OF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTES	MANDATORY FIELD F	FOR SUPPLEME	ENT REPORT	2023-	OCAL REPORT NU				
PHOTOS TAKEN OH-2 OH-3 OH-1P OTHER	NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR								
SECONDARY CRASH PRIVATE PROPERTY	Heath PD			5 0 7	1 - SOLVED	0.2	O 1 98 - ANIMAL 99 - UNKNOWN			
COUNTY* LOCALITY* 1 - CITY 4 5 1 2 - VILLAGE HEATH		CRASH DATE / TIME* CRASH SEVERITY 0 8232023, 1213, 5								
3-TOWNSHIP	ROAD TYPE	08232023 1213 2 - SERIOUS INJURY SUSPECTED								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NUR! H 2 - SOUTH 3 - EAST 4 WEST	LOCATION ROAD NAME		D R	40 03 8 1 3 4 3-MINOR INJURY						
	Hopewell REFERENCE ROAD NAME (ROA	AD MILEPOST HOUSE	F #1	ROAD TYPE	SUSPECTED LONGITUDE DECIMAL DEGREES 4 - INJURY POSSIBLE					
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	433	.5,	,		-82,428		5 - PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION SEAM DEFERRENCE	ROUTE TYPE	RO	AD TYPE		INTERSECTION RELATED					
1-INTERSECTION 1-NORTH IR				D - ROAD Q - SQUARE	WITHIN INTERSECTION OR ON APPROACH					
3 - HOUSE # 3 - EAST	- STATE ROUTE	BL - BOULEVARD MP -		T - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES					
FROM REFERENCE UNIT OF MEASURE	- NUMBERED COUNTY ROUTE			E - TERRACE L - TRAIL	ROADWAY					
1 4 6 2 2-FEET TR	- NUMBERED TOWNSHIP ROUTE	/A - WAY	ROADWAY DIVIDED							
LOCATION OF FIRST HARMFUL EVEL		HE - HEIGHTS PL - ANNER OF CRASH CO	СТ	DIRECTION OF TRAVEL MEDIAN TYPE						
1 - ON ROADWAY 9 - CROSSOVE	R 1 - N	OT COLLISION 4 - RE			1 - NORTH	1 - DIVI	1 - DIVIDED FLUSH MEDIAN			
3 - IN MEDIAN 11 - RAILWAY	GRADE CROSSING V	WO MOTOR EHICLES IN 6-AN	IGLE		2 - SOUTH 3 - EAST	2 - DIVI	(< 4 FEET) 2 - DIVIDED FLUSH MEDIAN			
4 - ON ROADSIDE 12-SHARED U 5 - ON GORE TRAILS	2 - R		SIDESWIPE, SAME DIRECTION A.WEST				≥4 FEET) (VIDED, DEPRESSED MEDIAN			
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANI 7 - ON RAMP 14 - TOLL BOO	2:11	EAD-ON 9-OT	HER/UNKNOW	/ N	4 - DIVIDED, RAISED MEDIAN (ANY TYPE)					
8-OFF RAMP 99-OTHER/U	NKNOWN					9 - OTH	ER/UNKNOWN			
☐ WORK ZONE RELATED	WORK ZONE TYPE - LANE CLOSURE		CRASH IN WO		CONTOUR	CONDITIONS				
WORKERS PRESENT 2	LANE SHIFT/CROSSOVER	WA	RNING SIGN ANCE WARNIN		1 CTRAIGHT LEVEL	1	2			
LAW ENFORCEMENT PRESENT	WORK ON SHOULDER OR MEDIAN	3 - TRA	NSITION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,			
	- INTERMITTENT OR MOVING WO - OTHER	CROOL	TVITY AREA RMINATION ARE	A 3 CURVELEVEL 3-SNOW			BITUMINOUS, ASPHALT			
LIGHT CONDITION	WEA"	THER			4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIR	3 - BRICK/BLOCK			
1 - DAYLIGHT	1 - CLEAR	6 - SNOW			7 - OTHER/ONKNOWN	OIL, GRAVEL	STONE			
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG, SMOG, SMC	7 - SEVERE CROS OKE 8 - BLOWING SA		SNOW		6-WATER (STAND MOVING)	5 - BIKI			
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RA		NG DRIZZLE		7 - SLUSH 9 - OTHER/UNKNOV	9 - OTHER/UNKNOWN			
9-OTHER/UNKNOWN		ANDREAS STATES AND	20020			9 - OTHER/ONKNOV	AIA			
NARRATIVE							Indicate the north			
Unit 1 was traveling west or way left turn lane to turn left	-	4.00					an "N" on the compass diagram.			
traveling west on Hopewell					ScenePD ™ - Evaluation Edition					
hand turn lane to turn south			Evalu Evaluation Edition	Evaluation ation Edition	Edition		tion Edition			
Unit 2 while driving in mark	ed lanes.	_	Evaluation Edition Evaluation Edition Evaluation Edition							
			Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition							
			S Evaluation Edition Evaluation Edition Evaluation Edition							
Evaluation Etition										
			Evaluation Edition Evaluation Edition							
		<u>Lice</u>	Evaluation Edition Evaluation Edition							
		Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition								
		F		Evaluation	Evaluation Edition Edition	Evaluation Edition	2.			
		F.	Evalu Evaluation Edition	ation Edition	Trancite (877) 908-4777					
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME		L DATE / TIME		SCENE CLEARED	-Day-order-dy Bellings-ord	REPORT TAKEN BY			
0,8,2,3,2,0,2,3, 1,2,1,3, 0,8,2	32023 1216	082320	23 1	2210	8232023	1302	POLICE AGENCY MOTORIST			
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINU		Сн М	ECKED BY OFFI	CER'S NAME*		SUPPLEMENT				
		BADGE NUMBER*		CHECKED I	BY OFFICER'S BADGE I		(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)			
	0 7 -	1 5	3 (0 7	- 1	4 7				

OHIO DI OF PUB SAFETY - SEI	OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST						2 0 2	3 - 0 0	O O	^{ER} 5 1	6			
UNIT#								DATE OF BIRTH		AGE	GENDER			
0 1	OLVERA, DORA SUSANA						1 1 /	2 5 / 1 9	9 8 5	3 7	F			
ADDRESS	S: STREET, CITY, STATE, ZIP CONTACT PHONE - INCLUDE AREA CODE													
310 ST S	ONE HEDG	E ROW DR JOHNSTO	WN, OH	I 4303:	1) (0 (
INJURIES	INJURED I	MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT			ПОТ-С омі	SEATING POSITIO	N AIR BAG US	AGE EJECTION	TRAPPED					
<u>5</u>	BY				USED			0 4	MC HELI		_11	_1	_1	
OL STATE	TE OPERATOR LICENSE NUMBER			OFFEN	OFFENSE CHARGED LOCAL OF			OFFENSE DESC	RIPTION		CITATIO	CITATION NUMBER		
OH							331.08	.08			N214643			
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIST	VER Tracted	_	OHOL / DRUG SUSPI		CONDITION	STATUS TYP	PE VALUE		RUG TEST(S YPE RESULT	T SELECT UP TO 4	
. 4			BY	1	=	THER DRUG	RIJUANA	. 1	1 1		.1	L 📗		
UNIT #	NAME: LAST, F	FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER	
0.2	WHITT, C	CHRISTEN LEE							0 4 /	2 2 / 1	9 9 7	2 6	, F	
ADDRESS	S: STREET, CITY, STA								CONTACT P	HONE - INCLUDE AREA (CODE			
ADDRESS 24790 INJURIES 5	NEW GUIL	FORD RD MARTINS	BURG, O	H 4303	37									
INJURIES	INJURED I	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)		DОТ-Сомі	SEATING POSITIO	N AIR BAG US	AIR BAG USAGE EJECTION TRAPPED		
5 2	BY							USED 0 4	MC HELT		1 1 1			
	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATION NUMBER			
OL STATE														
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		OHOL / DRUG SUSPI		CONDITION	STATUS TYP	PE VALUE		RUG TEST(S YPE RESULT	T SELECT UP TO 4	
4			ВУ	1	=	LCOHOL MAF THER DRUG	RIJUANA	1	1 1		1 1	L		
UNIT #	NAME: LAST, F	FIRST, MIDDLE			<u> </u>	THER DROG				DATE OF BIRTH		AGE	GENDER	
		<i>,</i>							ļ					
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP CONTACT PHONE - INCLUDE AREA CODE									<u> </u>				
TORI									<u> </u>	1 1 1	1 1	1 1		
MON-MON INJURIES		EMS AGENCY (NAME)		INJURED.	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)		DОТ-Cомі	SEATING POSITIO	N AIR BAG US	AGE EJECTION	TRAPPED	
	TAKEN				USED			MC HELI		ار				
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	OFFENSE CHARGED LOCAL OFFENSE D			OFFENSE DESC	RIPTION	'	CITATIO	N NUMBER		
	J													
OL CLASS	SELECT UP TO 2 DIS		VER Tracted		DHOL / DRUG SUSPI LCOHOL MAR	ECTED RIJUANA	CONDITION	STATUS TYP	PE VALUE		RUG TEST(S YPE RESUL	T SELECT UP TO 4		
			BY		=	THER DRUG	KIJUANA		ļ ļ.					
INJ	URIES	SEATING POSITION	A	IR BAG		OL CLASS	s	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TEST STA	TUS	
1 - FATAL	o o e o tou o tou u o o	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP				1 - ALCOHOL INTER	1 - NOT DISTRACTED						
	D SERIOUS INJURY D MINOR INJURY	2 - FRONT - MIDDLE	2 - DEPLOYI 3 - DEPLOYI				2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION		2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED			
4 - POSSIBLE I		3 - FRONT - RIGHT SIDE		ED BOTH FRONT / SIDE 4 - REGULAR CLASS (OHIO = D)			4 - FARM WAIVER		DEVICE (TEXTING, TYPING, DIALING)		SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN			
5 - NO APPARE	APPARENT INJURY 4 - SECOND - LEFT SIDE 5 - NOT APPLICA (MOTORCYCLE PASSENGER) 9 - DEPLOYMEN				IUADLE 5 - EXUE				EXCEPT CLASS A BUS 3 - TALKING ON H EXCEPT CLASS A COMMUNICATE		DS-FREE I DEVICE 5 - TEST GIVEN, RESULTS			
	TAKEN BY 5-SECOND - MIDDLE 6-NO VALID OL & CL						& CLASS B BUS	B BUS 4-TALKING ON HAND-HELD UNKNOWN						
1 - NOT TRANS /TREATED/		T SCENE 7-THIRD-LEFT SIDE EJECTION OL			OL ENDORSE	0 - INTENMEDIATE LICENSE			TOTILER			ALCOHOL TEST TYPE 1 - NONE		
2 - EMS 3 - POLICE	(MOTORCYCLE SIDE CAR) 1 - NOT EJECTED 8 - THIRD - MIDDLE 2 - PARTIALLY EJECTEI				H - HAZMAT RESTRICTIONS			MAIT		2 - BL00D				
	OTHER/UNKNOWN 9-THIRD-RIGHT SIDE 3-TOTALLY E			EJECTED P - PASSENGER RES			RESTRICTIONS	RESTRICTIONS 7 - OTHER DIST						
SAFETY	10 - SLEEPER SECTION 4 - NOT APPLICATE OF TRUCK CAB 4 - NOT APPLICATE OF TRUCK CAB			LICABLE	11 LIMITED TO			10 - LIMITED TO DAY			4 - BREATH DE 5 - OTHER			
1 - NONE USED	11 - PASSENGER IN OTHER TRADELS				Q - MOTOR SCOOTER R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE	ER THE VEHICLE			DRUG TEST	TYPE		
	HOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOT TRAPPED AP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICATED B				FD RV SPECIAL BRAI			EVICES		1-	1 - NONE			
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHAN		VICAL MEANS Y - TANKER / HAZMAT			CONTROLS, OR OTHER ADAPTIVE DEVICES)		CONDITION 1 - APPARENTLY NORMAL		2 - BLOOD 3 - URINE				
			3 - FREED B NON-ME	CHANICAL MEANS			14 - MILITARY VEHICLES ONLY		2 - PHYSICAL IMPAIRMENT		4 - OTHER			
6 - CHILD RES	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 SEAT 15 - NON-MOTORIST						16 - OUTSIDE MIRROR 17 - PROSTHETIC AID		4- ILLNESS		1 - AMPHETAMINES			
	8 - HELMET USED 99 - OTHER / UNKNOWN						18 - OTHER FAT		5 - FELL ASLEEP, FAINTED FATIGUED, ETC.	IGUED, ETC. 3 - BENZODIAZEPINES		ES		
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)								6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS		4 - CANNABINOIDS			
	O-REFLECTIVE CLOTHING								/ALCOHOL 5-COCAINE 9-OTHER/UNKNOWN 6-OPIATES/01			ns.		
/ BICYCLE (1 - LIGHTING - PEDESTRIAN / BICYCLE ONLY										7 - OTHER			
99 - OTHER / UN	9 - OTHER / UNKNOWN										8 -	NEGATIVE RESU	LTS	