



Traffic Crash Report

Local Report Number *	Crash Severity	Hit/Skip
1 6 0 4 6 6 8 1	2 1 - Fatal 2 - Injury 3 - PDO	1 - Solved 2 - Unsolved

Photos Taken <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OH-3 <input type="checkbox"/> Other	PDO Under State Reportable Dollar Amount	Private Property	Reporting Agency NCIC *	Reporting Agency Name *	Number of Units	Unit in error
			00901	Fairfield Police Department	03	01 98 - Animal 99 - Unknown

County *	City *	City, Village, Township *	Crash Date *	Time of Crash	Day of Week
09	Fairfield	Fairfield	06272016	0925	MON

Degrees / Minutes / Seconds	Longitude	Decimal Degrees	Longitude
0 / 0 "	0 / 0 "	39.320424	-78.450388

Roadway Division	Divided Lane Direction of Travel	Number of Thru Lanes	Road Types or Milepost ²
<input type="checkbox"/> Divided <input checked="" type="checkbox"/> Undivided	<input type="checkbox"/> N - Northbound E - Eastbound <input type="checkbox"/> S - Southbound W - Westbound	02	AL - Alley CR - Circle HE - Heights MP - Milepost PL - Place ST - Street WA - Way AV - Avenue CT - Court HW - Highway PK - Parkway RD - Road TE - Terrace BL - Boulevard DR - Drive LA - Lane PI - Pike SQ - Square TL - Trail

Location Route Type ¹	Location Route Number	Loc Prefix	Location Road Name	Location Road Type ²	Route Types ¹
		N, S, E, W	Ross	RD	IR - Interstate Route (inc. turnpike) CR - Numbered County Route US - US Route TR - Numbered Township Route SR - State Route

Distance From Reference	Dir From Ref	Reference Route Type ¹	Reference Route Number	Ref Prefix	Reference Name (Road, Milepost, House #)	Reference Road Type ²
10	N, S, E, W			N, S, E, W	Cheryl	DR

Reference Point Used	Crash Location	Location of First Harmful Event
1 - Intersection 2 - Mile Post 3 - House Number	01 - Not an intersection 02 - Four-way Intersection 03 - T-Intersection 04 - Y-Intersection 05 - Traffic Circle/Roundabout 06 - Five-point, or more 07 - On Ramp 08 - Off Ramp 09 - Crossover 10 - Driveway/Alley Access 11 - Railway Grade Crossing 12 - Shared-Use Paths or Trails 99 - Unknown	1 - On Roadway 2 - On Shoulder 3 - In Median 4 - On Roadside 5 - On Gore 6 - Outside Trafficway 9 - Unknown

Road Contour	Road Conditions	Weather
2 1 - Straight Level 2 - Straight Grade 3 - Curve Level 4 - Curve Grade 9 - Unknown	01 1 - Dry 02 - Wet 03 - Snow 04 - Ice Secondary <input type="checkbox"/>	2 1 - Clear 2 - Cloudy 3 - Fog, Smog, Smoke 4 - Rain 5 - Sleet, Hail 6 - Snow 7 - Severe Crosswinds 8 - Blowing Sand, Soil, Dirt, Snow 9 - Other/Unknown

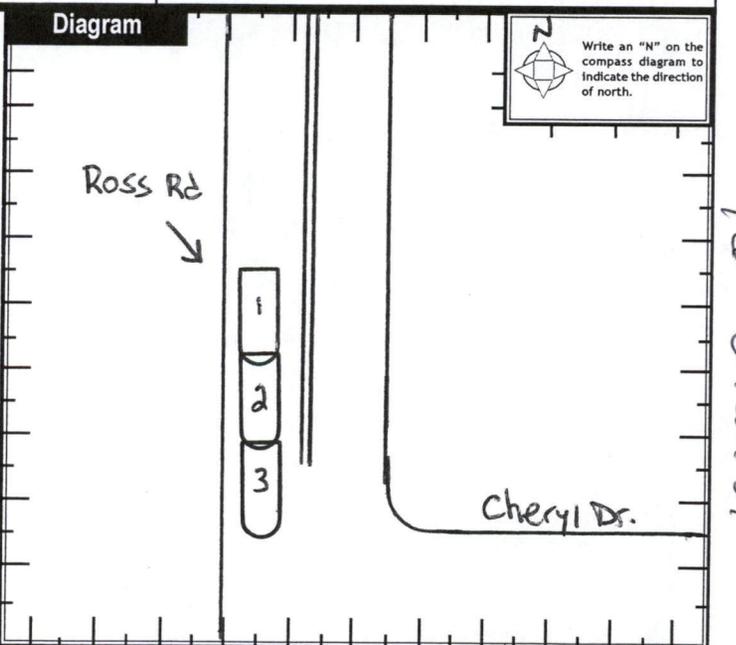
Manner of Crash Collision/Impact	Weather
2 1 - Not Collision Between Two Motor Vehicles In Transport 2 - Rear-End 3 - Head-On 4 - Rear-to-Rear 5 - Backing 6 - Angle 7 - Sideswipe, Same Direction 8 - Sideswipe, Opposite Direction 9 - Unknown	2 1 - Clear 2 - Cloudy 3 - Fog, Smog, Smoke 4 - Rain 5 - Sleet, Hail 6 - Snow 7 - Severe Crosswinds 8 - Blowing Sand, Soil, Dirt, Snow 9 - Other/Unknown

Road Surface	Light Conditions	School Bus Related
2 1 - Concrete 2 - Blacktop, Bituminous, Asphalt 3 - Brick/Block 4 - Slag, Gravel, Stone 5 - Dirt 6 - Other	1 1 - Daylight 2 - Dawn 3 - Dusk 4 - Dark - Lighted Roadway 5 - Dark - Roadway Not Lighted 6 - Dark - Unknown Roadway Lighting 7 - Glare* 8 - Other	<input type="checkbox"/> School Zone Related <input type="checkbox"/> Yes, School Bus Directly Involved <input type="checkbox"/> Yes, School Bus Indirectly Involved

Work Zone Related	Workers Present	Type of Work Zone	Location of Crash in Work Zone
<input type="checkbox"/>	<input type="checkbox"/> Law Enforcement Present (Officer/Vehicle) <input type="checkbox"/> Law Enforcement Present (Vehicle Only)	<input type="checkbox"/> 1 - Lane Closure 2 - Lane Shift/Crossover 3 - Work on Shoulder or Median 4 - Intermittent or Moving Work 5 - Other	<input type="checkbox"/> 1 - Before the First Work Zone Warning Sign 2 - Advance Warning Area 3 - Transition Area 4 - Activity Area 5 - Termination Area

Narrative

On 6-27-16 at about 9:25 am unit 3 was stopped on southbound Ross Road waiting to turn left to Cheryl Drive. Unit 2, also southbound on Ross, stopped safely behind unit 3. Unit 1 was southbound on Ross and failed to stop before striking unit 2 from behind. The force of the strike caused unit 2 to strike unit 3.



Report Taken By	Supplement (Correction or Addition to an Existing Report Sent to ODPS)					
<input checked="" type="checkbox"/> Police Agency <input type="checkbox"/> Motorist						
Date Crash Reported	Time Crash Reported	Dispatch Time	Arrival Time	Time Cleared	Other Investigation Time	Total Minutes
06272016	0927	0929	0935	1010		35
Officer's Name *	Officer's Badge Number	Checked By	Page 1 of 6			
T. Lucas	63	Sgt. M. Rednour #53				



Unit

Local Report Number
16046681

Unit Number: 01 Owner Name: Last, First, Middle (Same As Driver) Coca Cola Bottling Co. of Michigan Owner Phone Number - inc. area code (Same As Driver) (513) 680-6982 Damage Scale: 3 Damaged Area: Front 02, 03, 04, 05, 06, 07, 08, 09

Owner Address: City, State, Zip (Same As Driver) 5100 Duck Creek Road Cincinnati, Ohio 45227

LP State: OH License Plate Number: PEQ3658 Vehicle Identification Number: 1GCHG35U441197542 # Occupants: 01

Vehicle Year: 2004 Vehicle Make: Chevrolet Vehicle Model: Express Vehicle Color: Red

Insurance Company: Beecher Carlson Policy Number: RAD943765502 Towed By:

Carrier Name, Address, City, State, Zip: Coca Cola Bottling Co. of Michigan 5100 Duck Creek Road Cincinnati, Ohio Carrier Phone- include area code: (513) 680-6982

US DOT: 1 Vehicle Weight GVWR/GCWR: 1- Less Than or Equal to 10k Lbs. 2- 10,001 to 26,000 Lbs. 3- More Than 26,000 Lbs. Cargo Body Type: 07 Trafficway Description: 1- Two-Way, Not Divided 2- Two-Way, Not Divided, Continuous Left Turn Lane 3- Two-Way, Divided, Unprotected (Painted or Grass > 4 Ft) Median 4- Two-Way, Divided, Positive Median Barrier 5- One-Way Trafficway

Non-Motorist Location Prior to Impact: 01- Intersection - Marked Crosswalk 02- Intersection - No Crosswalk 03- Intersection - Other 04- Midblock - Marked Crosswalk 05- Travel Lane - Other Location 06- Bicycle Lane 07- Shoulder/Roadside 08- Sidewalk 09- Median/Crossing Island 10- Driveway Access 11- Shared-Use Path or Trail 12- Non-Trafficway Area 99- Other/Unknown Type of Use: 2- Commercial In Emergency Response: [] Unit Type: 08- Passenger Vehicles (less than 9 passengers) 01- Sub-Compact 02- Compact 03- Mid Size 04- Full Size 05- Minivan 06- Sport Utility Vehicle 07- Pickup 08- Van 09- Motorcycle 10- Motorized Bicycle 11- Snowmobile/ATV 12- Other Passenger Vehicle Med/Heavy Trucks or Combo Units > 10k lbs: 13- Single Unit Truck or Van 2axle, 6 tires 14- Single Unit Truck; 3+ axles 15- Single Unit Truck / Trailer 16- Tractor/Tractor (Bobtail) 17- Tractor/Semi-Trailer 18- Tractor/Double 19- Tractor/Triples 20- Other Med/Heavy Vehicle Bus/Van/Limo (9 or More Including Driver): 21- Bus/Van (9-15 Seats, Inc Driver) 22- Bus (16+ Seats, Inc Driver) Non-Motorist: 23- Animal with Rider 24- Animal with Buggy, Wagon, Surrey 25- Bicycle/Pedacyclist 26- Pedestrian/Skater 27- Other Non-Motorist

Special Function: 01- None 02- Taxi 03- Rental Truck (Over 10k Lbs) 04- Bus - School (Public or Private) 05- Bus - Transit 06- Bus - Charter 07- Bus - Shuttle 08- Bus - Other 09- Ambulance 10- Fire 11- Highway/Maintenance 12- Military 13- Police 14- Public Utility 15- Other Government 16- Construction Equip. 17- Farm Vehicle 18- Farm Equipment 19- Motorhome 20- Golf Cart 21- Train 22- Other (Explain in Narrative) Most Damaged Area: 02- Center Front 03- Right Front 04- Right Side 05- Right Rear 06- Rear Center 07- Left Rear 08- Left Side 09- Left Front 10- Top and Windows 11- Undercarriage 12- Load/Trailer 13- Total(All Areas) 14- Other Action: 3- Striking 1- Non-Contact 2- Non-Collision 3- Striking 4- Struck 5- Striking/Struck 9- Unknown

Pre-Crash Actions: 01- Motorist 01- Straight Ahead 02- Backing 03- Changing Lanes 04- Overtaking/Passing 05- Making Right Turn 06- Making Left Turn 07- Making U-Turn 08- Entering Traffic Lane 09- Leaving Traffic Lane 10- Parked 11- Slowing or Stopped in Traffic 12- Driverless 13- Negotiating a Curve 14- Other Motorist Action Non-Motorist: 15- Entering or Crossing Specified Location 16- Walking, Running, Jogging, Playing, Cycling 17- Working 18- Pushing Vehicle 19- Approaching or Leaving Vehicle 20- Standing 21- Other Non-Motorist Action

Contributing Circumstances: Primary: 09- Motorist 01- None 02- Failure to Yield 03- Ran Red Light 04- Ran Stop Sign 05- Exceeded Speed Limit 06- Unsafe Speed 07- Improper Turn 08- Left of Center 09- Followed Too Closely/ACDA 10- Improper Lane Change /Passing/Off Road 11- Improper Backing 12- Improper Start From Parked Position 13- Stopped or Parked Illegally 14- Operating Vehicle in Negligent Manner 15- Swerving to Avoid (Due to External Conditions) 16- Wrong Side/Wrong Way 17- Failure to Control 18- Vision Obstruction 19- Operating Defective Equipment 20- Load Shifting/Falling/Spilling 21- Other Improper Action Non-Motorist: 22- None 23- Improper Crossing 24- Darting 25- Lying and/or Illegally in Roadway 26- Failure to Yield Right of Way 27- Not Visible (Dark Clothing) 28- Inattentive 29- Failure to Obey Traffic Signs /Signals/Officer 30- Wrong Side of the Road 31- Other Non-Motorist Action Vehicle Defects: 01- Turn Signals 02- Head Lamps 03- Tail Lamps 04- Brakes 05- Steering 06- Tire Blowout 07- Worn or Slick tires 08- Trailer Equipment Defective 09- Motor Trouble 10- Disabled From Prior Accident 11- Other Defects

Sequence of Events: 1- 20 2- 3- 4- 5- 6- Non-Collision Events: 01- Overturn/Rollover 02- Fire/Explosion 03- Immersion 04- Jackknife 05- Cargo/Equipment Loss or Shift 06- Equipment Failure (Blown Tire, Brake Failure, etc) 07- Separation of Units 08- Ran Off Road Right 09- Ran Off Road Left 10- Cross Median 11- Cross Center Line Opposite Direction of Travel 12- Downhill Runaway 13- Other Non-Collision Collision With Fixed Object: 25- Impact Attenuator/Crash Cushion 26- Bridge Overhead Structure 27- Bridge Pier or Abutment 28- Bridge Parapet 29- Bridge Rail 30- Guardrail Face 31- Guardrail End 32- Portable Barrier 33- Median Cable Barrier 34- Median Guardrail Barrier 35- Median Concrete Barrier 36- Median Other Barrier 37- Traffic Sign Post 38- Overhead Sign Post 39- Light/Luminaries Support 40- Utility Pole 41- Other Post, Pole or Support 42- Culvert 43- Curb 44- Ditch 45- Embankment 46- Fence 47- Mailbox 48- Tree 49- Fire Hydrant 50- Work Zone Maintenance Equipment 51- Wall, Building, Tunnel 52- Other Fixed Object

Unit Speed: 25 Posted Speed: 25 Traffic Control: 12- Stop Sign 01- No Controls 02- Stop Sign 03- Yield Sign 04- Traffic Signal 05- Traffic Flashers 06- School Zone 07- Railroad Crossbucks 08- Railroad Flashers 09- Railroad Gates 10- Construction Barricade 11- Person (Flagger, Officer) 12- Pavement Markings 13- Crosswalk Lines 14- Walk/Don't Walk 15- Other 16- Not Reported Unit Direction: From 1 To 2 1- North 2- South 3- East 4- West 5- Northeast 6- Northwest 7- Southeast 8- Southwest 9- Unknown



Unit

Local Report Number
 1 6 0 4 6 6 8 1

Unit Number: **02** Owner Name: Last, First, Middle (Same As Driver)
Fischer, Monica Owner Phone Number - inc. area code (Same As Driver)
(513) 300-5561 Damage Scale: **3** Damaged Area:

Owner Address: City, State, Zip (Same As Driver)
10029 Fairglen Drive Cincinnati, Ohio 45251

LP State: **OH** License Plate Number: **EN13YZ** Vehicle Identification Number: **19XF2F50CE102171** # Occupants: **01**

Vehicle Year: **2012** Vehicle Make: **Honda** Vehicle Model: **CRV** Vehicle Color: **Silver**

Proof of Insurance Shown: Insurance Company: **Safeco** Policy Number: **K1765661** Towed By: _____

Carrier Name, Address, City, State, Zip: _____ Carrier Phone- include area code: _____

US DOT: _____ Vehicle Weight GVWR/GCWR: 1 - Less Than or Equal to 10k Lbs.
 2 - 10,001 to 26,000 Lbs.
 3 - More Than 26,000 Lbs.

HM Placard ID No.: _____ Hazardous Material Released:

HM Class Number: _____

Cargo Body Type: **01** 01 - No Cargo Body Type/Not Applicable 09 - Pole
 02 - Bus/Van (9-15 Seats, Inc Driver) 10 - Cargo Tank
 03 - Bus (16+ Seats, Inc Driver) 11 - Flat Bed
 04 - Vehicle Towing Another Vehicle 12 - Dump
 05 - Logging 13 - Concrete Mixer
 06 - Intermodal Container Chassis 14 - Auto Transporter
 07 - Cargo Van/Enclosed Box 15 - Garbage/Refuse
 08 - Grain, Chips, Gravel 99 - Other/Unknown

Trafficway Description: **1** 1 - Two-Way, Not Divided
 2 - Two-Way, Not Divided, Continuous Left Turn Lane
 3 - Two-Way, Divided, Unprotected (Painted or Grass >4 Ft.) Median
 4 - Two-Way, Divided, Positive Median Barrier
 5 - One-Way Trafficway

Hit / Skip Unit

Non-Motorist Location Prior to Impact: 01 - Intersection - Marked Crosswalk
 02 - Intersection - No Crosswalk
 03 - Intersection - Other
 04 - Midblock - Marked Crosswalk
 05 - Travel Lane - Other Location
 06 - Bicycle Lane
 07 - Shoulder/Roadside
 08 - Sidewalk
 09 - Median/Crossing Island
 10 - Driveway Access
 11 - Shared-Use Path or Trail
 12 - Non-Trafficway Area
 99 - Other/Unknown

Type of Use: **1** 1 - Personal
 2 - Commercial
 3 - Government

In Emergency Response

Unit Type: **06** 99 - Unknown or Hit / Skip

Passenger Vehicles (less than 9 passengers): 01 - Sub-Compact, 02 - Compact, 03 - Mid Size, 04 - Full Size, 05 - Minivan, 06 - Sport Utility Vehicle, 07 - Pickup, 08 - Van, 09 - Motorcycle, 10 - Motorized Bicycle, 11 - Snowmobile/ATV, 12 - Other Passenger Vehicle

Med/Heavy Trucks or Combo Units > 10k lbs: 13 - Single Unit Truck or Van 2axle, 6 tires, 14 - Single Unit Truck; 3+ axles, 15 - Single Unit Truck / Trailer, 16 - Truck/Tractor (Bobtail), 17 - Tractor/Semi-Trailer, 18 - Tractor/Double, 19 - Tractor/Triples, 20 - Other Med/Heavy Vehicle

Bus/Van/Limo (9 or More Including Driver): 21 - Bus/Van (9-15 Seats, Inc Driver), 22 - Bus (16+ Seats, Inc Driver)

Non-Motorist: 23 - Animal with Rider, 24 - Animal with Buggy, Wagon, Surrey, 25 - Bicycle/Pedacyclist, 26 - Pedestrian/Skater, 27 - Other Non-Motorist

Has HM Placard

Special Function: **01** 01 - None, 02 - Taxi, 03 - Rental Truck (Over 10k Lbs), 04 - Bus - School (Public or Private), 05 - Bus - Transit, 06 - Bus - Charter, 07 - Bus - Shuttle, 08 - Bus - Other, 09 - Ambulance, 10 - Fire, 11 - Highway/Maintenance, 12 - Military, 13 - Police, 14 - Public Utility, 15 - Other Government, 16 - Construction Equip., 17 - Farm Vehicle, 18 - Farm Equipment, 19 - Motorhome, 20 - Golf Cart, 21 - Train, 22 - Other (Explain in Narrative)

Most Damaged Area: **06** 01 - None, 02 - Center Front, 03 - Right Front, 04 - Right Side, 05 - Right Rear, 06 - Rear Center, 07 - Left Rear, 08 - Left Side, 09 - Left Front, 10 - Top and Windows, 11 - Undercarriage, 12 - Load/Trailer, 13 - Total(All Areas), 14 - Other

Impact Area: **06**

Action: **5** 1 - Non-Contact, 2 - Non-Collision, 3 - Striking, 4 - Struck, 5 - Striking/Struck, 9 - Unknown

Pre-Crash Actions: **11** Motorist: 01 - Straight Ahead, 02 - Backing, 03 - Changing Lanes, 04 - Overtaking/Passing, 05 - Making Right Turn, 06 - Making Left Turn, 07 - Making U-Turn, 08 - Entering Traffic Lane, 09 - Leaving Traffic Lane, 10 - Parked, 11 - Slowing or Stopped in Traffic, 12 - Driverless, 13 - Negotiating a Curve, 14 - Other Motorist Action

Non-Motorist: 15 - Entering or Crossing Specified Location, 16 - Walking, Running, Jogging, Playing, Cycling, 17 - Working, 18 - Pushing Vehicle, 19 - Approaching or Leaving Vehicle, 20 - Standing, 21 - Other Non-Motorist Action

Contributing Circumstances: Primary: **01** 01 - None, 02 - Failure to Yield, 03 - Ran Red Light, 04 - Ran Stop Sign, 05 - Exceeded Speed Limit, 06 - Unsafe Speed, 07 - Improper Turn, 08 - Left of Center, 09 - Followed Too Closely/ACDA, 10 - Improper Lane Change /Passing/Off Road, 11 - Improper Backing, 12 - Improper Start From Parked Position, 13 - Stopped or Parked Illegally, 14 - Operating Vehicle in Negligent Manner, 15 - Swerving to Avoid (Due to External Conditions), 16 - Wrong Side/Wrong Way, 17 - Failure to Control, 18 - Vision Obstruction, 19 - Operating Defective Equipment, 20 - Load Shifting/Falling/Spilling, 21 - Other Improper Action

Non-Motorist: 22 - None, 23 - Improper Crossing, 24 - Darting, 25 - Lying and/or Illegally in Roadway, 26 - Failure to Yield Right of Way, 27 - Not Visible (Dark Clothing), 28 - Inattentive, 29 - Failure to Obey Traffic Signs /Signals/Officer, 30 - Wrong Side of the Road, 31 - Other Non-Motorist Action

Vehicle Defects: 01 - Turn Signals, 02 - Head Lamps, 03 - Tail Lamps, 04 - Brakes, 05 - Steering, 06 - Tire Blowout, 07 - Worn or Slick tires, 08 - Trailer Equipment Defective, 09 - Motor Trouble, 10 - Disabled From Prior Accident, 11 - Other Defects

Sequence of Events: 1 **20** 2 **20** 3 4 5 6

First Harmful Event: **1** Most Harmful Event: **1**

Non-Collision Events: 01 - Overturn/Rollover, 02 - Fire/Explosion, 03 - Immersion, 04 - Jackknife, 05 - Cargo/Equipment Loss or Shift, 06 - Equipment Failure (Blown Tire, Brake Failure, etc), 07 - Separation of Units, 08 - Ran Off Road Right, 09 - Ran Off Road Left, 10 - Cross Median, 11 - Cross Center Line Opposite Direction of Travel, 12 - Downhill Runaway, 13 - Other Non-Collision

Collision with Person, Vehicle or Object Not Fixed: 14 - Pedestrian, 15 - Pedacyclist, 16 - Railway Vehicle (Train, Engine), 17 - Animal - Farm, 18 - Animal - Deer, 19 - Animal - Other, 20 - Motor Vehicle in Transport, 21 - Parked Motor Vehicle, 22 - Work Zone Maintenance Equipment, 23 - Struck by Falling, Shifting Cargo or Anything Set in Motion by a Motor Vehicle, 24 - Other Movable Object

Collision With Fixed Object: 25 - Impact Attenuator/Crash Cushion, 26 - Bridge Overhead Structure, 27 - Bridge Pier or Abutment, 28 - Bridge Parapet, 29 - Bridge Rail, 30 - Guardrail Face, 31 - Guardrail End, 32 - Portable Barrier, 33 - Median Cable Barrier, 34 - Median Guardrail Barrier, 35 - Median Concrete Barrier, 36 - Median Other Barrier, 37 - Traffic Sign Post, 38 - Overhead Sign Post, 39 - Light/Luminaries Support, 40 - Utility Pole, 41 - Other Post, Pole or Support, 42 - Culvert, 43 - Curb, 44 - Ditch, 45 - Embankment, 46 - Fence, 47 - Mailbox, 48 - Tree, 49 - Fire Hydrant, 50 - Work Zone Maintenance Equipment, 51 - Wall, Building, Tunnel, 52 - Other Fixed Object

Unit Speed: Stated Estimated: **0**

Posted Speed: **25**

Traffic Control: **12** 01 - No Controls, 02 - Stop Sign, 03 - Yield Sign, 04 - Traffic Signal, 05 - Traffic Flashers, 06 - School Zone, 07 - Railroad Crossbucks, 08 - Railroad Flashers, 09 - Railroad Gates, 10 - Construction Barricade, 11 - Person (Flagger, Officer), 12 - Pavement Markings, 13 - Crosswalk Lines, 14 - Walk/Don't Walk, 15 - Other, 16 - Not Reported

Unit Direction: From **1** To **2** 1 - North, 2 - South, 3 - East, 4 - West, 5 - Northeast, 6 - Northwest, 7 - Southeast, 8 - Southwest, 9 - Unknown



Unit

Local Report Number
 1 6 0 4 6 6 8 1

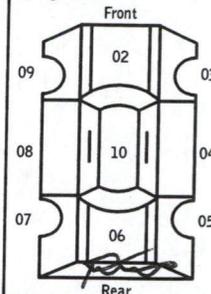
Unit Number: 03 | Owner Name: Last, First, Middle (Same As Driver) Teegarden, Michele | Owner Phone Number - inc. area code (Same As Driver) (513) 720-9272

Owner Address: City, State, Zip (Same As Driver) 776 Fairway Drive Cincinnati, Ohio 45245

LP State: OH | License Plate Number: ESK1722 | Vehicle Identification Number: JHLRD186X1C029874 | # Occupants: 02

Vehicle Year: 2006 | Vehicle Make: Honda | Vehicle Model: Civic | Vehicle Color: White

Proof of Insurance Shown: | Insurance Company: State Farm | Policy Number: 1634326F0535G | Towed By:



Carrier Name, Address, City, State, Zip | Carrier Phone- include area code

US DOT | Vehicle Weight GVWR/GCWR: 1 - Less Than or Equal to 10k Lbs., 2 - 10,001 to 26,000 Lbs., 3 - More Than 26,000 Lbs. | Cargo Body Type: 01 | Trafficway Description: 1 - Two-Way, Not Divided, 2 - Two-Way, Not Divided, Continuous Left Turn Lane, 3 - Two-Way, Divided, Unprotected (Painted or Grass > 4 Ft.) Median, 4 - Two-Way, Divided, Positive Median Barrier, 5 - One-Way Trafficway

HM Placard ID No. | HM Class Number | Hazardous Material Released: | Hit / Skip Unit:

Non-Motorist Location Prior to Impact: 01 - Intersection - Marked Crosswalk, 02 - Intersection - No Crosswalk, 03 - Intersection - Other, 04 - Midblock - Marked Crosswalk, 05 - Travel Lane - Other Location, 06 - Bicycle Lane, 07 - Shoulder/Roadside, 08 - Sidewalk, 09 - Median/Crossing Island, 10 - Driveway Access, 11 - Shared-Use Path or Trail, 12 - Non-Trafficway Area, 99 - Other/Unknown

Type of Use: 1 - Personal, 2 - Commercial, 3 - Government | In Emergency Response:

Unit Type: 02 | Passenger Vehicles (less than 9 passengers): 01 - Sub-Compact, 02 - Compact, 03 - Mid Size, 04 - Full Size, 05 - Minivan, 06 - Sport Utility Vehicle, 07 - Pickup, 08 - Van, 09 - Motorcycle, 10 - Motorized Bicycle, 11 - Snowmobile/ATV, 12 - Other Passenger Vehicle

Med/Heavy Trucks or Combo Units > 10k lbs: 13 - Single Unit Truck or Van 2axle, 6 tires, 14 - Single Unit Truck; 3+ axles, 15 - Single Unit Truck / Trailer, 16 - Truck/Tractor (Bobtail), 17 - Tractor/Semi-Trailer, 18 - Tractor/Double, 19 - Tractor/Triples, 20 - Other Med/Heavy Vehicle

Bus/Van/Limo (9 or More Including Driver): 21 - Bus/Van (9-15 Seats, Inc Driver), 22 - Bus (16+ Seats, Inc Driver)

Non-Motorist: 23 - Animal with Rider, 24 - Animal with Buggy, Wagon, Surrey, 25 - Bicycle/Pedacyclist, 26 - Pedestrian/Skater, 27 - Other Non-Motorist

Has HM Placard:

Special Function: 01 | 01 - None, 02 - Taxi, 03 - Rental Truck (Over 10k Lbs), 04 - Bus - School (Public or Private), 05 - Bus - Transit, 06 - Bus - Charter, 07 - Bus - Shuttle, 08 - Bus - Other, 09 - Ambulance, 10 - Fire, 11 - Highway/Maintenance, 12 - Military, 13 - Police, 14 - Public Utility, 15 - Other Government, 16 - Construction Equip., 17 - Farm Vehicle, 18 - Farm Equipment, 19 - Motorhome, 20 - Golf Cart, 21 - Train, 22 - Other (Explain in Narrative)

Most Damaged Area: 06 | 01 - None, 02 - Center Front, 03 - Right Front, 04 - Right Side, 05 - Right Rear, 06 - Rear Center, 07 - Left Rear, 08 - Left Side, 09 - Left Front, 10 - Top and Windows, 11 - Undercarriage, 12 - Load/Trailer, 13 - Total(All Areas), 14 - Other

Action: 4 | 1 - Non-Contact, 2 - Non-Collision, 3 - Striking, 4 - Struck, 5 - Striking/Struck, 9 - Unknown

Pre-Crash Actions: 11 | Motorist: 01 - Straight Ahead, 02 - Backing, 03 - Changing Lanes, 04 - Overtaking/Passing, 05 - Making Right Turn, 06 - Making Left Turn, 07 - Making U-Turn, 08 - Entering Traffic Lane, 09 - Leaving Traffic Lane, 10 - Parked, 11 - Slowing or Stopped in Traffic, 12 - Driverless, 13 - Negotiating a Curve, 14 - Other Motorist Action

Non-Motorist: 15 - Entering or Crossing Specified Location, 16 - Walking, Running, Jogging, Playing, Cycling, 17 - Working, 18 - Pushing Vehicle, 19 - Approaching or Leaving Vehicle, 20 - Standing, 21 - Other Non-Motorist Action

Contributing Circumstances: Primary: 01 | Motorist: 01 - None, 02 - Failure to Yield, 03 - Ran Red Light, 04 - Ran Stop Sign, 05 - Exceeded Speed Limit, 06 - Unsafe Speed, 07 - Improper Turn, 08 - Left of Center, 09 - Followed Too Closely/ACDA, 10 - Improper Lane Change /Passing/Off Road, 11 - Improper Backing, 12 - Improper Start From Parked Position, 13 - Stopped or Parked Illegally, 14 - Operating Vehicle in Negligent Manner, 15 - Swerving to Avoid (Due to External Conditions), 16 - Wrong Side/Wrong Way, 17 - Failure to Control, 18 - Vision Obstruction, 19 - Operating Defective Equipment, 20 - Load Shifting/Falling/Spilling, 21 - Other Improper Action

Non-Motorist: 22 - None, 23 - Improper Crossing, 24 - Darting, 25 - Lying and/or Illegally in Roadway, 26 - Failure to Yield Right of Way, 27 - Not Visible (Dark Clothing), 28 - Inattentive, 29 - Failure to Obey Traffic Signs /Signals/Officer, 30 - Wrong Side of the Road, 31 - Other Non-Motorist Action

Vehicle Defects: 01 | 01 - Turn Signals, 02 - Head Lamps, 03 - Tail Lamps, 04 - Brakes, 05 - Steering, 06 - Tire Blowout, 07 - Worn or Slick tires, 08 - Trailer Equipment Defective, 09 - Motor Trouble, 10 - Disabled From Prior Accident, 11 - Other Defects

Sequence of Events: 1 20 2 3 4 5 6 | First Harmful Event: 1 | Most Harmful Event: 1 | 99 - Unknown

Collision with Person, Vehicle or Object Not Fixed: 14 - Pedestrian, 15 - Pedacycle, 16 - Railway Vehicle (Train, Engine), 17 - Animal - Farm, 18 - Animal - Deer, 19 - Animal - Other, 20 - Motor Vehicle in Transport, 21 - Parked Motor Vehicle, 22 - Work Zone Maintenance Equipment, 23 - Struck by Falling, Shifting Cargo or Anything Set in Motion by a Motor Vehicle, 24 - Other Movable Object

Collision With Fixed Object: 25 - Impact Attenuator/Crash Cushion, 26 - Bridge Overhead Structure, 27 - Bridge Pier or Abutment, 28 - Bridge Parapet, 29 - Bridge Rail, 30 - Guardrail Face, 31 - Guardrail End, 32 - Portable Barrier, 33 - Median Cable Barrier, 34 - Median Guardrail Barrier, 35 - Median Concrete Barrier, 36 - Median Other Barrier, 37 - Traffic Sign Post, 38 - Overhead Sign Post, 39 - Light/Luminaries Support, 40 - Utility Pole, 41 - Other Post, Pole or Support, 42 - Culvert, 43 - Curb, 44 - Ditch, 45 - Embankment, 46 - Fence, 47 - Mailbox, 48 - Tree, 49 - Fire Hydrant, 50 - Work Zone Maintenance Equipment, 51 - Wall, Building, Tunnel, 52 - Other Fixed Object

Unit Speed: 0 | Posted Speed: 25 | Traffic Control: 12 | 01 - No Controls, 02 - Stop Sign, 03 - Yield Sign, 04 - Traffic Signal, 05 - Traffic Flashers, 06 - School Zone, 07 - Railroad Crossbucks, 08 - Railroad Flashers, 09 - Railroad Gates, 10 - Construction Barricade, 11 - Person (Flagger, Officer), 12 - Pavement Markings, 13 - Crosswalk Lines, 14 - Walk/Don't Walk, 15 - Other, 16 - Not Reported

Unit Direction: From 1 To 2 | 1 - North, 2 - South, 3 - East, 4 - West, 5 - Northeast, 6 - Northwest, 7 - Southeast, 8 - Southwest, 9 - Unknown



Motorist / Non-Motorist / Occupant

Local Report Number
 1 6 0 4 6 6 8 1

Motorist/Non-Motorist

Unit Number: Name: Last, First, Middle: Santiago Guzman, Gerardo
 Date of Birth: 06/26/1970 Age: 46 Gender: M - Male
 Address, City, State, Zip: 393 Deer Run Drive Trenton, Ohio 45067
 Contact Phone- include area code: (513) 317-5104

Injuries: Injured Taken By: EMS Agency: Medical Facility Injured Taken To: Safety Equipment Used: 04
 DOT Compliant: Motorcycle Helmet: Seating Position: 01 Air Bag Usage: 1 Ejection: 1 Trapped: 1

OL State: OH Operator License Number: RU256989 OL Class: 4 No Valid OL: M/C End: Condition: 1 Alcohol/Drug Suspected: 1 Alcohol Test Status: 1 Alcohol Test Type: 1 Alcohol Test Value: Drug Test Status: 1 Drug Test Type: 1

Offense Charged (Local Code): 333.03A Offense Description: ACDA Citation Number: 228597
 Hands-Free Device Used: Driver Distracted By: 1

Motorist/Non-Motorist

Unit Number: Name: Last, First, Middle: Fischer, Monica
 Date of Birth: 03/31/1963 Age: 53 Gender: F - Female
 Address, City, State, Zip: 10029 Fairglen Drive Cincinnati, Ohio 45251
 Contact Phone- include area code: (513) 300-5561

Injuries: Injured Taken By: EMS Agency: Medical Facility Injured Taken To: Safety Equipment Used: 04
 DOT Compliant: Motorcycle Helmet: Seating Position: 01 Air Bag Usage: 1 Ejection: 1 Trapped: 1

OL State: OH Operator License Number: RJ333494 OL Class: 4 No Valid OL: M/C End: Condition: 1 Alcohol/Drug Suspected: 1 Alcohol Test Status: 1 Alcohol Test Type: 1 Alcohol Test Value: Drug Test Status: 1 Drug Test Type: 1

Offense Charged (Local Code): Offense Description: Citation Number: Hands-Free Device Used: Driver Distracted By: 1

Injuries: 1 - No Injury / None Reported, 2 - Possible, 3 - Non-Incapacitating, 4 - Incapacitating, 5 - Fatal
 Injured Taken By: 1 - Not Transported / Treated at Scene, 2 - EMS, 3 - Police, 4 - Other, 9 - Unknown
 Safety Equipment Used: Motorist: 01 - None Used - Vehicle Occupant, 02 - Shoulder Belt Only Used, 03 - Lap Belt Only Used, 04 - Shoulder and Lap Belt Used
 99 - Unknown Safety Equipment
 Non-Motorist: 05 - Child Restraint System-Forward Facing, 06 - Child Restraint System- Rear Facing, 07 - Booster Seat, 08 - Helmet Used
 09 - None Used, 10 - Helmet Used, 11 - Protective Pads Used (Elbows, Knees, Etc), 12 - Reflective Clothing, 13 - Lighting, 14 - Other

Seating Position: 01 - Front - Left Side (Motorcycle Driver), 02 - Front - Middle, 03 - Front - Right Side, 04 - Second - Left Side (Motorcycle Passenger), 05 - Second - Middle, 06 - Second - Right Side
 07 - Third - Left Side (Motorcycle Side Car), 08 - Third - Middle, 09 - Third - Right Side, 10 - Sleeper Section of Cab (Truck), 11 - Passenger in Other Enclosed Cargo Area (Non-Trailing Unit Such as a Bus, Pick-up with Cap), 12 - Passenger in Unenclosed Cargo Area, 13 - Trailing Unit, 14 - Riding on Vehicle Exterior (Non-Trailing Unit), 15 - Non-Motorist, 16 - Other, 99 - Unknown
 Air Bag Usage: 1 - Not Deployed, 2 - Deployed Front, 3 - Deployed Side, 4 - Deployed Both Front/Side, 5 - Not Applicable, 9 - Deployment Unknown

Ejection: 1 - Not Ejected, 2 - Totally Ejected, 3 - Partially Ejected, 4 - Not Applicable
 Trapped: 1 - Not Trapped, 2 - Extricated by Mechanical Means, 3 - Extricated by Non-Mechanical Means
 Operator License Class: 1 - Class A, 2 - Class B, 3 - Class C, 4 - Regular Class (Ohio is "D"), 5 - M/C/Moped Only
 Condition: 1 - Apparently Normal, 2 - Physical Impairment, 3 - Emotional (Depressed, Angry, Disturbed), 4 - Illness, 5 - Fell Asleep, Fainted, Fatigued, 6 - Under The Influence of Medications, Drugs, Alcohol, 7 - Other
 Alcohol/Drug Suspected: 1 - None, 2 - Yes - Alcohol Suspected, 3 - Yes - HBD Not Impaired, 4 - Yes - Drugs Suspected, 5 - Yes - Alcohol and Drugs Suspected

Alcohol Test Status: 1 - None Given, 2 - Test Refused, 3 - Test Given, Contaminated Sample/Unusable, 4 - Test Given, Results Known, 5 - Test Given, Results Unknown
 Alcohol Test Type: 1 - None, 2 - Blood, 3 - Urine, 4 - Breath, 5 - Other
 Drug Test Status: 1 - None Given, 2 - Test Refused, 3 - Test Given, Contaminated Sample/Unusable, 4 - Test Given, Results Known, 5 - Test Given, Results Unknown
 Drug Test Type: 1 - None, 2 - Blood, 3 - Urine, 4 - Other
 Driver Distracted By: 1 - No Distraction Reported, 2 - Phone, 3 - Texting/E-mailing, 4 - Electronic Communication Device, 5 - Other Electronic Device (Navigation Device, Radio, DVD), 6 - Other Inside the Vehicle, 7 - External Distraction

Occupant

Unit Number: Name: Last, First, Middle: Date of Birth: Age: Gender: F - Female
 Address, City, State, Zip: Contact Phone- include area code:

Injuries: Injured Taken By: EMS Agency: Medical Facility Injured Taken To: Safety Equipment Used: DOT Compliant: Motorcycle Helmet: Seating Position: Air Bag Usage: Ejection: Trapped:

Occupant

Unit Number: Name: Last, First, Middle: Date of Birth: Age: Gender: F - Female
 Address, City, State, Zip: Contact Phone- include area code:

Injuries: Injured Taken By: EMS Agency: Medical Facility Injured Taken To: Safety Equipment Used: DOT Compliant: Motorcycle Helmet: Seating Position: Air Bag Usage: Ejection: Trapped:



Motorist / Non-Motorist / Occupant

Local Report Number
1 6 0 4 6 6 8 1

Motorist/Non-Motorist

Motorist/Non-Motorist

Occupant

Unit Number 03	Name: Last, First, Middle Teegarden, Michele	Date of Birth 01271972	Age 44	Gender F - Female M - Male
Address, City, State, Zip 776 Fairway Drive Cincinnati, Ohio 45245			Contact Phone- include area code (513) 720-9272	
Injuries 2	Injured Taken By 1	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used 04
DOT Compliant <input type="checkbox"/> Motorcycle Helmet	Seating Position 01	Air Bag Usage 1	Ejection 1	Trapped 1
OL State OH	Operator License Number RQ522657	OL Class 4	No Valid OL <input type="checkbox"/>	M/C End. <input type="checkbox"/>
Condition 1	Alcohol/Drug Suspected 1	Alcohol Test Status 1	Alcohol Test Type 1	Alcohol Test Value .
Drug Test Status 1	Drug Test Type 1	Offense Charged <input type="checkbox"/> Local Code	Offense Description	Citation Number
Hands-Free <input type="checkbox"/> Device Used	Driver Distracted By 1			
Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender F - Female M - Male
Address, City, State, Zip			Contact Phone- include area code	
Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used
DOT Compliant <input type="checkbox"/> Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
OL State	Operator License Number	OL Class	No Valid OL <input type="checkbox"/>	M/C End. <input type="checkbox"/>
Condition	Alcohol/Drug Suspected	Alcohol Test Status	Alcohol Test Type	Alcohol Test Value
Drug Test Status	Drug Test Type	Offense Charged <input type="checkbox"/> Local Code	Offense Description	Citation Number
Hands-Free <input type="checkbox"/> Device Used	Driver Distracted By			
Injuries 1 - No Injury / None Reported 2 - Possible 3 - Non-Incapacitating 4 - Incapacitating 5 - Fatal	Injured Taken By 1 - Not Transported / Treated at Scene 2 - EMS 3 - Police 4 - Other 9 - Unknown	Safety Equipment Used Motorist 01 - None Used - Vehicle Occupant 02 - Shoulder Belt Only Used 03 - Lap Belt Only Used 04 - Shoulder and Lap Belt Used	99 - Unknown Safety Equipment 05 - Child Restraint System-Forward Facing 06 - Child Restraint System- Rear Facing 07 - Booster Seat 08 - Helmet Used	Non-Motorist 09 - None Used 10 - Helmet Used 11 - Protective Pads Used (Elbows, Knees, Etc)
12 - Reflective Clothing 13 - Lighting 14 - Other				
Seating Position 01 - Front - Left Side (Motorcycle Driver) 02 - Front - Middle 03 - Front - Right Side 04 - Second - Left Side (Motorcycle Passenger) 05 - Second - Middle 06 - Second - Right Side	07 - Third - Left Side (Motorcycle Side Car) 08 - Third - Middle 09 - Third - Right Side 10 - Sleeper Section of Cab (Truck) 11 - Passenger in Other Enclosed Cargo Area (Non-Trailing Unit Such as a Bus, Pick-up with Cap)	12 - Passenger in Unenclosed Cargo Area 13 - Trailing Unit 14 - Riding on Vehicle Exterior (Non-Trailing Unit) 15 - Non-Motorist 16 - Other 99 - Unknown	Air Bag Usage 1 - Not Deployed 2 - Deployed Front 3 - Deployed Side 4 - Deployed Both Front/Side 5 - Not Applicable 9 - Deployment Unknown	
Ejection 1 - Not Ejected 2 - Totally Ejected 3 - Partially Ejected 4 - Not Applicable	Trapped 1 - Not Trapped 2 - Extricated by Mechanical Means 3 - Extricated by Non-Mechanical Means	Operator License Class 1 - Class A 2 - Class B 3 - Class C 4 - Regular Class (Ohio is "D") 5 - MC/Moped Only	Condition 1 - Apparently Normal 2 - Physical Impairment 3 - Emotional (Depressed, Angry, Disturbed) 4 - Illness	Alcohol/Drug Suspected 1 - None 2 - Yes - Alcohol Suspected 3 - Yes - HBD Not Impaired 4 - Yes - Drugs Suspected 5 - Yes - Alcohol and Drugs Suspected
5 - Fell Asleep, Fainted, Fatigued 6 - Under The Influence of Medications, Drugs, Alcohol 7 - Other				
Alcohol Test Status 1 - None Given 2 - Test Refused 3 - Test Given, Contaminated Sample/Unusable 4 - Test Given, Results Known 5 - Test Given, Results Unknown	Alcohol Test Type 1 - None 2 - Blood 3 - Urine 4 - Breath 5 - Other	Drug Test Status 1 - None Given 2 - Test Refused 3 - Test Given, Contaminated Sample/Unusable 4 - Test Given, Results Known 5 - Test Given, Results Unknown	Drug Test Type 1 - None 2 - Blood 3 - Urine 4 - Other	Driver Distracted By 1 - No Distraction Reported 2 - Phone 3 - Texting/E-mailing 4 - Electronic Communication Device 5 - Other Electronic Device (Navigation Device, Radio, DVD) 6 - Other Inside the Vehicle 7 - External Distraction
Unit Number 03	Name: Last, First, Middle Meiser, Jase	Date of Birth 09082006	Age 10	Gender M - Male F - Female
Address, City, State, Zip 776 Fairway Drive Cincinnati, Ohio 45245			Contact Phone- include area code (613) 720-9272	
Injuries 2	Injured Taken By 1	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used 04
DOT Compliant <input type="checkbox"/> Motorcycle Helmet	Seating Position 06	Air Bag Usage 1	Ejection 1	Trapped 1
Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender F - Female M - Male
Address, City, State, Zip			Contact Phone- include area code	
Injuries	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment Used
DOT Compliant <input type="checkbox"/> Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped