OF PUBLIC SAFETY TRAFFIC CRASH	KEPORT *DENOTES	MANDATORY FIELD	FOR SUPPLEM	ENT REPORT	2023-	LOCAL REPORT N							
PHOTOS TAKEN OH-2 OH-3 OH-1P OTHER	REPORTING AGENCY NAME*			HIT/SKIP NUMBER OF UNITS UNIT IN ERROR									
SECONDARY CRASH PRIVATE PROPERTY	Heath PD		0 4	NCIC* 4 5 0 7	1 - SOLVED LJ 2 - UNSOLVED	0 1	0 1 98 - ANIMAL 99 - UNKNOWN						
COUNTY* LOCALITY* LOCATION: CITY 4 5 1 2-VILLAGE HEATH	CRASH DATE / TIME * CRASH SEVERITY 0.9032023, 1710, 5												
3-TOWNSHIP	ROAD TYPE	2 - SERIOUS INJURY											
S R 79 2-SOUTH 3-EAST	LOCATION ROAD NAME		NOAD III L	40,035	APPROXITY OF A SAME OF COMMENT	3 - MINOR INJURY							
	SE #)	ROAD TYPE	LONGITUDE D		SUSPECTED 4 - INJURY POSSIBLE								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	643 HEBRON				-82,033	067	5 - PROPERTY DAMAGE ONLY						
REFERENCE POINT DIRECTION	ROUTE TYPE		ROAD TYPE		Darrich Colonia de Calabración memo V. Calabrico de Calab	INTERSECTION R							
1 - INTERSECTION 1 - NORTH IR -	INTERSTATE ROUTE(TP) FEDERAL US ROUTE			RD - ROAD SQ - SQUARE	WITHIN INTERSECTION OR ON APPROACH								
3 - HOUSE # 3 - EAST	STATE ROUTE	BL - BOULEVARD M		ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES								
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE			TE - TERRACE TL - TRAIL	ROADWAY								
1 - MILES TR-	NUMBERED TOWNSHIP ROUTE	WA - WAY	ROADWAY DIVIDED										
LOCATION OF FIRST HARMFUL EVEN	T N	IANNER OF CRASH C	OLLISION/IMPA	CT	DIRECTION OF TRAVE	L	MEDIAN TYPE						
1 - ON ROADWAY 9 - CROSSOVER 0 6 2 - ON SHOULDER 10 - DRIVEWAY.		NOT COLLISION 4 - F BETWEEN 5 - F	REAR-TO-REAR BACKING		1 - NORTH		1 - DIVIDED FLUSH MEDIAN (<4 FEET)						
3 - IN MEDIAN 11-RAILWAY G	RADE CROSSING	TWO MOTOR ∕EHICLES IN 6-7	ANGLE		2 - SOUTH 3 - EAST	2 - DI	2 - DIVIDED FLUSH MEDIAN (≥4 FEET)						
4 - ON ROADSIDE 12-SHARED US 5 - ON GORE TRAILS	100-12 May 2000 MAN		SIDESWIPE, SAM SIDESWIPE, OPPO		4 - WEST	3 - DI	VIDED, DEPRESSED MEDIAN						
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE 7 - ON RAMP 14 - TOLL BOOT		HEAD-ON 9-0	OTHER/UNKNO\	ΝN		VIDED, RAISED MEDIAN NY TYPE)							
8-OFF RAMP 99-OTHER/UN	KNOWN					9 - OT	HER/UNKNOWN						
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE		OF CRASH IN WO EFORE THE 1ST '		CONTOUR 1	CONDITION							
WORKERS PRESENT 2 -	LANE SHIFT/CROSSOVER	W	ARNING SIGN DVANCE WARNIN		1 - STRAIGHT LEVEL	1 - DRY	2 1-CONCRETE						
LAW ENFORCEMENT PRESENT	WORK ON SHOULDER OR MEDIAN	3 - TF	RANSITION AREA		2 - STRAIGHT GRADE	2-WET	2 - BLACKTOP,						
	INTERMITTENT OR MOVING W OTHER	e carde	CTIVITY AREA ERMINATION AR	EA	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT						
LIGHT CONDITION	WEA	ATHER			4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, D	3 - BRICK/BLOCK						
1 - DAYLIGHT 2 - DAWN/DUSK	1 - CLEAR 01 2 - CLOUDY	6 - SNOW	OCCUINDO		, , , , , , , , , , , , , , , , , , , ,	OIL, GRAVEL	STONE						
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	7 - SEVERE CR OKE 8 - BLOWING S	AND, SOIL, DIRT			6-WATER (STAN MOVING)	9 - OTHER/UNKNOWN							
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING 99 - OTHER / U	RAIN OR FREEZ NKNOWN	ING DRIZZLE		7 - SLUSH 9 - OTHER/UNKNO							
9-OTHER/UNKNOWN													
NARRATIVE EMPLOYEE OF SPECTRUM CA	I I ED TN TO DED	OPT					Indicate the north direction with						
MALE DRIVER BACKED INTO							an "N" on the compass diagram.						
OVER THE WHEEL. ARRIVED	•		Evaluation	ScenePD ™ - Evaluation Edition Evaluation Edition		; -							
MEDICS TREATED MALE ON	SCENE WITH MEI	DICAL	Eval Evaluation Edition	uation Edition	Landi	Evaluation Edition	uluation Edition						
DECLINED. MALE ARRESTED	FOR PHYSICAL	_	Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition										
CONTROL			Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition										
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			PRIVATE PROPERTY NO DIAGRAM Evaluation Edition Ev										
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			Evaluation Edition		Trancite (877) 908-4777								
AND THE COURT OF T	DISPATCH DATE / TIME	CALCALANA VALVA	AL DATE / TIME	·	SCENE CLEARED		REPORT TAKEN BY POLICE AGENCY						
	32023 1714	4 09032			9032023	3 1728	MOTORIST						
TOTAL TIME OTHER TOTA ROADWAY CLOSED INVESTIGATION TIME MINUT				HECKED BY OFFI mart	CER'S NAME*		SUPPLEMENT (CORRECTION OR ADDITION						
	0 officer's	BADGE NUMBER* 1 5	2	O 7	or OFFICER'S BADGE	NUMBER*	TO AN EXISTING REPORT SENT TO ODPS)						
				1 -		- 1 -	_						

OHIO DEF OF PUBLI SAFETY - SERVI	OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MOTORIST							2 0	2	3 -	O O	O O	-	9 6	0			
UNIT #									0	ATE O	F BIRTH	-	-	\GE	GENDER			
O 1	YOST, JOSHUA JAMES ESS: STREET, CITY, STATE, ZIP								0 1 / 2 2 / 1 9 9 9 2 4 M CONTACT PHONE - INCLUDE AREA CODE									
2		RON, OH 43025								00.11.		1 - IN	I	1 1				
INJURIES	URIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT									DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED								
0 5	TAKEN BY							USEI	0 4	MC HELMET 0 1				_ 1		1	_1	
OL STATE	L STATE OPERATOR LICENSE NUMBER			OFFENS	SE CHAF	RGED	LOCAL CODE	OFF	FENSE DESC	RIPTION				CITATION NUMBER				
INJURIES 5 OL STATE O H				4511.194B1			Phy	ysical Co					004507000015209					
≥ OL CLASS	SELECT UP TO 2		DIS.	ALCOHOL / DRUG SUSPECT STRACTED ALCOHOL X MARIJU					ONDITION	ALCOHOL TEST STATUS TYPE VALUE				STATUS TYPE RESULT SELECT UP TO 4				
4			BY	1	=	THER DRUG	KIJUANA		6	2	1	•		2	1		لــالــالــ	
UNIT #	NAME: LAST, F	FIRST, MIDDLE	'	•				•			D	ATE O	F BIRTH	'	,	\GE	GENDER	
L ADDDESS.	- CIRCLI CITY CI	ATE ZID									OT DUO	i i			_			
NORIS ADDRESS:	: STREET, CITY, ST.	ATE, ZIP								CONTA	CT PHO	NE - IN	CLUDE AREA C	ODE I				
O INJURIES	RIES INJURED EMS AGENCY (NAME)			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED					DOT-COMPLIANT				IN AIR BAG USAGE EJECTION TRAPPED					
0N	BY								HELME			1						
OL CLASS	OPERATOR L	ICENSE NUMBER	OFFENSE CHARGED LOCAL OFF				OFFENSE DESCRIPTION						CITATION NUMBER					
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		DHOL / DRUG SUSPI			ONDITION	STATUS	ALCOHO TYPE		T ALUE		DRUG T	EST(S) RESULT	SELECT UP TO 4	
			BY		=	LCOHOL MAI THER DRUG	RIJUANA					•					لـــالـــالـــ	
UNIT#	UNIT # NAME: LAST, FIRST, MIDDLE											F BIRTH	\	1	\GE	GENDER		
										ш	1 1					لــــــــــــــــــــــــــــــــــــــ		
ADDRESS:	: STREET, CITY, ST.	ATE, ZIP								CONTA	CT PHO	NE - IN	CLUDE AREA C	ODE				
O ▼ INJURIES	INJURED	EMS AGENCY (NAME)		INTUREDT	TAKEN TO	· MEDICAL FACILITY	(NAME CITY)	SAFF	TY EQUIPMENT			SF A	TING POSITION	N ATD RAG I	ISAGE E	JECTION	TRAPPED	
NON _	TAKEN BY	EIII AUEITOT (NAIVE)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPME USED				DOT-COMPLIANT MC HELMET				AIR BAG USAGE EJECTION TRAPPED							
OL STATE	OPERATOR L	ICENSE NUMBER	OFFENSE CHARGED LOCAL CODE			OFF	FENSE DESC	RIPTION				CITATION NUMBER						
OL CLASS	SS ENDORSEMENT RESTRICTION SELECT UP TO 3				ALCO	COHOL / DRUG SUSPECTED		C	ONDITION	ALCOHOL TEST			DRUG TEST(S)					
	SELECT UP TO 2	BY				RIJUANA			STATUS TYPE VALUE			ALUE	STATUS TYPE RESULT SELECT U			SELECT UP TO 4		
TNIII	JRIES	SEATING DOCUTION		AIR BAG	<u></u> 0⁻	THER DRUG OL CLAS	•		OL DESTRIC	TION(S)		• L	DISTRACT	TION	75	CT CTA	TUE	
1 - FATAL	JRIES	S SEATING POSITION 1-FRONT-LEFT SIDE 1-NOT DE						OL RESTRICTION(S) 1-ALCOHOL INTERLOCK DEVICE			DRIVER DISTRACTION 1-NOT DISTRACTED			N TEST STATUS 1 - NONE GIVEN				
	SERIOUS INJURY	2 FRONT MIDDLE						2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES			2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION			2 - TEST REFUSED				
3 - SUSPECTED 4 - POSSIBLE IN		VUK INJURY 2 FRONT DIGHT CIDE		YED SIDE 3 - CLASS C YED BOTH FRONT / SIDE 4 - REGULAR CLASS				4 - FARM WAIVER			DEVICE (TEXTING, TYPING DIALING)							
	A CECOND LEFT CIDE		5 - NOT APP	APPLICABLE (OHIO = D)				EXCEPT CLASS A	BUS	3 - TALKING ON HANDS-FRE								
INJURED	9 - DEPLOY 5 - SECOND - MIDDLE							EXCEPT CLASS A & CLASS B BUS	1			VICATION DEVI ON HAND-HEI			5 - TEST GIVEN, RESULTS UNKNOWN			
1 - NOT TRANSP	PORTED	6 - SECOND - RIGHT SIDE	-	I F A F Y A N					EXCEPT TRACTO	R-TRAILER		COMMUN	ICATION DEVI	ICE	ALCOH	OL TES	Т ТҮРЕ	
2 - EMS	(MOTODCVC) E CIDE CAD)		1 - NOT EJE						INTERMEDIATE RESTRICTIONS	LICENSE	CENSE 5 - OTHER ACTIVITY WITH. ELECTRONIC DEVICE			ΔN	AN 1 - NONE			
3 - POLICE	LICE 8-THIRD-MIDDLE 2-PARTIA		LY EJECTED M - MOTORCYCLE			9-	9 - LEARNER'S PERMIT			6 - PASSENGER			2 - BLOOD 3 - URINE					
9 - OTHER / UNK	10 CLEEDED CECTION		3-TOTALLY					RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY			7 - OTHER DISTRACTION INSIDE THE VEHICLE			3 - URINE 4 - BREATH				
	QUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER	4 - NOT APP			N - TANKER Q - MOTOR SCOOTER		11 -	LIMITED TO EMP	LOYMENT	8-	OTHER D	DISTRACTION O	UTSIDE !	5 - OTHER			
1 - NONE USED 2 - SHOULDER B	USED 11- FASSENGER IN OTHER TRAPPED ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, 1-NOT TRAPPED				R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTH S - SCHOOL BUS 13 - MECHANICAL D				VICES			UNKNOWN	DRUG TEST TYPE					
	- LAP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRI		2 - EXTRICA					(SPECIAL BRAKE CONTROLS, OR O	THER	ER CONDITION				1 - NONE 2 - BLOOD				
	5 - CHILD RESTRAINT SYSTEM – CARGO AREA		3 - FREED BY			X - TANKER / HAZMAT			ADAPTIVE DEVICE MILITARY VEHICE	1 - A		APPARENTLY NORMAL PHYSICAL IMPAIRMENT		_	3 - URINE			
FORWARD FA	FORWARD FACING 13 - TRAILING UNIT		NON-MECHANICAL MEANS				15 - MOTOR VEHICL			S WITHOUT 3 - EMOTIO			L IMPAIRMEN NAL (E.G., DEPRE	G., DEPRESSED,				
	REAR FACING (NON-TRAILING UNIT)							AIR BRAKES OUTSIDE MIRRO	ANGRY, I		ANGRY, DIS	Y, DISTURBED)		DRUG TEST RESULT(S)				
	7 - BOOSTER SEAT 15 - NON-MOTORIST						PROSTHETIC AID		4- ILLNESS 5- FELL ASLEEP, FAINTED,				1 - AMPHETAMINES 2 - BARBITURATES					
	8 - HELMET USED 99 - OTHER / UNKNOWN 9 - PROTECTIVE PADS USED						18 -	18 - OTHER			FATIGUED, ETC. 6- UNDER THE INFLUENCE			3 - BENZODIAZEPINES				
(ELBOW, KNE	(ELBOW, KNEES, ETC.)										OF MEDICATIONS / DRUGS /ALCOHOL			GS '	4 - CANNABINOIDS 5 - COCAINE			
10 - REFLECTIVE 11 - LIGHTING - F													UNKNOWN			S / OPIOID	S	
/ BICYCLE ON	CYCLE ONLY														7 - OTHER			
99 - OTHER / UNK	CNUWN													1	B - NEGATI	VE RESUL	TS	