OF PUBLIC SAFETY TRAFFIC CRASH	KEPORT *DENOTES MA	ANDATORY FIELD FOR SUPP	LEMENT REPORT	2023-	OCAL REPORT NUMBER	-					
PHOTOS TAKEN OH-2 OH-3 OH-1P OTHER	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR										
SECONDARY CRASH PRIVATE PROPERTY	REPORTING AGENCY NAME* Heath PD		1 - SOLVED 0 2 0 1 98 - ANIMAL 99 - UNKNOWN								
COUNTY* LOCALITY* 1 - CITY 4 5 1 2 - VILLAGE HFATH	CRASH DATE / TIME * CRASH SEVERITY										
3 - TOWNSHIP	10182023 1612 2 - SERIOUS INJURY SUSPECTED										
2-SOUTH	LOCATION ROAD NAME		ROAD TYPE	STANDARD AND ALLEGAN TARE	8	- MINOR INJURY					
	30TH REFERENCE ROAD NAME (ROAD,	MII EDOST HOUSE #1	ROAD TYPE	4,0,028		SUSPECTED - INJURY POSSIBLE					
2 - SOUTH 3 - EAST	895 Hebron Rd	, WILEPUS I, HUUSE #)	ROADITE	-82 _{.4} 4 _{.4} 3		- PROPERTY DAMAGE					
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE			INTERSECTION RELATE	ONLY					
1 - INTERSECTION FROM REFERENCE 1 - NORTH IR	- INTERSTATE ROUTE(TP) AL	- ALLEY HW - HIGHWAY		l ==	RSECTION OR ON APPROA	-51					
3- HOUSE # 3- EAST	PI	- AVENUE LA - LANE BOULEVARD MP - MILEPOS	SQ - SQUARE T ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
DISTANCE DISTANCE CR	NUMBERED COUNTY ROUTE I	- CIRCLE OV - OVAL	TE - TERRACE								
	NUMBERED TOWNSHIP	- COURT PK - PARKWAY ! - DRIVE PI - PIKE	TL - TRAIL WA - WAY	ROADWAY DIVIDED							
9 2 2 2 FEET 3 - YARDS	HE	- HEIGHTS PL - PLACE		L ROADWAY DIN							
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVE		INER OF CRASH COLLISION/I		DIRECTION OF TRAVE	National Particular	N TYPE					
0 1 2-ON SHOULDER 10-DRIVEWAY	VALLEY ACCESS 2 BET	WEEN 5 - BACKING	-DIX	1 - NORTH , 2 - SOUTH	(<4 FEET						
3 - IN MEDIAN 11 - RAILWAY 0 4 - ON ROADSIDE 12 - SHARED U	RADE CROSSING VEH	HICLES IN 6-ANGLE ANSPORT 7-SIDESWIPE	. SAME DIRECTION	3 - EAST	2 - DIVIDED F (≥4 FEET	IDED FLUSH MEDIAN FEET)					
5 - ON GORE TRAILS 6 - DUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REA		, OPPOSITE DIRECTION	4 - WEST	4 - WEST 3 - DIVIDED, DEPRESSED MEI 4 - DIVIDED, RAISED MEDIAN						
7 - ON RAMP 14-TOLL BOOT	н	D-ON 9-OTHER/UN	KNOWN		(ANY TYPE) 9 - OTHER/UNKNOWN						
8-OFF RAMP 99-OTHER/UI	VKNOWN										
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	1 - BEFORE THE	N WORK ZONE 1ST WORK ZONE	CONTOUR 1	CONDITIONS 1	SURFACE 2					
WORKERS PRESENT 2-	LANE SHIFT/CROSSOVER	WARNING SI 2 - ADVANCE WA		1 - STRAIGHT LEVEL	A	1 - CONCRETE					
LAW ENFORCEMENT PRESENT	WORK ON SHOULDER OR MEDIAN	3-TRANSITION	AREA	2 - STRAIGHT GRADE	2-WET	2 - BLACKTOP,					
	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AR 5 - TERMINATIO		A 3 - CURVE LEVEL 3 - SNOW							
LIGHT CONDITION	WEATH	FR		4 - CURVE GRADE	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK					
1 - DAYLIGHT	1 - CLEAR	6 - SNOW		9 - OTHER/UNKNOWN	OIL, GRAVEL	4 - SLAG, GRAVEL, STONE					
1 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	2 - CLOUDY 3 - FOG, SMOG, SMOKE	7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL,			6 - WATER (STANDING, MOVING)						
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN	9 - FREEZING RAIN OR FR			7 - SLUSH	9 - OTHER/UNKNOWN					
9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN						
NARRATIVE		_			M	Indicate the north					
Unit 2 was stopped at the lig		turn				direction with an "N" on the					
right onto SR 79. Unit 1 was				ScenePD ™ - Evaluation Edition	l l v	compass diagram.					
thought the light turned gre	en and rear ended		Evaluation Evaluation Edition	Evaluation Edition n Edition							
		Evaluation Edit	ilon	S. 30th St Evaluation	Evaluation Edition Evaluation Edition	n					
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		Evaluation Edition	n — —								
			Evaluation Edition	Evaluation Evaluation Edition n Edition	Edition	.—					
		Evaluation Edit		Trancite (877) 908-4777							
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME REPORT											
		10182023		0182023	1646	POLICE AGENCY MOTORIST					
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUT			CHECKED BY OFF.	CER'S NAME*		SUPPLEMENT					
	OFFICER'S BA	DGE NUMBER*	CHECKED	BY OFFICER'S BADGE I		(CORRECTION OF ADDITION TO AN EXISTING REPORT SENT TO ODPS)					
2 0 5 4	0 7 -	1 5 3	0 7	- 1	4 7						

■ FIRST HARMFUL EVENT

1

■ MOST HARMFUL EVENT

OHIO DEI OF PUBLI SAFETY - SERV	OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST					2 0 2 3 - 0 0 0 1 1 6 7 0												
UNIT #									D	ATE OF	BIRTH		P	\GE	GENDER			
01	Boyer, Drew B						0 7 / 0 8 / 2 0 0 4 1 9 M											
	CONTACT PHONE - INCLUDE AREA CODE 120 County Road 10 Thornville, OH 43076																	
	,	EMS AGENCY (NAME)	430/6	Inilibent	AVENTO	MEDICAL FACILITY	(NAME CITY)	SAFETY	EQUIPMENT			SEATI	NG POSITION	N AIR BAG	HEACE E	JECTION	TRAPPED	
NON 5	TAKEN BY			INJURED	USED					T-COMPLIA	NT	1	1 AIR BAG	USAGE E	1	. 1		
OL STATE				E CHAF								CITAT	CITATION NUMBER					
INJURIES OL STATE O H				333.0	333.03 CODE 3333.0			03					101823001					
OL CLASS	ENDORSEMENT SELECT UP TO 2			VER ALCOHOL / DRUG SUSPECTED			CON	DITION	ALCOHOL TEST STATUS TYPE VALUE				DRUG TEST(S) STATUS TYPE RESULT SELECT					
. 4 .			ВУ	1	=	LCOHOL MAF THER DRUG	RIJUANA	1		.1 .	.1 .			1	1			
UNIT #	NAME: LAST, F	FIRST, MIDDLE			- J OTHER DRUG					ш	ATE OF	———∐ BIRTH			AGE	GENDER		
0 2	Nixon, Vi									1 2	/ 1	6	/ 2 0	0 0 2	2	0	F	
ADDRESS:	STREET, CITY, ST.									CONTA	CT PHO	NE - INCL	UDE AREA C	ODE				
387 He	ath RD He	ath, OH 43056																
INJURIES	JRIES INJURED EMS AGENCY (NAME) TAKEN			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED				DOT-COMPLIANT				N AIR BAG USAGE EJECTION TRAPPED						
5		ВУ					<u> </u>	0 4		HELME.				1 1				
ADDRESS: 387 He 387 He INJURIES OL STATE O H	UPERATOR L	TOR LICENSE NUMBER			OFFENSE CHARGED LOCAL CODE			OFFENSE DESCRIPTION				0			CITATION NUMBER			
OL CLASS	ENDORSEMENT	RESTRICTION SELECT			ALC	DHOL / DRUG SUSPI	LLL ECTED	CON	DITION		ALCOHO				DRUG T			
4	SELECT UP TO 2		BY	TRACTED	=		RIJUANA	1		STATUS		VA	LUE	_	TYPE 1	RESULI	SELECT UP TO 4	
	NAME	1			OTHER DRUG				1 1			1				AENDED		
UNIT#	# NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER									
ADDRESS:	DDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE									
ADDRESS:	,	•									1	1	1	1 1			1 1	
INJURIES					EQUIPMENT	D01	T-COMPLIA	SEATI	NG POSITIO	N AIR BAG	USAGE E	JECTION	TRAPPED					
	BY					USED	MC HE		HELME.			J L	_					
OL STATE	OPERATOR L	R LICENSE NUMBER			OFFENSE CHARGED LOCAL CODE			OFFE	NSE DESC	CRIPTION				CITATION NUMBER				
			UPTO 3 DRI	VFR	AI C	ALCOHOL / DRUG SUSPECTED		CONDITION		ALCOHOL TEST			DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4					
			DIS	TRACTED		RIJUANA			STATUS TYPE VALUE			LUE				SELECT UP TO 4		
					0	THER DRUG						• 📖						
INJU 1 - FATAL	IRIES	SEATING POSITION 1-FRONT-LEFT SIDE	1 - NOT DEP	IR BAG OL CLASS LOYED 1-CLASS A			OL RESTRICTION(S) 1-ALCOHOL INTERLOCK DEVICE			and the same	DRIVER DISTRACTION 1-NOT DISTRACTED			1 - NONE GIVEN				
	SERIOUS INJURY	Y (MOTORCYCLE DRIVER) 2 - DEPLOYE					2 - CDL INTRASTATE ONLY				2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION			2 - TEST REFUSED				
3 - SUSPECTED 4 - POSSIBLE IN		2 FRONT DICHT CIDE		ED SIDE 3 - CLASS C ED BOTH FRONT / SIDE 4 - REGULAR CLASS			3 - CORRECTIVE LENSES 4 - FARM WAIVER				DEVICE (TEXTING, TYPING, DIALING)			3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE				
5 - NO APPAREN	PARENT INJURY 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - NOT APP		E M/C MODED ONLY			5 - EXCEPT CLASS A BUS			3 -	3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE			4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS					
INJURED	5 - SECOND - MIDDLE 9 - DEPLOYMENT U 9 - DEPLOYMENT U			MENT UNKNO	6 - NO VALID OL & CLASS B BUS				4 - TALKING ON HAND-HE COR-TRAILER COMMUNICATION DEV				LD	LINKNOWN				
1 - NOT TRANSP /TREATED A	PAT SCENE 7-THIRD - LEFT SIDE		7 - EXCEPT TRAC OL ENDORSEMENT 8 - INTERMEDIAT				ALCOHOL TEST TYPE											
2 - EMS	(MOTORCYCLE SIDE CAR) 1 - NOT EJE 8 - THIRD - MIDDLE					RESTRICTIONS				ELECTRONIC DEVICE 6 - PASSENGER			1 - NONE 2 - BLOOD					
3 - POLICE 9 - OTHER / UNK	R/UNKNOWN 9-THIRD-RIGHT SIDE 3-TOTALLY					9 - LEARNER'S PERMIT RESTRICTIONS			7 -	7 - OTHER DISTRACTION			3 - URINE					
SAFETY E	10 - SLEEPER SECTION 4 - NOT APPLICABLE OF TRUCK CAB 4 - NOT APPLICABLE				N - TANKER 10 - LIMITED TO DAY			PLOYMENT 8 - OTHER DISTRACTION			4 - BREATH OUTSIDE 5 - OTHER							
1 - NONE USED	ISED 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA TRAPPED				R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTHI			R THE VEHICLE 9 - OTHER / LINKNOWN					DRUG TEST TYPE					
	ILDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOT TRAP) BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICAT		TED BY T - DOUBLE & TRIPLET RALLERS			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER			CONDITION			1 - NONE 2 - BLOOD						
	1 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARGO AREA 3			MECHANICAL MEANS 3 - FREED BY X - TANKER / HAZMAT				ADAPTIVE DEVI		ICES) 1 - APPARENTLY NORMA ICLES ONLY 2 - PHYSICAL IMPAIRME ES WITHOUT 3 - EMOTIONAL (E.G., DEP ANGRY, DISTURBED)		'LY NORMAL		2 - BLOOD 3 - URINE				
FORWARD FA	5 - CHILD RESTRAINT SYSTEM – 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR		NON-MECHANICAL MEANS				14 - MILITARY VEH 15 - MOTOR VEHICI		TOR VEHICLE			2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED,			4 - OTHER			
	REAR FACING (NON-TRAILING UNIT)							BRAKES ISIDE MIRRO					DRUG TEST RESULT(S)					
	- BOOSTER SEAT 15 - NON-MOTORIST - HELMET USED 99 - OTHER / UNKNOWN						17 - PROSTHETIC AID			5 - F	5 - FELL ASLEEP, FAINTED,			1 - AMPHETAMINES 2 - BARBITURATES				
9 - PROTECTIVE	- PROTECTIVE PADS USED							18 - OTHER			6- l	FATIGUED, ETC. 6- UNDER THE INFLUENCE 0F MEDICATIONS / DRUGS / ALCOHOL			3 - BENZODIAZEPINES			
	(ELBOW, KNEES, ETC.) REFLECTIVE CLOTHING														4 - CANNABINOIDS 5 - COCAINE			
	IGHTING – PEDESTRIAN BICYCLE ONLY										9- (9- OTHER / UNKNOWN			6 - OPIATES / OPIOIDS 7 - OTHER			
	THER / UNKNOWN														8 - NEGATIVE RESULTS			