1-INTERSECTION FROM REFERENCE IR	ROUTE TYPE - INTERSTATE ROUTE(TP) A	ROAD TYPE L - ALLEY HW- HIGHWAY	RD - ROAD	l —	INTERSECTION RELATED					
2 MILE DOCT 4 2 COUTU	- FEDERAL US ROUTE A	V - AVENUE LA - LANE		WITHIN INTERSECTION OR ON APPROACH						
	- STATE RUUTE		ST - STREET TE - TERRACE	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES  ROADWAY						
FROM REFERENCE UNIT OF MEASURE 1 - MILES TR	- NUMBERED TOWNSHIP		TL - TRAIL WA - WAY	_						
1 3 2 2 2-FEET 3-YARDS	ROUTE	E - HEIGHTS PL - PLACE		ROADWAY DIVIDED						
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVER		<b>NNER OF CRASH COLLISION/IMPA</b> T COLLISION 4 - REAR-TO-REAR	CT	DIRECTION OF TRAVEL MEDIAN TYPE  1 - NORTH 1 - DIVIDED FLUSH MEDIAN						
and the second of the second o	TW	TWEEN 5-BACKING O MOTOR HICLES IN 6-ANGLE		1 - NORTH	(<4 FEET					
4 - ON ROADSIDE 12 - SHARED U	SE PATHS OR TRA	ANSPORT 7 - SIDESWIPE, SAN	IDESWIPE, SAME DIRECTION 4-WEST (≥4 FEET)							
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	3 - HE	AR-END 8-SIDESWIPE, OPP AD-ON 9-OTHER/UNKNO			3 - DIVIDED, DEPRESSED MEI 4 - DIVIDED, RAISED MEDIAN (ANY TYPE)					
7 - ON RAMP 14-TOLL BOOT 8 - OFF RAMP 99-OTHER/UN					9 - OTHER/UNI					
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN W		CONTOUR	CONDITIONS	SURFACE				
	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST WARNING SIGN		1	_1	_2				
LAW ENFORCEMENT PRESENT	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNI 3 - TRANSITION ARE		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,				
	INTERMITTENT OR MOVING WOR OTHER	K 4 - ACTIVITY AREA 5 - TERMINATION AR	3 CURVETEVEL 3-SNOW			BITUMINOUS, ASPHALT				
LIGHT CONDITION	WEATH	 HER		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK				
1 - DAYLIGHT	1 - CLEAR	6 - SNOW		7 - OTHER OWN WOWN	OIL, GRAVEL	4 - SLAG, GRAVEL, STONE				
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	67 2974	7 - SEVERE CROSSWINDS (E 8 - BLOWING SAND, SOIL, DIR	SAND, SOIL, DIRT, SNOW			WATER (STANDING, MOVING) 5 - DIRT 9 - OTHER/UNKNOWN				
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FREEZ 99 - OTHER / UNKNOWN	ING DRIZZLE		7 - SLUSH 9 - OTHER/UNKNOWN					
9-OTHER/UNKNOWN										
NARRATIVE  Unit 2 was traveling north o	n SR 79 in the righ	t hand			A A	Indicate the north direction with an "N" on the				
lane. Unit 1 was following be	-			ScenePD ™ - Evaluation Edition		compass diagram.				
to the left. Unit 1 passed Uni	it 2 and changed la		Evaluation	Evaluation Edition	( N	-				
back to the right. As Unit 1 v	vas changing lanes	S Unit 1 Evaluation Edition	/	SR 79	Evaluation Edition	=				
struck Unit 2.		Evaluation Edition	Evaluation Edition	Evaluation Edition	,	-				
			/ /	Evaluation Edity	Evaluation Edition Evaluation Edition	_				
		Evaluation Edition	Evaluation Edition	Edition	Evaluation Edition	-				
		_	, Evaluation	Evaluation Edition	Evaluation Edition					
		Evaluation Edition	fluation Edition		Evaluation Edition					
		Evaluation Edition	E aluation	Evaluation Eight Unit 1						
		_	Vnk 1 Evaluation Edition Evaluation Edition Evaluation Edition							
		Evaluation Edition	Evaluation Iluation Edition	No	ot To Scale					
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED I	processors and appropriate the contract of the	EPORT TAKEN BY				
0,7,1,2,2,0,2,3, 1,5,0,2,0,7,1	22023 1503	07122023 1	5040	7122023	1541	POLICE AGENCY MOTORIST				
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT		HECKED BY OFFI	FFICER'S NAME*							
	OFFICER'S B	ADGE NUMBER*	CHECKED	Y OFFICER'S BADGE N	IUMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)				
2 0 5 9	0 7 -	1 5 3	0 7	- 1	4 7					

■ FIRST HARMFUL EVENT

■ MOST HARMFUL EVENT

OHIO DEI OF PUBLI SAFETY - SERVI	OHIO DEPARTMENT MOTORIST / NON-MOTORIST						2 0 2 3 - 0 0 0 0 7 8 4 8									
UNIT #									DATE OF BIRTH		AGE		GENDER			
01	0 1 STRAIGHT, IAN EVERITT					1 1	<b>_</b> / <b>_1</b>	8 / 2	0 0 2			M				
	: STREET, CITY, ST	•							CONTA	ACT PHO	NE - INCLUDE AREA	CODE		_		
<u> </u>		AURELVILLE, OH 43	135											U		
Z	TAKEN			TAKEN TO	IN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			D0.	T-COMPLIA				TION	TRAPPED		
OL STATE	BY			OFFEN	0 4			OFFENSE DESC	MC HELMET 0 1				CITATION NUMBER			
O H					C <u>OD</u> E			331.08	KIPIIUN				N214640			
OL CLASS		RESTRICTION SELECT	VER ALCOHOL / DRUG SUSPECTED C			CONDITION	ALCOHOL TEST			DRUG TEST(S)						
	SELECT UP TO 2		DIST BY	TRACTED	_	LCOHOL MAI			STATUS	TYPE	VALUE			SULT	SELECT UP TO 4	
				1	0	THER DRUG		1	1	1	•	1	1		لــالــالــ	
UNIT #	NAME: LAST, I										DATE OF BIRTH		AGE		GENDER	
0 2	BAIR, JA								[1 , 2 , / , 1 , 0 , / , 1 , 9 , 6 , 1 ]							
E		OD DR THORNVILLE	F OH 43	2076					CONTA	ACT PHO	INE - INCLUDE AREA	CODE				
NJURIES		EMS AGENCY (NAME)	-, 011 43		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT			T SEATING POSITION			ON AIR BAG I	N AIR BAG USAGE EJECTION TRAPPED				
22 92 5	TAKEN BY			INSURED FAILER TO. INEDICAL FACILITY (NAME, SITE)		USED 0 4	DOT-COMPLIANT O 1			1	1		1			
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN:	OFFENSE CHARGED LOCAL			OFFENSE DESC	CRIPTION			CITATI	ON NUMBE	ER		
<b>≅</b> о н ј							CODE									
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	_	OHOL / DRUG SUSPI		CONDITION	STATUS		OL TEST VALUE		DRUG TES		SELECT UP TO 4	
. 4			ВУ	1	=	LCOHOL MAI THER DRUG	RIJUANA	1	1	1		1	1			
UNIT #	NAME: LAST, I	FIRST, MIDDLE			Ц,	THER DRUG					DATE OF BIRTH		AGE	 :	GENDER	
		•							,	1 1	1 1 1 1					
ADDRESS:	: STREET, CITY, ST	ATE, ZIP							CONTA	ACT PHO	NE - INCLUDE AREA	CODE	_			
TOR											1 1	1 1	1	1		
INJURIES ADDRESS:	INJURED TAKEN	EMS AGENCY (NAME)		INJURED -	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	L DO.	T-Compli	SEATING POSITI	ON AIR BAG	USAGE EJEC	TION	TRAPPED	
	BY						MC HELMET									
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENSE CHARGED LOCAL CODE			OFFENSE DESC	RIPTION	TION		CITATI	CITATION NUMBER				
OL CLASS	ENDORSEMENT	RESTRICTION SELECT	UP TO 3 DRIV	VED	AL C	OHOL / DRUG SUSPI	ECTED	CONDITION		ALCOH	OL TEST		DRUG TES	T(S)		
OL CLASS	SELECT UP TO 2	RESTRICTION SEEEST		TRACTED			RIJUANA	CONDITION		TYPE	VALUE				SELECT UP TO 4	
					□ 0 <sup>-</sup>	THER DRUG					•	البيا				
INJU 1 - FATAL	JRIES	SEATING POSITION  1- FRONT - LEFT SIDE	1 - NOT DEP	IR BAG		OL CLASS 1 - CLASS A	S	OL RESTRIC 1-ALCOHOL INTER	Control of the Control of the Control	CONTRACTOR DESCRIPTION	NOT DISTRACTED		TEST 1 - NONE GIVE	VA. 60 100 100 100 100 100 100 100 100 100	TUS	
	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOYE			2 - CLASS B		2 - CDL INTRASTAT			MANUALLY OPERATI	NG AN	2 - TEST REFU			
	PECTED MINOR INJURY 2 - FRONT - MIDDLE 3 - DEPLOYER  3 - FRONT - RIGHT SIDE 4 - DEPLOYER		ED SIDE 3 - CLASS C ED BOTH FRONT / SIDE 4 - REGULAR CLASS			3 - CORRECTIVE LE 4 - FARM WAIVER	ENSES		ELECTRONIC COMMU DEVICE (TEXTING, TY DIALING)		3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE					
	4 - POSSIBLE INJURY 5 - NO APPARENT INJURY (MOTORCYCLE PASSENGER) 4 - DEPLOYI 5 - NO APPARENT INJURY		LICABLE (OHIO = D) 5				5 - EXCEPT CLASS A BUS			REE	4 - TEST GIVEN, RESULTS KNOWN					
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOYI	MENT UNKNO	OWN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS & CLASS B BUS		4 -	COMMUNICATION DE TALKING ON HAND-H	VIOL	5 - TEST GIVEN UNKNOWN	I, RESI	JLIS	
1 - NOT TRANSP /TREATED A		6 - SECOND – RIGHT SIDE 7 - THIRD – LEFT SIDE	le l	IECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO		}	COMMUNICATION DE	VICE	ALCOHOL	TES	Т ТҮРЕ	
2 - EMS		(MOTORCYCLE SIDE CAR)	1 - NOT EJE			H - HAZMAT		8 - INTERMEDIATE RESTRICTIONS	LICENSE		ELECTRONIC DEVICE		1 - NONE 2 - BLOOD			
3 - POLICE 9 - OTHER / UNK	KNOWN	8 - THIRD – MIDDLE 9 - THIRD – RIGHT SIDE	2 - PARTIAL 3 - TOTALLY	LY EJECTED		M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PER RESTRICTIONS	TIMS		PASSENGER OTHER DISTRACTION		3 - URINE			
		10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP			N - TANKER		10 - LIMITED TO DAY			INSIDE THE VEHICLE		4 - BREATH 5 - OTHER			
1 - NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	TI	RAPPED		Q - MOTOR SCOOTER R - THREE-WHEEL MC	TORCVCI F	11 - LIMITED TO EM 12 - LIMITED - OTHE			THE VEHICLE	OUTSIDE		FCT	TVDE	
	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOT TRAI			S - SCHOOL BUS		13 - MECHANICAL D (SPECIAL BRAK		9 -	OTHER / UNKNOWN		DRUGT 1 - NONE	-51	TTPE	
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECH			NICAL MEANS X - TANKER / HAZMAT			CONTROLS, OR C	THER	THER CONDITION			2 - BL00D				
	5 - CHILD RESTRAINT SYSTEM – CARGO AREA 13 - TRAILING UNIT		3 - FREED B NON-MEG	ED BY MECHANICAL MEANS			14 - MILITARY VEHICLES ONLY		2-	2 - PHYSICAL IMPAIRMENT		3 - URINE 4 - OTHER				
6 - CHILD REST	6 - CHILD RESTRAINT SYSTEM – 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)						15 - MOTOR VEHICLES WITHOUT AIR BRAKES			3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		DRUG TEST RESULT(S)				
7 - BOOSTER SE		15 - NON-MOTORIST						16 - OUTSIDE MIRRO			ILLNESS		1 - AMPHETAN			
8 - HELMET US		99 - OTHER / UNKNOWN						17 - PROSTHETIC AI 18 - OTHER	U		FELL ASLEEP, FAINTE FATIGUED, ETC.		2 - BARBITURA 3 - BENZODIAZ		S	
9 - PROTECTIVE (ELBOW, KNI	EES, ETC.)										UNDER THE INFLUEN OF MEDICATIONS / DR	CE	4 - CANNABINO			
10 - REFLECTIVE 11 - LIGHTING - I											/ ALCOHOL OTHER / UNKNOWN		5 - COCAINE 6 - OPIATES / C	PIOID	S	
/ BICYCLE Of	NLY												7 - OTHER			
99 - OTHER / UNK	KINUWIN												8 - NEGATIVE	RESUL	TS	