| OF PUBLIC SAFETY TRAFFIC CRASH | KEPORT *DENOTES MA | ANDATORY FIELD FOR SUPPL | EMENT REPORT | 2023- | · OOO1 | 0 1 1 3 | | | | | |
|--|---|--|---|--|---|--|--|--|--|--|--|
| PHOTOS TAKEN OH-2 OH-3 OH-1P OTHER | HIT/SKIP NUMBER OF UNITS UNIT IN ERROR | | | | | | | | | | |
| The second secon | Heath PD | (| 4507 | TOTAL CONTRACTOR OF THE CONTRA | | | | | | | |
| COUNTY* LOCALITY* LOCATION: CITY | CRASH DATE / TIME * CRASH SEVERITY 1 - FATAL | | | | | | | | | | |
| 4 5 1 2-VILLAGE HEATH | 09072023, 1421, 3 2-SERIOUS INJURY | | | | | | | | | | |
| ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | LOCATION ROAD NAME | | ROAD TYPE | 2 MINOR IN HIRV | | | | | | | |
| | HEBRON | | RD | 40,031 | | SUSPECTED | | | | | |
| ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST | REFERENCE ROAD NAME (ROAD, | MILEPOST, HOUSE #) | ROAD TYPE | l | | 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE | | | | | |
| | 753 | | | -82,437 | | ONLY | | | | | |
| 1 - INTERSECTION FROM REFERENCE 1 - NORTH IR - | ROUTE TYPE INTERSTATE ROUTE(TP) AL | ROAD TYPE - ALLEY HW- HIGHWAY | RD - ROAD | l — | INTERSECTION RELAT RSECTION OR ON APPR | 5-67-01 | | | | | |
| 3 - HOUSE # 3 - EAST | PI | - AVENUE LA - LANE - BOULEVARD MP - MILEPOST | SQ - SQUARE ST - STREET | 4 | | | | | | | |
| DISTANCE DISTANCE CR. | NUMBERED COUNTY ROUTE CR | - CIRCLE OV - OVAL | TE - TERRACE | WITHIN INTERCHANGE AREA NUMBER OF APPROACHES ROADWAY | | | | | | | |
| FROM REFERENCE UNIT OF MEASURE 1 - MILES TR - | NUMBERED TOWNSHIP DR | TL - TRAIL WA - WAY | | | | | | | | | |
| 1 6 1 2 2-FEET 3-YARDS | ROUTE | - HEIGHTS PL - PLACE | | ROADWAY DIVIDED | | | | | | | |
| LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVER | | NER OF CRASH COLLISION/IN COLLISION 4 - REAR-TO-REA | | DIRECTION OF TRAVE | ion savient | IAN TYPE | | | | | |
| 0 1 2 - ON SHOULDER 10 - DRIVEWAY | ALLEY ACCESS 2 BET | WEEN 5-BACKING | IX. | 2 1-NORTH | 4 (<4 FE | | | | | | |
| 4 - ON ROADSIDE 12-SHARED US | RADE CROSSING VEH | ICLES IN 6-ANGLE NSPORT 7-SIDESWIPE, S | AME DIRECTION | 3 - EAST 4 - WEST | 2 - DIVIDEI | O FLUSH MEDIAN ET) | | | | | |
| 5-ON GORE TRAILS 6-OUTSIDE TRAFFIC WAY 13-BIKE LANE | 2 - REAI 3 - HEAI | | | 3 - DIVIDED, DEPRESSED MEDIA 4 - DIVIDED, RAISED MEDIAN | | | | | | | |
| 7 - ON RAMP 14-TOLL BOOT | H | J. OTT. STATE | | (ANY TYPE) 9 - OTHER/UNKNOWN | | | | | | | |
| 0- OT I KAMI | WORK ZONE TYPE | LOCATION OF CRASH IN | WORK ZONE | CONTOUR | CONDITIONS | SURFACE | | | | | |
| | LANE CLOSURE | 1 - BEFORE THE 1 | ST WORK ZONE | 1 | 1 | 2 | | | | | |
|] | LANE SHIFT/CROSSOVER WORK ON SHOULDER | WARNING SIGI 2 - ADVANCE WAR | | 1 - STRAIGHT LEVEL | 1 - DRY | 1 - CONCRETE | | | | | |
| LAW ENFORCEMENT PRESENT | OR MEDIAN INTERMITTENT OR MOVING WORK | 3 - TRANSITION AI | | Z-SIRAIGHI GRADE Z-WEI | | | | | | | |
| | OTHER | 5 - TERMINATION | | 3 - CURVE LEVEL 4 - CURVE GRADE | 3 - SNOW 4 - ICE | BITUMINOUS, ASPHALT | | | | | |
| LIGHT CONDITION | WEATH | ER | | 9 - OTHER/UNKNOWN | 5 - SAND, MUD, DIRT, | 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, | | | | | |
| 1 - DAYLIGHT 2 - DAWN/DUSK | 1 - CLEAR 02 2 - CLOUDY | 6 - SNOW 7 - SEVERE CROSSWINDS | ROSSWINDS 01L, GRAVEL 6 - WATER (STANDING | | | | | | | | |
| 3 - DARK – LIGHTED ROADWAY | 3 - FOG, SMOG, SMOKE | 8 - BLOWING SAND, SOIL, D | SAND, SOIL, DIRT, SNOW | | | 5 - DIRT 9 - OTHER/UNKNOWN | | | | | |
| 4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING | 4 - RAIN 5 - SLEET, HAIL | 9 - FREEZING RAIN OR FRE 99 - OTHER / UNKNOWN | EZING DRIZZLE | | 7 - SLUSH 9 - OTHER/UNKNOWN | SA TOPE ENDOPONE SEATING-SACTOR | | | | | |
| 9 - OTHER/ UNKNOWN | | | | | | | | | | | |
| NARRATIVE Unit 1 was traveling south or | n CD 70 in the right | l band | | | | Indicate the north direction with | | | | | |
| lane. Unit 2 was stopped at t | _ | The I | | | | an "N" on the compass diagram. | | | | | |
| southbound in the right hand | _ | | | ScenePD ™ - Evaluation Edition Evaluation Edition | | | | | | | |
| ended Unit 2. | | | Evaluation Edition | n Edition | N Evaluation Ed | dition | | | | | |
| | | | Evaluation | Evaluation Evaluation Edition | Evaluation Edition Edition | | | | | | |
| | | Evaluation Edition | Evaluation Edition | | Evaluation Edition | dition | | | | | |
| | | | Evaluation Exiting | Evaluation Edition | Ædition | | | | | | |
| | | Evaluation Edition | | Evaluation | Evaluation Edition Edition SR 79 | dition | | | | | |
| | | Evaluation Edition | Evaluation Edition | Evaluation Edition | | | | | | | |
| | | | | Evaluation Edition | Evaluation Edition Edition | dition | | | | | |
| | n Zdition | Evaluation E | Hilian | | | | | | | | |
| | | Evaluatio | Evaluation Evaluation Edition | Evaluation Edition Not To Scale | | | | | | | |
| | | Evaluation Edition | Evaluation Edition | Trancite (877) 908-4777 | , voi 10 Goale | | | | | | |
| CRASH REPORTED DATE / TIME | DISPATCH DATE / TIME | ARRIVAL DATE / TI | ME | SCENE CLEARED | - 10-10-00 10-11 11 10-00 11 1 1 1 1 1 1 | REPORT TAKEN BY | | | | | |
| 09072023 1421 090 | 72023 1424 | 09072023 | 14330 | 9072023 | 1507 | POLICE AGENCY MOTORIST | | | | | |
| TOTAL TIME OTHER TOTA ROADWAY CLOSED INVESTIGATION TIME MINUT | | | CHECKED BY OFFI | CER'S NAME* | | SUPPLEMENT | | | | | |
| The state of the s | Kisch | DGE NUMBER* | CHECKED | BY OFFICER'S BADGE | | (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS) | | | | | |
| 2 0 6 6 | 0 7 - | 1 5 3 | 0 7 | - 1 | 4 7 | | | | | | |

99 - OTHER / LINKNOWN

3

30 - GUARDRAIL FACE

■ FIRST HARMFUL EVENT

OR SUPPORT

■ MOST HARMFUL EVENT

36 - MEDIAN OTHER BARRIER

1

49 - FIRE HYDRANT

| OHIO DEI OF PUBLI SAFETY - SERV | OHIO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST | | | | | | 2 0 2 3 - 0 0 0 1 0 1 1 3 | | | | | | | | | |
|---------------------------------------|---|--|--|------------------------------------|--|---|--|--|--|---|---------------------------------------|---|-----------------------|---|----------------|--|
| UNIT # | UNIT # NAME: LAST, FIRST, MIDDLE NOAH, EMILY NICHOLE | | | | | | | DATE OF BIRTH | | | AGE | GENDER | | | | |
| 01 | | | | | | 0 1 / 0 9 / 2 0 0 | | | | _1 | . 8 | F | | | | |
| ₽ | STREET, CITY, ST | | | | | | | | CONTA | CT PHO | NE - INCLUDE AREA | CODE | | | | |
| <u> </u> | | VARK, OH 43055 | | I | | | | Ta.===v=auva.=== | | | | | <u> </u> | | | |
| INJURIES | INJURED TAKEN BY INJUR | | | INJUREDT | JURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED O .4 . | | | | T-COMPLIA | | ON AIR BAG | USAGE | EJECTION 1 | TRAPPED 1 | | |
| OL STATE | | | | SE CHAF | | | | | | | | CITATION NUMBER | | | | |
| о н | | | | | 333.03 CODE 3333.03 | | | | | | 0907 | 090723001 | | | | |
| OL CLASS | ENDORSEMENT SELECT UP TO 2 | | | | VER ALCOHOL / DRUG SUSPECTED | | | CONDITION | ALCOHOL TEST STATUS TYPE VALUE | | OL TEST VALUE | STATUS | | DRUG TEST(S) TYPE RESULT SELECT UP TO 4 | | |
| . 4 | | | BY | 1 | = | LCOHOL MAI | RIJUANA | 1 | 1 | 1 | | 1 | 1 | | | |
| UNIT # | NAME: LAST, F | FIRST, MIDDLE | | | υ, | INER DRUG | | | | | DATE OF BIRTH | الــــــا | | AGE | GENDER | |
| 0 2 | | STEVEN ANDREW | | | | | | | 0 3 | |) 5 | 9 6 8 | 5 5 | | М | |
| ADDRESS: | STREET, CITY, ST | | | | | | | | CONTACT PHONE - INCLUDE AREA CODE | | | | | | | |
| 12 1/2 | BEACON L | IGHT LN BUCKEYE L | AKE, OF | 1 4300 | 8 | | | | | | | | | | | |
| INJURIES | INJURED TAKEN | EMS AGENCY (NAME) | | INJURED T | | | | SAFETY EQUIPMENT | L DO. | | COMPLIANT SEATING POSITION | | USAGE | EJECTION | TRAPPED | |
| <u>5</u> | ВУ | | | | | | | 0 4 | MC HELMET 0 1 | | | 11 | 1 1 1 | | | |
| OL STATE | OPERATOR L | ICENSE NUMBER | | OFFENSE CHARGED LOCAL CODE | | | OFFENSE DESC | CRIPTION | | | CITAT | CITATION NUMBER | | | | |
| O H OL CLASS | ENDORSEMENT | RESTRICTION SELECT | UPTO 3 DRIV | VED | R ALCOHOL / DRUG SUSPECTED | | | CONDITION | ALCOHOL TEST | | | | DRUG TEST(S) | | | |
| UL CLASS | SELECT UP TO 2 | RESTRICTION SELECT | | TRACTED | | _ | RIJUANA | | STATUS | | VALUE | STATUS | TYPE | | SELECT UP TO 4 | |
| 4 | | | | 1 | 0 | THER DRUG | | 1 | 1 | 1 | | 1 | 1 | الـــالــ | لــالــالــ | |
| UNIT # | NAME: LAST, F | FIRST, MIDDLE | | | | | | | | | DATE OF BIRTH | | | AGE | GENDER | |
| 40000500 | | | | | | | | | | | | | | | | |
| SIND ADDRESS: | STREET, CITY, ST | ATE, ZIP | | | | | | | CONTA | ACT PHO | INE - INCLUDE AREA | CODE | | | | |
| ADDRESS: | INJURED | EMS AGENCY (NAME) | | INJUREDT | TAKEN TO | : MEDICAL FACILITY | (NAME, CITY) | SAFETY EQUIPMENT | | | SEATING POSITI | ON AIR BAG | USAGE | EJECTION | TRAPPED | |
| NON | TAKEN BY TE OPERATOR LICENSE NUMBER | | | OFFENSE CHARGED LOCAL OFFENSE DESC | | | DOT-COMPLIANT MC HELMET | | | | | 1 1 | | | | |
| OL STATE | | | | | | | OFFENSE DESC | RIPTION | ı | ' | | CITATION NUMBER | | | | |
| | | | | L, | | | | | | N. AAII | | | B B U B | / 0 | | |
| ≥ OL CLASS | ENDORSEMENT SELECT UP TO 2 | RESTRICTION SELECT | | TRACTED | | DHOL / DRUG SUSPI LCOHOL MAI | ECTED RIJUANA | CONDITION | STATUS | | VALUE | STATUS | TYPE | RESULT | SELECT UP TO 4 | |
| | | | | | □ ∘ | THER DRUG | | | | | • | | | السال | | |
| INJU 1 - FATAL | JRIES | SEATING POSITION | A 1 - NOT DEP | IR BAG | | OL CLASS 1 - CLASS A | s | OL RESTRIC | Control of the Control of the Control | SECTION DESCRIPTION | RIVER DISTRACTED | | 1 - NONE | EST STA | TUS | |
| | SERIOUS INJURY | (MOTORCYCLE DRIVER) | 2 - DEPLOYE | | | | 2 - CDL INTRASTAT | | | MANUALLY OPERATI | NG AN | 2 - TEST REFUSED | | | | |
| | - SUSPECTED MINOR INJURY 2 - FRONT - MIDDLE 3 - DEPLOYI | | ED SIDE 3 - CLASS C ED BOTH FRONT / SIDE 4 - REGULAR CLASS | | | 3 - CORRECTIVE LE 4 - FARM WAIVER | ENSES | | ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING) | | | 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE | | | | |
| | 4 - POSSIBLE INJURY 3 ROUT - RIGHT SIDE 4 - DEPLOYI 5 - NO APPARENT INJURY 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - NOT APP | | LICABLE (OHIO = D) 5- | | | 5 - EXCEPT CLASS | A BUS | 3 - | 3 - TALKING ON HANDS-FREE | | | 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS | | | | |
| INJURED | TAKEN BY | 5 - SECOND - MIDDLE | 9 - DEPLOYN | MENT UNKNO | WN | 5 - M/C MOPED ONLY 6 - NO VALID OL | | 6 - EXCEPT CLASS & CLASS B BUS | | 4 - | COMMUNICATION DE TALKING ON HAND-H | 1102 | UNKN | | ULIS | |
| 1 - NOT TRANSP /TREATED A | | 6 - SECOND – RIGHT SIDE 7 - THIRD – LEFT SIDE | EĮ. | ECTION | | OL ENDORSE | MENT | 7 - EXCEPT TRACTO | | | COMMUNICATION DE | | ALCO | HOL TES | T TYPE | |
| 2 - EMS | 0 TUIDD MIDDLE | | CTED H - HAZMAT RESTRICTI | | | RESTRICTIONS | VS ELECTRONIC D | | | | | | | | | |
| 3 - POLICE 9 - OTHER / UNK | 3-POLICE 2-PARTIAL 9-OTHER/UNKNOWN 9-THIRD-RIGHT SIDE 3-TOTALLY | | DECT | | | 9 - LEARNER'S PER RESTRICTIONS | RMIT | | 7 - OTHER DISTRACTION | | | 3 - URINE | | | | |
| SAFFTY F | 10 - SLEEPER SECTION OF TRUCK CAB 4 - NOT APP | | LICABLE N-TANKER | | | 10 - LIMITED TO DAY | | | | | 4 - BREATH DUTSIDE 5 - OTHER | | | | | |
| 1 - NONE USED | | 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA | TF | RAPPED | | Q - MOTOR SCOOTER R - THREE-WHEEL MC | TORCYCLE | 12 - LIMITED - OTHE | | | THE VEHICLE OTHER / UNKNOWN | | DRL | JG TEST | TYPE | |
| 2 - SHOULDER E 3 - LAP BELT ON | BELT ONLY USED VLY USED | (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) | 1 - NOT TRAF | | | S - SCHOOL BUS | TDAILEDO | 13 - MECHANICAL D (SPECIAL BRAK | ES, HAND | | | | 1 - NONE | | | |
| 4 - SHOULDER 8 | 4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECH | | MECHAN | NICAL MEANS Y - TANKER / HAZMAT | | | CONTROLS, OR C ADAPTIVE DEVI | | | | 2 - BL00D 3 - URINE | | | | | |
| FORWARD FA | 5 - CHILD RESTRAINT SYSTEM – FORWARD FACING 13 - TRAILING UNIT NON- | | | CHANICAL MEANS | | | 14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT | | | PHYSICAL IMPAIRME EMOTIONAL (E.G., DEP | | 4 - OTHER | | | | |
| 6 - CHILD REST | RAINT SYSTEM – G | 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) | | | | | | AIR BRAKES | | | ANGRY, DISTURBED) | | | | SULT(S) | |
| 7 - BOOSTER SE | | 15 - NON-MOTORIST 99 - OTHER / UNKNOWN | | | | | | 16 - OUTSIDE MIRRO 17 - PROSTHETIC AI | | | ILLNESS FELL ASLEEP, FAINTE | | | HETAMINES HTURATES | | |
| 8 - HELMET US 9 - PROTECTIVE | PADS USED | //- OTHER / DIVINGWIN | | | | | | 18 - OTHER | | | FATIGUED, ETC. UNDER THE INFLUEN | ICE. | 3 - BENZ | ODIAZEPIN | ES | |
| (ELBOW, KNI 10 - REFLECTIVE | | | | | | | | | | | OF MEDICATIONS / DF / ALCOHOL | RUGS | 4 - CANN 5 - COCAI | IABINOIDS INE | | |
| 11 - LIGHTING - I | PEDESTRIAN | | | | | | | | | | OTHER / UNKNOWN | | 6 - OPIAT | TES / OPIOID |)S | |
| 99 - OTHER / UNK | | | | | | | | | | | | | 7 - OTHER | R ITIVE RESU | LTS | |