OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*									
□ 0H-2 ▼ 0H-3	2023-	0001	2973							
PHOTOS TAKEN OH-1P OTHER	REPORTING AGENCY NAME*	NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR							
SECONDARY CRASH PRIVATE PROPERT	Heath PD	507	1 - SOLVED	0 2	98 - ANIMAL 99 - UNKNOWN					
COUNTY* LOCALITY* LOCATION:		CRASH DATE / TIME* CRASH SEVERITY								
4 5 1 2 - VILLAGE HEAT		1,1222023, 1024, 5 1- FATAL 2 - SERIOUS INJURY								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH	ROAD TYPE	LATITUDE DEC	IMAL DEGREES	SUSPECTED						
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST				4,0,031	2 3 4	3 - MINOR INJURY SUSPECTED				
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH	REFERENCE ROAD NAME (ROAD,	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES	4 - INJURY POSSIBLE				
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	OBERLIN		D R	-82,438	2 9 3	5 - PROPERTY DAMAGE ONLY				
REFERENCE POINT DIRECTION ESPAN REFERENCE	ROUTE TYPE	ROAD TYPE		1	NTERSECTION RELAT	ED				
1-INTERSECTION 1-NORTH II			- ROAD - SQUARE	WITHIN INTERSECTION OR ON APPROACH						
3-HOUSE # L 3-EAST	O-TEDERAL OU ROUTE		- STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES						
	R - NUMBERED COUNTY ROUTE CR		- TERRACE - TRAIL	ROADWAY						
1-MILES T	D MUMPEDED TOWNSHIP		A - WAY	ROADWAY DIVIDED						
1 5 2 2-FEET 3-YARDS	HE	- HEIGHTS PL - PLACE			1					
LOCATION OF FIRST HARMFUL EVI		NER OF CRASH COLLISION/IMPAC COLLISION 4 - REAR-TO-REAR	Т	DIRECTION OF TRAVEL	1 National (1990)	AN TYPE				
0 1 2-ON SHOULDER 10-DRIVEW.	AY/ALLEY ACCESS 2 BET	WEEN 5-BACKING MOTOR		1 - NORTH 1 2 - SOUTH	(<4 FEE					
\$17 (Mark Antiquary of Sale) (C.19) 44950 (Sale)	GRADE CROSSING VEH	ICLES IN 6-ANGLE VSPORT 7-SIDESWIPE, SAME	DIRECTION	3 - EAST		- DIVIDED FLUSH MEDIAN (≥4 FEET)				
5 - ON GORE TRAILS	2 - REAI	R-END 8 - SIDESWIPE, OPPOS	ITE DIRECTION	4 - WEST	, DEPRESSED MEDIAN					
6 - OUTSIDE TRAFFIC WAY 13 - BIRE LAI 7 - ON RAMP 14 - TOLL BO	D.: IILA	O-ON 9 - OTHER / UNKNOW	N	4 - DIVIDED, RAISED MEDIAI (ANY TYPE)						
8-OFF RAMP 99-OTHER/	JNKNOWN				9 - OTHER/L	NKNOWN				
WORK ZONE RELATED	WORK ZONE TYPE L-LANE CLOSURE	LOCATION OF CRASH IN WOR 1 - BEFORE THE 1ST W		CONTOUR	CONDITIONS	SURFACE				
T WORKERS PRESENT	2 - LANE SHIFT/CROSSOVER	WARNING SIGN								
LAW ENFORCEMENT PRESENT	3 - WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNING 3 - TRANSITION AREA	3 AREA	1 - STRAIGHT LEVEL						
1 1	- INTERMITTENT OR MOVING WORK		۸	3 - CURVE LEVEL	2 - BLACKTOP, BITUMINOUS, ASPHALT					
ACTIVE SCHOOL ZONE	5 - OTHER	5 - TERMINATION ARE	А	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK				
LIGHT CONDITION 1 - Daylight	1 - CLEAR	ER 6 - SNOW		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, 01L, GRAVEL 4 - SLAG, GRAVE						
1 2 - DAWN/DUSK	.04 2-CLOUDY	7 - SEVERE CROSSWINDS		6 - WATER (STANDING, 5 - DIRT						
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	SNOW IG DRIZZLE	MOVING) 9-OTHER/UNK								
5 - DARK – UNKNOWN ROADWAY LIGHTIN	4 - RAIN IG 5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN					
9-OTHER/UNKNOWN										
NARRATIVE Unit 1 was traveling north	CD 70 in the left					Indicate the north direction with				
straight lane. Unit 2 was fo	•	. 4				an "N" on the compass diagram.				
stopped for a red light at O	•					· -				
stopped for a red light at o			4h	weight Etg.						
Stop and Struck the real of			OOVER RO.	\$13 TE						
				/\\/	[n]					
			\]//							
Not To Scale										
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME REPORT TAKEN BY										
11222023 1024 11	222023 1027	11222023 10	0 4 0 1	1222023	1118	POLICE AGENCY MOTORIST				
TOTAL TIME OTHER TOTAL OFFICER'S NAME* CHECKED BY OFFICER'S NAME*										
MIN		SUPPLEMENT CORRECTION OF ADDITION TO BY OFFICER'S BADGE NUMBER*								
0 3 8 3 8	O 7 -	1 4 5		- 1	4 7	provide can in provide box (AMIV) 12-14 (A)				

OHIO DEP OF PUBLIC SAFETY - SERVICE	OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST					2 0 2 3 - 0 0 0 1 2 9 7 3										
UNIT #	NAME: LAST, F	FIRST, MIDDLE	MIDDLE						D	ATE OF BIRTH		\overline{T}	AGE	GENDER		
01	WILLIS, KRISTA DAWN							0 9 / 0 2 / 1 9 6 3 6 0 F								
2	ADDRESS: STREET, CITY, STATE, ZIP 1293 GRANVILLE RD NEWARK, OH 43055															
INJURIES		·	U33	INTURED	TAKENTO	: MEDICAL FACILITY	(NAME OIT)	SAFETY EQUIPMENT			SEATING POSITION	ON ATD DA	G USAGE	EJECTION	TDADDED	
NOT S	TAKEN BY					. WEDICAL FACILITY	(NAME, GITY)	USED 0 4		-COMPLIA	ANT	1		1	TRAPPED 1	
OL STATE		R LICENSE NUMBER OFFENSE CHAI			SE CHAI	RGED	LOCAL	OFFENSE DESC				CITATION NUMBER			<u> </u>	
о н		OT ENSE OF					CODE					Cannada Cann				
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER TRACTED	_	OHOL / DRUG SUSPE		CONDITION	STATUS		VALUE	STATUS		TEST(S)	SELECT UP TO 4	
. 4			ВУ		=	LCOHOL MAF THER DRUG	RIJUANA	1 .	1 .	1 .		. 1	1	ļ. "		
UNIT #	NAME: LAST, F					THER DROG					ATE OF BIRTH		J	AGE	GENDER	
0 2	JACKS, TO	OSHA N							0 1	,/ ,0	5 / 1	9 9	о з	3 3	F	
ADDRESS:	STREET, CITY, ST								CONTACT PHONE - INCLUDE AREA CODE							
491 HE	NDERSON	AV NEWARK, OH 43	055													
INJURIES	TAKEN	ED EMS AGENCY (NAME)		INJURED			USED	DOT-COMPLIANT		ANT			TRAPPED			
5	ВУ							0 4	MC HELMET 0			1 1 1			1	
OL STATE	OPERATOR L				OFFENSE CHARGED LOCAL CODE		OFFENSE DESC	RIPTION				TATION NUMBER 45112223001				
5	ENDORSEMENT	RESTRICTION SELECT UP TO 3 DRIV		VER	VER ALCOHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TES		DL TEST	DRUG TEST(S)					
	SELECT UP TO 2			TRACTED	_	_	RIJUANA		STATUS	TYPE	VALUE	STATUS		RESULT	SELECT UP TO 4	
4				1	0	THER DRUG		1	1	1	•	1	1	النال	لــالــالــ	
UNIT#	NAME: LAST, F	FIRST, MIDDLE								D	ATE OF BIRTH			AGE	GENDER	
4000500																
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP								CONTA	СТ РНО	NE - INCLUDE AREA	CODE				
5	INJURED	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT			SEATING POSITION	ON AIR BA	IG USAGE	EJECTION	TRAPPED	
NON	TAKEN BY				USED			DOT-COMPLIANT MC HELMET								
OL STATE	OPERATOR LICENSE NUMBER OF			OFFEN	OFFENSE CHARGED LOCAL OFFENSE DESC			RIPTION CI			CITA	CITATION NUMBER				
≥ OL CLASS	SELECT UP TO 2 DI		DIS	IVER TRACTED			CONDITION	STATUS TYPE VALUE S		STATUS	TATUS TYPE RESULT SELECT					
			ВУ	1		THER DRUG	NIJUANA	ļ. ,		ļ. ,	•				11 11 1	
INJU		SEATING POSITION		AIR BAG		OL CLASS	3	OL RESTRIC	TION(S)	DF	RIVER DISTRAC	TION	ī	EST STA		
1 - FATAL	SERIOUS INJURY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEF 2 - DEPLOY			1 - ALCOHOL INTERLOCK DEVICE 2 - CDL INTRASTATE ONLY			1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN		1 - NONE GIVEN 2 - TEST REFUSED					
3 - SUSPECTED		2 - FRONT - MIDDLE 3 - DEPLOYE					3 - CORRECTIVE LENSES			ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING,		ON 3 - TEST GIVEN, CONTAMINATED				
4 - POSSIBLE IN 5 - NO APPAREN		3 - FRONT – RIGHT SIDE 4 - SECOND – LEFT SIDE		ED BOTH FRONT / SIDE 4 - REGULAR CLASS (OHIO = D)			4 - FARM WAIVER 5 - EXCEPT CLASS A BUS			DIALING)		SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN				
	(MOTORCYCLE PASSENGER) 6. SECOND MIDDLE 9 - DEPLOYMENT UNKNO			NOWN 5 - M/C MOPED ONLY 6 - EXCEPT CLASS			A COMMUNICATION DEV				KEE					
1 - NOT TRANSPO	/ CECOND DIGHT CIDE					& CLASS B BUS 7 - EXCEPT TRACTO	4 - IALKING ON HAND-HELD TOD TRAILED COMMUNICATION DEVICE					TTVDE				
/TREATED AT 2 - EMS	SCENE					OL ENDORSEMENT H - HAZMAT RESTRICTIONS			LICENSE 5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE				AN 1-NONE			
3 - POLICE	8 - THIRD – MIDDLE 2 - PARTIALLY E			EJECTED M-MOTORCYCLE 9-LEAR			9 - LEARNER'S PER	ARNER'S PERMIT 6 - PASSENGE			2 - BLOOD					
9 - OTHER / UNK	10 CLEEDED CECTION						RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY			7 - OTHER DISTRACTION INSIDE THE VEHICLE		3 - URINE 4 - BREATH				
	EQUIPMENT 0- TRUCK CAB 4- NOT APPLICABLE 0- TRUCK CAB 11- PASSENGER IN OTHER			Q - MOTOR SCOOTER 11 - LIMITED TO EM		PLOYMENT 8 - OTHER DISTRACTION		OUTSIDE	UTSIDE 5-OTHER							
1 - NONE USED 2 - SHOULDER B	SED 11-PASSENGER IN UIHER TRAPPED ER BELT ONLY USED (NON-TRALILING UNIT, BUS, 1-NOTTRAPPED			R - THREE-WHEEL MOTORCYCLE 12 - LIMITED - OTHE			R 9-OTHER/UNKNOWN				DRUG TEST TYPE					
3 - LAP BELT ON	.AP BELT ONLY USED PICK-UP WITH CAP) 2 - EXT		2 - EXTRIC	S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS MECHANICAL MEANS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT X - TANKER / HAZMAT			(SPECIAL BRAK) CONTROLS, OR O	S, HAND			1 - NONE 2 - BLOOD					
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARGO AREA		3 - FREED I					ADAPTIVE DEVI	CES) 1 - APPARENTLY NORMAL			3 - URINE				
FORWARD FA	FORWARD FACING 13 - TRAILING UNIT 6 - CHILD RESTRAINT SYSTEM 14 - RIDING ON VEHICLE EXTERIOR		NON-ME				15 - MOTOR VEHICLE		S WITHOUT 3 - EMOTIONAL (E.G., DEPRES							
REAR FACING	REAR FACING (NON-TRAILING UNIT)						AIR BRAKES 16 - OUTSIDE MIRRO	R				DRUG TEST RESULT(S) 1-AMPHETAMINES				
7 - BOOSTER SE							17 - PROSTHETIC AID		5-F	5 - FELL ASLEEP, FAINTED,		2 - BARBITURATES				
9 - PROTECTIVE	9 - PROTECTIVE PADS USED						18 - OTHER		6-1	FATIGUED, ETC. 6- UNDER THE INFLUENCE		3 - BENZODIAZEPINES 4 - CANNABINOIDS				
	ELBOW, KNEES, ETC.) :EFLECTIVE CLOTHING									OF MEDICATIONS / DRUGS / ALCOHOL			5 - COCAINE			
11 - LIGHTING - F / BICYCLE ON	NG – PEDESTRIAN									9 - OTHER / UNKNOWN			6 - OPIATES / OPIOIDS 7 - OTHER			
99 - OTHER / UNK														n TIVE RESUL	.TS	