OFFICIAL CARETTE TRAFFIC CRASH F	LOCAL REPORT NUMBER*										
PHOTOS TAKEN OH-2 OH-3	2023-	0001	. 3 4 8 4								
OH-1P OTHER	REPORTING AGENCY NAME* Heath PD	NCIC* 4 5 0 7	HIT/SKIP 1 - SOLVED L	NUMBER OF UNITS 0 2	UNIT IN ERROR O 1 98 - ANIMAL 99 - UNKNOWN						
COUNTY* LOCALITY* 1 - CITY LOCATION: CITY,	CRASH DATE / TIME* CRASH SEVERITY										
4 5 1 2-VILLAGE HEATH	12062023	1335 5	☐ 2 - SERIOUS INJURY								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 2 3 - EAST 2 4 - WFST	LATITUDE DE	PRINCIPLE DESCRIPTION OF PRINCIPLE AND PRINC	SUSPECTED 3 - MINOR INJURY								
T IN EOT	30TH		ST		7 4 9	SUSPECTED					
2 - SOUTH	REFERENCE ROAD NAME (ROAD, I	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE		4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE					
	830			-82,444		ONLY					
REFERENCE POINT DIRECTION 1 - INTERSECTION 1 - NORTH IR -	ROUTE TYPE INTERSTATE ROUTE(TP) AL	ROAD TYPE - ALLEY HW- HIGHWAY	RD - ROAD	l —	INTERSECTION REL RSECTION OR ON AP	and the little of the least to					
3 2-MILE POST 1 2-SOUTH US -	SQ - SQUARE ST - STREET			LI							
4 - WEST SR -: DISTANCE DISTANCE CR -	TE - TERRACE	MILLININIE	RCHANGE AREA	NUMBER OF APPROACHES							
FROM REFERENCE UNIT OF MEASURE 1 - MILES TR - NUMBERED TOWNSHIP DR - DRIVE PI - PIKE WA - WAY											
1 7 5 2 2-FEET ROUTE HE - HEIGHTS PL - PLACE ROADWAY DIVIDED											
LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 9 - CROSSOVER		NER OF CRASH COLLISION/IMP/ COLLISION 4-REAR-TO-REAR	LCT	DIRECTION OF TRAVE	1800	EDIAN TYPE					
O 1 2-ON SHOULDER 10-DRIVEWAY/	ALLEY ACCESS 6 TWO	WEEN 5-BACKING MOTOR 5-BACKING		1 - NORTH 1 - DIVIDED FLUSH MEDIAN (<4 FEET)							
3 - IN MEDIAN 11-RAILWAY GF 4 - ON ROADSIDE 12-SHARED US	A CONTRACTOR AND	ICLES IN 6-ANGLE NSPORT 7-SIDESWIPE, SAN	1E DIRECTION	3 - EAST 2 - DIVIDED FLUSH MEDIAN (≥4 FEET)							
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAF 3 - HEAD	· · · · · · · · · · · · · · · · · · ·		3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN							
7 - ON RAMP 14-TOLL BOOTH (ANY TYPE) 8 - OFF RAMP 99-OTHER/UNKNOWN 9-OTHER/UNKNOWN											
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN W	ORK ZONE	CONTOUR	CONDITIONS	SURFACE					
 	ANE CLOSURE ANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST WARNING SIGN	WORK ZONE	1	1	2					
G LAW ENCODE MENT PRECENT 3-V	VORK ON SHOULDER	2 - ADVANCE WARNI 3 - TRANSITION ARE		1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRETE							
4-1	OR MEDIAN NTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA		2 - STRAIGHT GRADE 2 - WET 2 - BLACKTOP, BITUMINOUS, ASDIALIT, ASDIALIT, ASDIALIT,							
ACTIVE SCHOOL ZONE 5-0)THER	5 - TERMINATION AF	REA	4 - CURVE GRADE							
LIGHT CONDITION 1 - Daylight	WEATHE 1 - CLEAR	ER 6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIR OIL, GRAVEL	T, 4 - SLAG, GRAVEL, STONE					
1 2 - DAWN/DUSK	O1 2-CLOUDY	7 - SEVERE CROSSWINDS			6 - WATER (STANDI MOVING)	11 VIZMOVNI					
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	4 - RAIN	8 - BLOWING SAND, SOIL, DIR 9 - FREEZING RAIN OR FREEZ			7 - SLUSH	9 - OTHER/UNKNOWN					
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOW	N .					
NARRATIVE		Li i i	1 1			Indicate the north					
Unit 2 was traveling north on	S. 30th St in the le	eft			+	direction with an "N" on the					
lane. Unit 1 was pulling out o	•			ScenePD ™ - Evaluation Edition		compass diagram.					
travel north on S. 30th St. Un		Ev	Evaluation								
Unit 2 and was struck by Unit 2. Evaluation Edition Evaluation Edition											
		Evaluation Edition	Evaluation Isluation Edition	Evaluation Edition	z						
				Evaluation Evaluation	Evaluati Evaluation Edition Edition	on Edition					
		Evaluation Edition	Evaluation sluation Edition	e Edition	Evaluati	on Edition					
		Ur	it 1 Evaluation	Evaluation on	Evaluation Edition Edition						
		Evaluation Eduph	dition		Evaluation Edition	on Edition					
		Evaluation Edition	Evaluation	Evaluation Unit 2	curroff						
		Evaluation Edition	!	Evaluation	Evaluation Edition Edition Not To Scale	on Edition					
		Evaluation Edition	Evaluation aluation Edition	Evaluation Edition	, voi 10 Gca						
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	<u>.</u>	SCENE CLEARED	DATE/TIME	REPORT TAKEN BY					
12062023 1335 120	AND THE RESIDENCE AND			2062023	Society of Statistics	POLICE AGENCY					
TOTAL TIME OTHER TOTAL	. OFFICER'S NAME*	[0	HECKED BY OFFI	CER'S NAME*		MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINUTE	Risch OFFICER'S BAI		CHECKED CHECKED	BY OFFICER'S BADGE I	NUMBER*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)					
2 0 6 1	0 7 -	1 5 3	0 7	- 1	3 8	use comme so use recognismental, model (Aprillable - All-Openie), 700					

OHIO DEF OF PUBLI SMFETY - SERVI	OHIO DEPARTMENT OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST							2 0 2 3 - 0 0 0 1 3 4 8 4								
UNIT #								DATE OF BIRTH AGE GENDER								
01	PATEL, NIRMALA M							1 2 / 3 0 / 1 9 5 6 6 6 F								
₫	: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE							
3	HEBRON RD HEATH, OH 43056 ES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT									SEATING POSITION AIR BAG USAGE EJECTION TRAPPED						
5 5	TAKEN BY					; WEDICAL FACILITY	(NAME, GITY)	USED O 4			OMPLIANT		1 1		1 1	
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAR	RGED	LOCAL	OFFENSE DESC	RIPTION	I		CITA	CITATION NUMBER			
о н				331.2	2		CODE	331.22				120623001				
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED		OHOL / DRUG SUSPI		CONDITION	STATUS	ALCOHO TYPE	L TEST VALUE	STATUS		RESULT	SELECT UP TO 4	
4			ВУ	1		LCOHOL MAI THER DRUG	RIJUANA	1	1 ,	1	-	1	1		11 11 1	
UNIT #	NAME: LAST, FIRST, MIDDLE									D	ATE OF BIRTH			AGE	GENDER	
0 2	SMITH, A	USTIN WAYNE							0 5	_/ 1	3 / 2	0 0	2	2 1	M	
3	STREET, CITY, ST.								CONTA	CT PHO	NE - INCLUDE AREA	A CODE				
		RAZEYSBURG, OH 4	3822					T								
INJURIES 5	INJURED I TAKEN BY	EMS AGENCY (NAME)		INJURED.	USED					DOT-COMPLIANT SEATING POSITION MC HELMET 0 1			AIR BAG USAGE EJECTION TRAPPED 1 1 1			
OL STATE		ICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL			OFFENSE DESC				_	CITATION NUMBER			
он					CODE											
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	_	OHOL / DRUG SUSPI		CONDITION	STATUS	ALCOHO TYPE	L TEST VALUE	STATUS		RESULT	SELECT UP TO 4	
. 4	ļ		ВУ	1	=	LCOHOL MAI THER DRUG	RIJUANA	1 1	1	1		1	1			
UNIT #	NAME: LAST, F	FIRST, MIDDLE				THER BROO				D	ATE OF BIRTH			AGE	GENDER	
.												1 1				
ADDRESS:	STREET, CITY, ST	ATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE									
ADDRESS:				_				1	ш		1 1					
INJURIES	INJURED I TAKEN BY	EMS AGENCY (NAME)		INJURED.	TAKEN TO:	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		T-COMPLIA		ON AIR BA	IG USAGE	EJECTION	TRAPPED	
OL STATE		ICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL			OFFENSE DESC	CRIPTION		CITA	CITATION NUMBER				
							CODE									
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	ALCO	HOL / DRUG SUSPI	ECTED	CONDITION		ALCOHO TYPE	L TEST VALUE	STATUS		RESULT	SELECT UP TO 4	
			BY	TRACTED	=	_	RIJUANA									
INJU	IRIES	SEATING POSITION		AIR BAG		THER DRUG OL CLAS	s	OL RESTRIC	TION(S)	DR	IVER DISTRA	CTION		EST STA	TUS	
1 - FATAL	OFFICIAL IN HIDY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEF			1 - CLASS A		1 - ALCOHOL INTER			NOT DISTRACTED	NO AN		E GIVEN		
3 - SUSPECTED	SERIOUS INJURY MINOR INJURY	2 - FRONT - MIDDLE	2 - DEPLOY 3 - DEPLOY			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE		I	MANUALLY OPERATI ELECTRONIC COMMU DEVICE (TEXTING.T)	NICATION	3-TEST		ITAMINATED	
4 - POSSIBLE IN		3 - FRONT – RIGHT SIDE 4 - SECOND – LEFT SIDE		ED BOTH FRO	INT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER	A DUC	[DIALING)			IPLE / UNUSA T GIVEN, RES	ABLE SULTS KNOWN	
(MOTORCYCLE PAS		(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE	9 - DEPLOTIVIENT UNKNOWN			5 - M/C MOPED ONLY		5 - EXCEPT CLASS		(TALKING ON HANDS- COMMUNICATION DE	VICE	E 5 - TEST GIVEN, RESULTS			
1 - NOTTRANSP		6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER		'ALKING ON HAND-H COMMUNICATION DE				ST TYPE	
/TREATED AT 2 - EMS	T SCENE	7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOT EJE	JECTION CTED		OL ENDORSE	MENT	8 - INTERMEDIATE RESTRICTIONS	LICENSE		OTHER ACTIVITY WITELECTRONIC DEVICE		1 - NON		31 111FE	
3 - POLICE		8 - THIRD - MIDDLE		LLY EJECTED		M - MOTORCYCLE		9 - LEARNER'S PER	MIT		PASSENGER		2 - BLO			
9 - OTHER / UNK	(NOWN	9-THIRD - RIGHT SIDE 10-SLEEPER SECTION	3 - TOTALLY 4 - NOT APP			P - PASSENGER N - TANKER		RESTRICTIONS 10 - LIMITED TO DAY	'LIGHT ONL'		OTHER DISTRACTION NSIDE THE VEHICLE		4 - BRE			
SAFETY EQUIPMENT 1 - NONE USED OF TRUCK CAB 11 - PASSENGER IN OTHER			Q - MOTOR SCOOTER 11 - LI					11 - LIMITED TO EMPLOYMENT 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE 5 - OTHER				ER				
	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOT TRA			R - THREE-WHEEL MC S - SCHOOL BUS	TORCYCLE	13 - MECHANICAL DI	EVICES	9 - (OTHER / UNKNOWN		1 - NON	UG TEST E	TYPE	
3 - LAP BELT ONLY USED PICK-UP WITH CAP) 1 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED		2 - EXTRICATED BY T - DOUBLE & TRIPLE TRAILERS MECHANICAL MEANS				(SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)			CONDITION		2 - BL00D					
5 - CHILD RESTRAINT SYSTEM – CARGO AREA FORWARD FACING 13 - TRAILING UNIT		3 - FREED BY NON-MECHANICAL MEANS X - TANKER / HAZMAT			14 - MILITARY VEHIC		1 ALLANCETE ITOMIAL			3 - URINE 4 - OTHER						
6 - CHILD REST	D RESTRAINT SYSTEM - 14 - RIDING ON VEHICLE EXTERIOR					15 - MOTOR VEHICLES WITHOUT AIR BRAKES			3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		DRUG TEST RESULT(S)					
7 - BOOSTER SE	REAR FACING (NON-TRAILING UNIT) BOOSTER SEAT 15 - NON-MOTORIST						16 - OUTSIDE MIRRO	4-1	4- ILLNESS			1 - AMPHETAMINES				
8 - HELMET US	ED	99 - OTHER / UNKNOWN						17 - PROSTHETIC AII 18 - OTHER	J		ELL ASLEEP, FAINTE ATIGUED, ETC.	ED,		BITURATES ZODIAZEPIN	ES	
9 - PROTECTIVE (ELBOW, KNE										0	NDER THE INFLUEN F MEDICATIONS / DF		4 - CAN	NABINOIDS		
10 - REFLECTIVE 11 - LIGHTING – I											ALCOHOL THER / UNKNOWN		5 - COCA 6 - OPIA	AINE ATES / OPIOIC)S	
/ BICYCLE Of	CLE ONLY									, 0			7 - 0TH	ER		
AA - OLHEK / NNK	THER / UNKNOWN										8 - NEGATIVE RESULTS					

Ũ	OF PUBLIC SAFETY OCCUPANT / WITNESS ADDENDUM OF PUBLIC SAFETY OF						2023	- 0 0	ORT NUMBER	4 8	4				
	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER							
	02	PUCKETT, EMILY MAY							4 / 2 0	_0 _0	2 3	F			
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
冒	245 BUCKINGHAM ST NEWARK, OH 43055														
Ĭ		INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION			TRAPPED			
5	5						0 4		0 3	1	1	1			
ı	UNIT#	IIT # NAME: LAST, FIRST, MIDDLE							E OF BIRTH		AGE	GENDER			
Į	ADDRESS	: STREET, CITY,	STATE ZIP					CONTACT PHONE - INCLUDE AREA CODE							
OCCUPAN		, , , , , , , , , , , , , , , , , , , ,													
8	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
ı		TAKEN BY					O SED	MC HELMET							
ì	UNIT#	NAME: LAS	T, FIRST, MIDDLE				•	DATE OF BIRTH AGE GENDE							
PAN	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE							
OCCUPANT	THI III DIEC	I www.			THURSDAY AND MARKET FARMEN				CEATING DOCUTION	LAXD DAG HEAD	- LEIEATION	TDADDED			
ı	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
٥	UNIT #		T FIDET MIDDLE						E OF BIRTH		AGE	GENDER			
ı		JNIT # NAME: LAST, FIRST, MIDDLE DDRESS: STREET, CITY, STATE, ZIP													
ANT	ADDRESS								CONTACT PHONE - INCLUDE AREA CODE						
OCCUPANT										1 1	1 1				
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED			
		BY				,		☐ MC HELMET		L					
	3 547		JRIES		/ EQUIPMENT USED		SEATING POS	ITION		AIR BAG	JSAGE				
	1 - FATAL 1 - NONE US 2 - SUSPECTED SERIOUS INJURY VEHICLE				SED - 1 - FRONT – LEFT SIDE E OCCUPANT (MOTORCYCLE DRIV						-				
				ER BELT ONLY USED	=	3 - DEPLO									
	5 - NO APPARENT INJURY 4 - SHOULD				TONLY USED 3 - FRONT - RIGHT S 4 - SECOND - LEFT S (MOTORCYCLE PA ESTRAINT SYSTEM - 5 - SECOND - MIDDL			E	4 - DEPLOYED BOTH						
								ENGER)	FRONT/SIDE 5 - NOT APPLICABLE						
H	INJURED TAKEN BY FORWAR			DFACING	ND – RIGHT SII	DE	9 - DEPLOYMENT UNKNOWN								
				ESTRAINT SYSTEM – CING		D – LEFT SIDE ORCYCLE SIDE	CAR)								
	2 - EMS 7 - B00STEF			SEAT		D – MIDDLE		1 - NOT EJ	EJECT ECTED						
	3 - POLICE 8 - HELMET			USED		D – RIGHT SIDE PER SECTION (2 - PARTIA	ALLY EJECT	ED					
				TVE PADS USED KNEES, ETC.)		ENGER IN OTH	DAYLING UNIT								
	10-REFLECT				IVE CLOTHING	BUS, F	PICK-UP WITH CA	P) .	4 - NOT APPLICABLE						
	11 - LIGHTIN / BICYCL				G – PEDESTRIAN		ENGER IN UNE O AREA	NCLOSED	1 - NOT TR	ADDED	ED				
				99 - OTHER /		LING UNIT	EVTERIOR		2 - EXTRICATED BY MECHANICA						
							NG ON VEHICLE TRAILING UNIT)	EXTERIUR	MEANS						
							MOTORIST ER/UNKNOWN		3 - FREED MEANS		ECHANIC	AL			
2	NAME: LA	ST, FIRST, MIDD	LE.			77 - OTTIL	IN / ON NINO WIN	DAT	E OF BIRTH		AGE	GENDER			
ESS															
WITNESS	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		1			
		NAME :						DATE OF RIDTH							
SS	NAME: LA	ST, FIRST, MIDD	LE						E OF BIRTH		AGE	GENDER			
WITNESS	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE		DE.					
≥		. ,													
, a	NAME: LA	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER			
WITNESS								CONTACT BUONE							
M	AUDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE .					
											<u> </u>	<u></u>			