OFFICE CRASH		OCAL REPORT NU	MBER*								
PHOTOS TAKEN OH-2 K OH-3	2023-	0001	3945								
OH-1P OTHER	REPORTING AGENCY NAME* Heath PD		NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR 1 - SOLVED 0 2 98 - ANIMAL 1 - A							
COUNTY* LOCALITY* LOCATION:CITY		2 - UNSOLVED 99 - UNKNOWN CRASH DATE / TIME * CRASH SEVERITY									
4 5 1 2 - VILLAGE HEATH		1,2202023, 1617 5 1- FATAL 2- SERIOUS INJURY									
	LOCATION ROAD NAME	ROAD TYPE	Z - SERIOUS INJURY								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 2 - SOUTH 2 - SOUTH 4 - WEST	30th		ST	40,028	0 8 1	3 - MINOR INJURY SUSPECTED					
I KEST	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE D	4 - INJURY POSSIBLE							
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST				-82,443	4 9 5	5 - PROPERTY DAMAGE ONLY					
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE	<u> </u>	INTERSECTION RELATED							
1-INTERSECTION 1-NORTH IR -			- ROAD - SQUARE	WITHIN INTERSECTION OR ON APPROACH							
3- HOUSE # 3- EAST	I EDERAL OU ROUTE		- STREET	WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
	NUMBERED COUNTY ROLLTE CR		- TERRACE - TRAIL	ROADWAY							
1-MILES TR-	NUMBERER TOWNSHIP		A - WAY	ROADWAY DIVIDED							
2 5 3 2-FEET 3 - YARDS	HE -	- HEIGHTS PL - PLACE			1						
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVER		NER OF CRASH COLLISION/IMPAC COLLISION 4 - REAR-TO-REAR	Т	DIRECTION OF TRAVE	0.5	EDIAN TYPE					
0 1 2 - ON SHOULDER 10-DRIVEWAY	ALLEY ACCESS 2 BETV	VEEN 5-BACKING MOTOR		1 - NORTH L 2 - SOUTH	(< 4	/IDED FLUSH MEDIAN 4 FEET)					
3 - IN MEDIAN 11-RAILWAY G 4 - ON ROADSIDE 12-SHARED US		CLES IN 6-ANGLE ISPORT 7-SIDESWIPE, SAME	DIRECTION	3 - EAST 4 - WEST	(≥4	DIVIDED FLUSH MEDIAN (≥4 FEET)					
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAR 3 - HEAD			4-WES1	1	DED, DEPRESSED MEDIAN DED, RAISED MEDIAN					
7 - ON RAMP 14-TOLL BOOTI	H	FOR THER ON NOW	IN-		/ TYPE) ER/UNKNOWN						
8-OFF RAMP 99-OTHER/UN		I									
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	1 - BEFORE THE 1ST W		CONTOUR 2	CONDITIONS 1	SURFACE 2					
WORKERS PRESENT 2-	LANE SHIFT/CROSSOVER	WARNING SIGN 2 - ADVANCE WARNING		1 - STRAIGHT LEVEL	1 - CONCRETE						
	WORK ON SHOULDER OR MEDIAN	3-TRANSITION AREA	ANLA	2 - STRAIGHT GRADE	2 - BLACKTOP,						
	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AREA 5 - TERMINATION ARE	Α	3 - CURVE LEVEL	BITUMINÓUS, ASPHALT						
				4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK					
LIGHT CONDITION 1 - Daylight	1 - CLEAR	6 - SNOW		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL 4 - SLAG, GRAVEL STONE							
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	SNOW	6 - WATER (STANDING, MOVING)									
4 - DARK – ROADWAY NOT LIGHTED	NG DRIZZLE		9 - OTHER/UNKNOWN								
5 - DARK — UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOW	/N					
NARRATIVE						Indicate the north					
Unit 1 was traveling south o	n S. 30th St. Unit 2	was			+	direction with an "N" on the					
following Unit 1. Unit 1 slow	ed down because o	of		ScenePD ™ - Evaluation Edition		compass diagram.					
traffic ahead. Unit 2 struck t	he rear of Unit 1.		Evaluation	Evaluation Edition		-					
		Evalua Evaluation Edition	tion Edition		Evaluation Edition 1000	icm Edition					
Evaluation Edition											
		Evaluation Edition		Evaluation	Evaluation Edition	ion Edition					
Evaluation Edition Evaluation Edition											
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Evaluation Edition Evaluation Edition											
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Evaluation Edition Evaluation Edition Evaluation Edition											
Evaluation Edition Evaluation Edition											
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME REPORT TAKEN BY											
The contract of the state of the contract of t	02023 1618		5 2 5 1	2202023	1703	POLICE AGENCY					
TOTAL TIME OTHER TOTA	L OFFICER'S NAME*	Сне		CER'S NAME*		MOTORIST					
ROADWAY CLOSED INVESTIGATION TIME MINUT	granista usung kentenda	SUPPLEMENT (CORRECTION OR ADDITION									
0 3 8 3 8	OFFICER'S BAD	GE NUMBER* 1 4 5		OFFICER'S BADGE N	1UMBER* 7	TO AN EXISTING REPORT SENT TO ODPS)					

J FIRST HARMFUL EVENT

1

OHIO DEF OF PUBLI SAFETY - SERVI	OF PUBLIC SAFETY MOTORIST / NON-MOTORIST MATY-SERVICE-PROTECTION						2 0 2 3 - 0 0 0 1 3 9 4 5									
UNIT#								DATE OF BIRTH AGE GENDER								
01	HOLLAND, TIMOTHY WAYNE							0 6 / 0 3 / 1 9 8 9 3 4 M								
₹	STREET, CITY, ST.			7774					CONTA	ACT PHOI	NE - INCLUDE AREA	CODE	_			
-		ON ST CROOKSVILLE	, OH 43		TAVENTO	MEDICAL FACILITY	(NAME OFT)	SAFETY EQUIDMENT			SEATING POSITI	ON ATD DA	CHEACE	FIECTION	TRADDED	
5 INJURIES	TAKEN BY	EMS AGENCY (NAME) INJUI			NJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPN USED 0 4			USED		T-COMPLIA HELMET	NT	I AIR BA		1	TRAPPED 1	
OL STATE	OPERATOR L	R LICENSE NUMBER OFFEI			FENSE CHARGED LOCAL		OFFENSE DESC	RIPTION	I	CIT		ITATION NUMBER				
OH						CODE										
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	IVER STRACTED		OHOL / DRUG SUSPI		CONDITION	STATUS	ALCOHO TYPE	L TEST VALUE	STATUS		RESULT	SELECT UP TO 4	
4 ,			BY	1	=	LCOHOL MAF THER DRUG	RIJUANA	1	1	1	-1 1 1 1	1 ,	1			
UNIT#	NAME: LAST, F	FIRST, MIDDLE								D.	ATE OF BIRTH			AGE	GENDER	
0 2	MILLER,	KAREN M							0 3 / 2 2 / 1 9 4 9 7 4 F							
ADDRESS:	STREET, CITY, ST.								CONTACT PHONE - INCLUDE AREA CODE							
86 W M	IAIN ST ST	E 105 NEWARK, OH	43055													
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)						SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSITION				N AIR BAG USAGE EJECTION TRAPPED			
OL STATE		ICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL							CITATION NUMBER				
O H	OPERATOR E	LICENSE NUMBER		333.0	CODE		OFFENSE DESCRIPTION 333.03		•			145122023002				
OL CLASS	ENDORSEMENT	ENT RESTRICTION SELECT UP TO 3 DRIV		IVER			CONDITION	CONDITION		L TEST		DRUG TEST(S)				
	SELECT UP TO 2		DIS BY	STRACTED	П	LCOHOL MAF	RIJUANA	_	STATUS		VALUE	STATUS		RESULT	SELECT UP TO 4	
				1	0	THER DRUG		1	1	1	•	1	1		اللا	
UNIT#	NAME: LAST, F	FIRST, MIDDLE								D	ATE OF BIRTH			AGE	GENDER	
									ш				_			
ADDRESS:	STREET, CITY, ST.	ATE, ZIP							CONTA	CT PHOI	NE - INCLUDE AREA	CODE				
	INJURED	EMS AGENCY (NAME)		INTURED	TAKENTO	· MEDICAL FACILITY	(NAME CITY)	SAFETY FOIIDMENT			SEATING POSITI	ON ATD DA	C IISACE	FIECTION	TRAPPED	
INDURIES	TAKEN BY	EINS AGENCY (NAIME)			JURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT SEATING POSITION AIR			AIR BA	AN USANE ESECTION TRAFFED				
OL STATE	OPERATOR L	RATOR LICENSE NUMBER				OFFENSE DESC	RIPTION			CITA	CITATION NUMBER					
.							CODE									
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		IVER STRACTED	ALC	OHOL / DRUG SUSPI	ECTED	CONDITION		ALCOHO TYPE	L TEST VALUE	STATUS		RESULT	SELECT UP TO 4	
			BY		=	_	RIJUANA									
TNJU	RIES	SEATING POSITION		AIR BAG	□⁰	THER DRUG OL CLASS	s	OL RESTRIC	TION(S	DE	IVER DISTRAC	TION		IEST STA	TIIS	
1 - FATAL	ARILS	1 - FRONT - LEFT SIDE	1 - NOT DE			1 - CLASS A	J	1 - ALCOHOL INTER			NOT DISTRACTED	711011		E GIVEN	103	
	SERIOUS INJURY	2 EDONT MIDDLE						2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES			2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION			2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED		
4 - POSSIBLE IN	2 EDONT DICHT CIDE			ED BOTH FRONT / SIDE 4 - REGULAR CLASS			4 - FARM WAIVER		DEVICE (TEXTING, TYPING, DIALING)			SAMPLE / UNUSABLE				
5 - NO APPAREN	NO APPARENT INJURY 4 - SECOND - LEFT SIDE 5 - NOT AP (MOTORCYCLE PASSENGER)		LICABLE (OHIO = D) MENT UNKNOWN 5 - M/C MOPED ONLY				5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A			3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE			4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS			
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9-DEPLOY	YMENI UNKN	UWN	6 - NO VALID OL		& CLASS B BUS		4 - 1	TALKING ON HAND-H	ELD		NOWN		
1 - NOT TRANSP /TREATED A		6 - SECOND – RIGHT SIDE 7 - THIRD – LEFT SIDE	=	JECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE			COMMUNICATION DE OTHER ACTIVITY WIT				T TYPE	
2 - EMS		(MOTORCYCLE SIDE CAR) 8 - THIRD – MIDDLE	1 - NOT EJ			H - HAZMAT		RESTRICTIONS			ELECTRONIC DEVICE		1 - NON 2 - BLO			
3 - POLICE 9 - OTHER / UNK	0 TUIDD DICHT CIDE			LY EJECTED M - MOTORCYCLE EJECTED P - PASSENGER			9 - LEARNER'S PERMIT RESTRICTIONS			6 - PASSENGER 7 - OTHER DISTRACTION			3 - URINE			
		10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT AP			N - TANKER		10 - LIMITED TO DAY			INSIDE THE VEHICLE OTHER DISTRACTION		4 - BRE 5 - OTH			
1 - NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	ī	RAPPED		Q - MOTOR SCOOTER R - THREE-WHEEL MO	TORCYCL F	11 - LIMITED TO EM 12 - LIMITED - OTHI			THE VEHICLE	OUTOIDE		UG TEST	TVDE	
	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOT TR			S - SCHOOL BUS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13 - MECHANICAL D (SPECIAL BRAK		9-1	OTHER / UNKNOWN		1 - NON		IMPE	
3 - LAP BELT ON 4 - SHOULDER &	LAP BELT USED	12 - PASSENGER IN UNENCLOSED	2 - EXTRIC MECHA	NICAL MEAN:	S	T - DOUBLE & TRIPLE		CONTROLS, OR C	THER	1./	CONDITION		2 - BL00			
5 - CHILD REST	HILD RESTRAINT SYSTEM _ CARGO AREA 3-F		3 - FREED NON-MI	BY X - TANKER / HAZMAT ECHANICAL MEANS			14 - MILITARY VEHICLES ON		1 - APPARENTLY NORMAL NLY 2 - PHYSICAL IMPAIRMENT			3 - URINE 4 - OTHER				
6 - CHILD REST	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR						15 - MOTOR VEHICLI AIR BRAKES	ES WITHOUT		EMOTIONAL (E.G., DEP NGRY, DISTURBED)	RESSED,			SULT(S)	
REAR FACING		(NON-TRAILING UNIT) 15 - NON-MOTORIST						16 - OUTSIDE MIRRO		4-1	LLNESS			HETAMINES	(0)	
8 - HELMET US		99 - OTHER / UNKNOWN						17 - PROSTHETIC AI 18 - OTHER	D		ELL ASLEEP, FAINTE ATIGUED, ETC.	D,		BITURATES	EC	
9 - PROTECTIVE (ELBOW, KNE								10 VIIIEN		6- L	INDER THE INFLUEN IF MEDICATIONS / DR			ZODIAZEPIN NABINOIDS	E.3	
10 - REFLECTIVE	CLOTHING									1	ALCOHOL	000	5 - 000			
11 - LIGHTING - I / BICYCLE Of										9-0	THER / UNKNOWN		6 - OPIA 7 - OTH	ATES / OPIOID Er	8	
99 - OTHER / UNK														ATIVE RESUI	_TS	