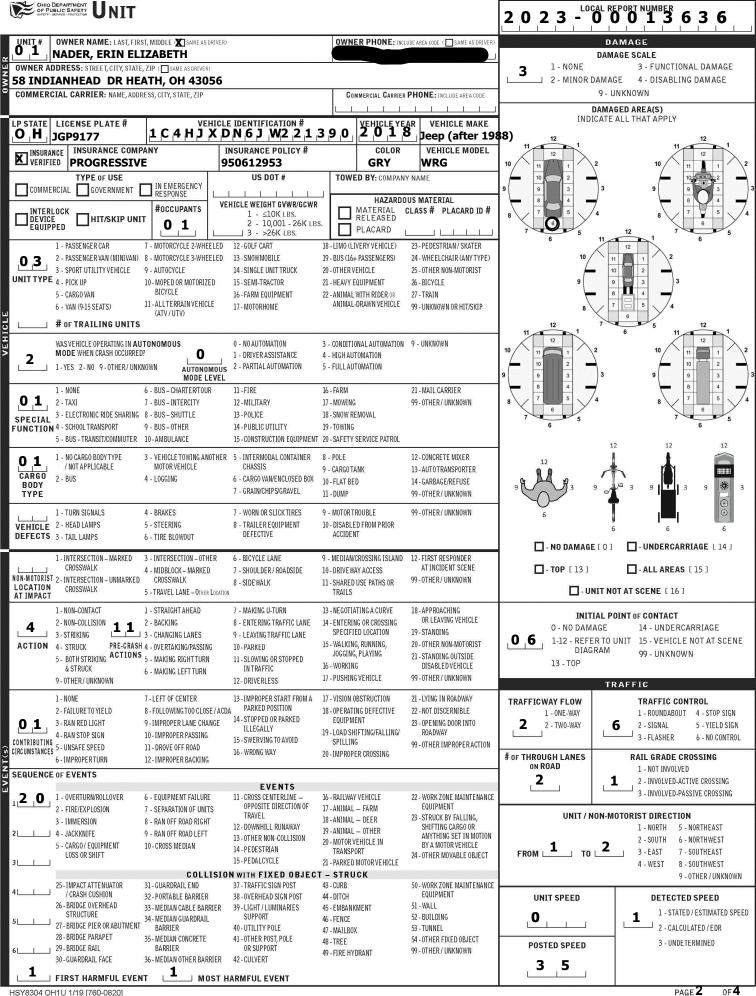
OFFICE CRASH		OCAL REPORT NUMBER									
OH-2 X OH-3	2023-	00013	636								
PHOTOS TAKEN OH-1P OTHER	REPORTING AGENCY NAME* Heath PD 04	NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR						
PRIVATE PROPERTY	4 5 0 7	1 - SOLVED 2 - UNSOLVED CRASH DATE / T	020	98 - ANIMAL 199 - UNKNOWN SH SEVERITY							
1 - CITY											
3-TOWNSHIP	LOCATION ROAD NAME	DO AD TYPE	12102023 1358 LATITUDE DECIMAL DEGREES 1 - FATAL 2 - SERIOUS INJURY SUSPECTED								
2 - SOUTH		ROAD TYPE	4.0.036	State of the state	MINOR INJURY						
- 1 11 1201	30TH REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	S T ROAD TYPE	LONGITUDE DE		SUSPECTED INJURY POSSIBLE						
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	CYNTHIA	ST			PROPERTY DAMAGE						
REFERENCE POINT DIRECTION	None of the second seco		-82,442		ONLY						
1-INTERSECTION FROM REFERENCE 1-NORTH IR -	ROUTE TYPE ROAD TYPE - INTERSTATE ROUTE(TP) AL - ALLEY HW- HIGHWAY F	RD - ROAD	E-1	NTERSECTION RELATED RSECTION OR ON APPROAG							
3 - HOUSE # 3 - EAST	RI ROULEVADO MO MILEDOST S	SQ - SQUARE ST - STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES								
DISTANCE DISTANCE CR.	NUMBERED COUNTY ROUTE CR - CIRCLE OV - OVAL T	ΓΕ - TERRACE									
FROM REFERENCE UNIT OF MEASURE 1 - MILES TR -	- NUMBERED TOWNSHIP DR - DRIVE PI - PIKE W	ΓL - TRAIL NA - WAY	_								
6 0 2 2-FEET 3-YARDS	ROUTE HE - HEIGHTS PL - PLACE		ROADWAY DIV	IDED							
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVER		СТ	DIRECTION OF TRAVEL	Fabrier secondary	1303000 0000						
0 1 2 - ON SHOULDER 10-DRIVEWAY.	ALLEY ACCESS 2 BETWEEN 5 - BACKING		1 - NORTH L 2 - SOUTH	1 - DIVIDED FI (< 4 FEET)						
3 - IN MEDIAN 11-RAILWAY G 4 - ON ROADSIDE 12-SHARED US	RADE CROSSING VEHICLES IN 6-ANGLE	E DIRECTION	3 - EAST	2 - DIVIDED FI (≥4 FEET							
5 - ON GORE TRAILS	2 - REAR-END 8 - SIDESWIPE, 0PP0	SITE DIRECTION	4-WEST	· ·	EPRESSED MEDIAN AISED MEDIAN						
7 - ON RAMP 14- TOLL BOOT	H	AV IN	(ANY TYPE) 9 - OTHER/UNKNOWN								
8 - OFF RAMP 99-OTHER / UN											
WORK ZONE RELATED 1-	WORK ZONE TYPE LOCATION OF CRASH IN WO LANE CLOSURE 1 - BEFORE THE 1ST		CONTOUR 1	CONDITIONS 1	SURFACE 2						
	LANE SHIFT/CROSSOVER WARNING SIGN WORK ON SHOULDER 2 - ADVANCE WARNIN	IG AREA		1 - DRY	1 - CONCRETE						
LAW ENFORCEMENT PRESENT	OR MEDIAN 3 - TRANSITION AREA			2-WET	2 - BLACKTOP,						
	INTERMITTENT OR MOVING WORK 4 - ACTIVITY AREA OTHER 5 - TERMINATION AR	EA		3 - SNOW	BITUMINOUS, ASPHALT						
LIGHT CONDITION	WEATHER	***************************************		4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK						
1 - DAYLIGHT	1 - CLEAR 6 - SNOW 2 - CLOUDY 7 - SEVERE CROSSWINDS			OIL, GRAVEL	4 - SLAG, GRAVEL, STONE						
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	, snow	6 - WATER (STANDING, MOVING) 5 - DIRT									
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	ING DRIZZLE	1	7 - SLUSH	9 - OTHER/UNKNOWN							
9-OTHER/UNKNOWN	5 - SLEET, HAIL 99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN							
NARRATIVE				N	Indicate the north						
UNIT #1 WAS TRAVELING SO	H				an "N" on the compass diagram.						
STREET AND WAS INVOLVED			ScenePD ™ - Evaluation Edition								
WITH THE VEHICLE IN FROM COME TO AN ABRUPT STOP (Evaluation uation Edition	Evaluation Edition								
#2023-13634). UNIT #2 W	-		Unit 2A Evaluation	Evaluation Edition Etion							
LINIT #1 AND WAS LINABLE TO COME TO A STOP											
BEFORE STRIKING THE REAL	P OF LINIT #1 LINIT #2	To Scale	Evaluation Edition	Evaluation Edition							
CONTINUED UP OVER THE R		uation Edition	Unit 1	Evaluation Edition							
TO A STOP IN THE GRASS.		Evaluatio	Evaluation E Exaluation Edition	edition Edition							
	Evaluation Edition	uation Edition		Evaluation Edition							
	Eval	CYNTRIA STRE	Evaluation E	egion							
Evaluation Edition Evaluation Edition Evaluation Edition Evaluation Edition											
	Evaluation Edition	Evaluation uation Edition	Evaluation Edition								
CDACH DEDOCTED DATE (TYPE			Trancite (877) 908-4777	ATE /TIME	FRORT TAKEN BY						
Application of the II service of property of the control of the control of	DISPATCH DATE / TIME 0 2 0 2 3		SCENE CLEARED 6	571	PORT TAKEN BY POLICE AGENCY						
TOTAL TIME OTHER TOTAL			CER'S NAME*		MOTORIST						
ROADWAY CLOSED INVESTIGATION TIME MINUT		mart	OLK S HAME		SUPPLEMENT (CORRECTION OR ADDITION						
	0 7 - 1 3 0	O CHECKED 7	BY OFFICER'S BADGE N	UMBER*	TO AN EXISTING REPORT SENT TO ODPS)						
		<u> </u>									



OHIO DEF OF PUBLI SAFETY - SERVI	SOURCE SAFETY MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST					2 0	2 3	LOCAL RE	PORT NU	I 3 6	3	6					
UNIT #							DATE OF BIRTH AGE GENDER										
01	NADER, E	R, ERIN ELIZABETH							0 8 / 1 5 / 1 9 8 6 3 7 F								
ADDRESS:	S: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE							
58 INDI	ANHEAD	DR HEATH, OH 4305	6														
INJURIES	IES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: M						(NAME, CITY)	IAME, CITY) SAFETY EQUIPMENT DOT-COMPLIA			SEATING POSITION AIR BAG USAGE EJECTION TRAPPED						
5	BY				USED O 4			MC HELMET 0 1			_ _1	1 1					
OL STATE	OPERATOR L	LICENSE NUMBER OFFENS			SE CHAF	ARGED LOCAL OFFENSE DESC		CRIPTION			CITA	CITATION NUMBER					
E O H																	
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED		DHOL / DRUG SUSPE		CONDITION	STATUS	TYPE	L TEST VALUE	STATUS	TYPE		SELECT UP TO 4		
. 4			BY	1	=	LCOHOL L MAF THER DRUG	RIJUANA	1 1	1	.1		1	1				
UNIT #	NAME: LAST, F					THER DRUG				\Box	ATE OF BIRTH		- A	GE	GENDER		
0 2		L, ROBERT ALEXAND)FR						0 9		6 / 1	9 9			M		
	STREET, CITY, ST.								\vdash	NTACT PHONE							
₽ 6448 PC	ORTAGE P	ATH CT GROVE CITY	, OH 43	123													
o ■ Injuries	INJURED	EMS AGENCY (NAME)			TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	Y) SAFETY EQUIPMENT SEATING			SEATING POSITI	ON AIR BA	IG USAGE EJ	ECTION	TRAPPED		
20 20 5	TAKEN BY							USED 0 4		COMPLIAN HELMET		1 1 1					
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	SE CHAF	RGED	LOCAL	OFFENSE DESC	SE DESCRIPTION				CITATION NUMBER				
Во н ј				333.0	3		CODE	333.03				130121023001					
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	ALCO	DHOL / DRUG SUSPE		CONDITION	STATUS	LCOHO	LTEST VALUE	STATUS	DRUG T		SELECT UP TO 4		
	3EEE01 0F 10 2		BY	_	=		RIJUANA	1			VALUE	1	1	KLSOLI	SELECT OF 10 4		
_4				1	□ 0	THER DRUG			1	1	•						
UNIT #	NAME: LAST, F	FIRST, MIDDLE								DA	ATE OF BIRTH		A	GE	GENDER		
									CONTACT PHONE - INCLUDE AREA CODE								
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP								CONTAC	STPHON	IE - INCLUDE AREA	CODE					
<u> </u>	INJURED	EMS AGENCY (NAME)		TIN HIBED:	TAVENTO	: MEDICAL FACILITY	(NAME CITY)	SAFETY FAIIIDMENT			SEATING POSITI	ON AID DA	C HEACE EI	ECTION	TRAPPED		
NORIES	TAKEN BY	EMS AGENOT (NAME)		INJUNED	IAKENTO	. MEDICAL FACILITY	(NAME, CITT)	USED		COMPLIAN HELMET	₹T	AIR BA	IG USAGE EJ	ECITON	IKAFFED		
OL STATE	OPERATOR LICENSE NUMBER			OFFENSE CHARGED LOCAL OFFENSE DESI						CITA	 Citation number						
ORI							CODE		, on the state of								
OL CLASS				VER	ALC	DHOL / DRUG SUSPE	ECTED	CONDITION	A STATUS	LCOHO	L TEST VALUE	STATUS	DRUG T		SELECT UP TO 4		
	SELECT UP TO 2		BY	TRACTED	Д	LCOHOL MAF	RIJUANA		STATUS	1117	VALUE	314103	'''' '	KLSULI	SELECT UP 10 4		
					<u></u> 0⁻	THER DRUG					•						
1 - FATAL	RIES	SEATING POSITION 1 - FRONT - LEFT SIDE	1 - NOT DEF	LOYED		OL CLASS 1-CLASS A	5	OL RESTRIC 1-ALCOHOL INTER			IVER DISTRACTED	TION	1 - NONE GI	T STA VEN	TUS		
	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOY		2 - CLASS B		2 - CDL INTRASTATE ONLY		2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION			2 - TEST REFUSED					
3 - SUSPECTED 4 - POSSIBLE IN	3 EDONT DICHTCIDE		3 - DEPLOY		3 - CLASS C FRONT / SIDE 4 - REGULAR CLASS		3 - CORRECTIVE LENSES 4 - FARM WAIVER		DEVICE (TEXTING, TYPING,			3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE					
5 - NO APPAREN		4 - SECOND – LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	PPLICABLE (OHIO = D)			5 - EXCEPT CLASS A BUS			DIALING) 3 - TALKING ON HANDS-FREE		4 - TEST GIVEN, RESULTS KNOWN					
TNJURED.	INJURED TAKEN BY 5- SECOND - MIDDLE 9- DEP		9 - DEPLOY				6 - EXCEPT CLASS A & CLASS B BUS				IINKNOWN						
1 - NOTTRANSP	ORTED	6 - SECOND - RIGHT SIDE	_					7 - EXCEPT TRACTO	R-TRAILER	0	OMMUNICATION DE	VICE	ALCOHO	OL TES	ST TYPE		
7 TREATED AT	AT SCENE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 1 - NOT EJI					8 - INTERMEDIATE RESTRICTIONS	RMEDIATE LICENSE 5 - OTHER AC RICTIONS ELECTRON			TY WITH AN 3 NONE							
3 - POLICE	LICE 8-THIRD - MIDDLE 2-PAR			LY EJECTED M - MOTORCYCLE		9 - LEARNER'S PERMIT			6 - PASSENGER		2 - BLOOD 3 - URINE						
9 - OTHER / UNK	10 CLEEDED CECTION		3 - TOTALLY 4 - NOT APP			RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY		7 - OTHER DISTRACTION INSIDE THE VEHICLE			4 - BREATH						
SAFETY E	SAFETY EQUIPMENT OF TRUCK CAB		4-NOT APP	Q - MOTOR SCOOTER 11 - LIN			11 - LIMITED TO EMPLOYMENT			8 - OTHER DISTRACTION OUTSIDE THE VEHICLE		5 - OTHER					
1 - NONE USED 2 - SHOULDER B	ELT ONLY LISED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	1 - NOT TRA	RAPPED		R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE			THER / UNKNOWN		DRUG	TEST	TYPE		
	3 - LAP BELT ONLY USED PICK-UP WITH CAP) 2.		2 - EXTRICA	ICATED BY T - DOUBLE & TRIPLE TRAILERS			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION			1 - NONE 2 - BLOOD					
	4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCL CARGO AREA		MECHANICAL MEANS 3 - FREED BY X - TANKER / HAZMAT				ADAPTIVE DEV		/ICES) 1 - APPARENTLY NOR			2 - BLOOD 3 - URINE					
	5 - CHILD RESTRAINT SYSTEM – FORWARD FACING 13 - TRAILING UNIT			NON-MECHANICAL MEANS			14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED,			4 - OTHER					
6 - CHILD RESTR REAR FACING		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)						AIR BRAKES		Al	NGRY, DISTURBED)	KESSED,	DRUG TE	ST RE	SULT(S)		
7 - BOOSTER SE	- BOOSTER SEAT 15 - NON-MOTORIST						16 - OUTSIDE MIRROR 17 - PROSTHETIC AID			4- ILLNESS 5- FELL ASLEEP FAINTED		1 - AMPHETAMINES 2 - RARRITURATES					
	8 - HELMET USED 99 - OTHER / UNKNOWN							18 - OTHER		F.	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		2 - BARBITURATES 3 - BENZODIAZEPINES				
	9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)										6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS		4 - CANNABINOIDS				
10 - REFLECTIVE										11	ALCOHOL		5 - COCAINE		ic .		
11 - LIGHTING - F / BICYCLE ON										9-0	THER / UNKNOWN		6 - OPIATES 7 - OTHER	7 UPIOID	3		
99 - OTHER / UNK	NOWN												8 - NEGATIV	E RESUL	_TS		