ONIO DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT							LOCAL REPORT NUMBER*				
PHOTOS TAKEN OH-2 OH-	OH-2 OH-3 LOCAL INFORMATION						CP2102005062				
SECONDARY CRASH — 0H-1P [] OTH		RTING AGENCY NAME*			NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNI	TS UNIT IN ERROR 98 - ANIMAL			
PRIVATE PROPE		L	08304	L12 - UNSOLVED							
1 - 0117	N: CITY, VILLA	AGE, TOWNSHIP*			CRASH DATE /1	CRASH SEVERITY 1 - FATAL					
83 1 3-TOWNSHIP Mason	RTH LOCA	TION ROAD NAME		ROAD TYPE	02192021 1 LATITUDE DE		2 - SERIOUS INJURY				
2 - SOU 3 - EAS	JTH ST				RD			3 - MINOR INJURY			
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NO	· · · · · · · · · · · · · · · · · · ·	DING Rence Road Name (Road, I	MILEPOST. HO	USE #)	ROAD TYPE	39.35204		SUSPECTED 4 - INJURY POSSIBLE			
2 - SOU 3 - EAS)TH ST	,			RD			5 - PROPERTY DAMAGE			
REFERENCE POINT DIRECTION	1	rsville Route type		ROAD TYPE		-84.32047	(NTERSECTION I	ONLY			
1 - INTERSECTION 1 - NORTH 2 - MILE POST 2 - SOUTH	IR - INTE	RSTATE ROUTE(TP) AL	HW - HIGHWAY	RD - ROAD	WITHIN INTERSECTION OR ON APPROACH						
2-SOUTH 1 3-HOUSE # 2-SOUTH 1 3-EAST 4-WEST	US - FEDE SR - STATI	RAL US ROUTE AV	LA - LANE MP - MILEPOST	SQ - SQUARE ST - STREET	WITHIN INTE	RCHANGE AREA	NUMBER OF APPROACHES				
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASURE	CR - NUME	TE - TERRACE TL - TRAIL									
1 - MILES 2 - FEET	ROADWAY DIV	the st									
	IDED										
LOCATION OF FIRST HARMFUL 1 - ON ROADWAY 9 - CROSS				COLLISION/IM - REAR-TO-REA		DIRECTION OF TRAVE	-	MEDIAN TYPE			
. 1 . 2-ON SHOULDER 10-DRIV	EWAY/ALLE	Y ACCESS BETV	WEEN 5	- BACKING	IX.	1 - NORTH 2 - SOUTH	(-	VIDED FLUSH MEDIAN <4 FEET)			
J-RAIL	VAY GRADE ED USE PAT	CROSSING VEHI	ICLES IN 6	 ANGLE SIDESWIPE, S 	AME DIRECTION	3 - EAST 4 - WEST		DIVIDED FLUSH MEDIAN (≥4 FEET)			
5-ON GORE TRAII 6-OUTSIDE TRAFFIC WAY 13-BIKE		2 - REAR 3 - HEAD		- SIDESWIPE, 0	PPOSITE DIRECTION	4-WEST		VIDED, DEPRESSED MEDIAN VIDED, RAISED MEDIAN			
7 - ON RAMP 14-TOLL	(A	(NY TYPE) THER/UNKNOWN									
8-0FF RAMP 99-0THE	R / UNKNOW		<u> </u>								
WORK ZONE RELATED	WOR 1 - LANE	R K zone type Closure		N OF CRASH IN BEFORE THE 19		CONTOUR	CONDITIO				
WORKERS PRESENT		SHIFT/CROSSOVER ON SHOULDER	1	WARNING SIGN ADVANCE WAR		1 - STRAIGHT LEVEL	1 - DRY	2 2			
LAW ENFORCEMENT PRESENT	J OR ME	DIAN	└ ── 3.	TRANSITION AF	REA	2 - STRAIGHT GRADE	2-WET	1 - CONCRETE 2 - BLACKTOP,			
ACTIVE SCHOOL ZONE	4 - INTER 5 - OTHER	AREA	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT						
LIGHT CONDITION		WEATHE	I R			4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, D	3 - BRICK/BLOCK			
1 - DAYLIGHT		1-CLEAR 2-CLOUDY	6 - SNOW			7-01HERONKNOWN	4 - SLAG, GRAVEL, STONE				
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY		CROSSWINDS SSAND, SOIL, DI	RT, SNOW		NDING, 5 - DIRT						
4 - DARK ROADWAY NOT LIGHTED			EZING DRIZZLE		7 - SLUSH	9 - OTHER/UNKNOWN					
5 - DARK — UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN											
NARRATIVE					1.11			Indicate the north			
Unit #1 was stopped in tr	affic or	n southbound						direction with an "N" on the compass diagram.			
Reading Rd. Unit #2 turr	ned left	t from a private	drive					y compass magram.			
to go south on Reading F	Rd. Un	it #2 struck #1 t	from	D	EADING F		///	/ (N)			
behind. Unity #2 then we				IN.	EADING P						
road and struck a curb, g			j		_			/ (
post at the end of the gas	•	•	. 1				///	`			
United Dairy Farmers.	Pump	, ward belong!	ing to	/							
Officed Daily Familers.			UNITED								
		•	DA FARM								
					_ •						
			K 5 - 1 - 1								
		Scale									
CRASH REPORTED DATE/TIME	TCH DATE / TIME	ARR	IVAL DATE / TIF	ME T	SCENE CLEARED	DATE / TIME	REPORT TAKEN BY				
02192021 1710	021	92021 1710	02	192021 171	3	02192021		POLICE AGENCY			
TOTAL TIME OTHER	TOTAL	OFFICER'S NAME*		CHECKED BY OFFI			MOTORIST				
ROADWAY CLOSED INVESTIGATION TIME N	DWAY CLOSED INVESTIGATION TIME MINUTES Bryant, Kevin OFFICER'S BADGE NUMBE					FIEBRANO					
0 45	84	OFFICER'S BAD 1 1C		·	CHE CKED !	SY OFFICER'S BADGE I	IUMBER*	TO AN EXISTING REPORT SENT TO GDPS)			

OHIO DEF	SOFPUBLIC SAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER								
									CP2102005062								
UNIT#	NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER								
02	RAGLE, MARY, L								03/19/1935 85 F					<u> </u>			
3		•							CONTACT PHONE - INCLUDE AREA CODE								
7505 LA		R West Chester, OH 45 EMS AGENCY (NAME)	SAFETY EQUIPMENT	T SEATING POSITION AIR BAG USAGE EJECTION TRAPPED													
3	TAKEN	Mason City					(MANIG, ULI I)	USED 99	DOT-COMPLIANT SEATING POSITION AIR E			ALK DA		ejection 4	1 1		
		ICENSE NUMBER		OFFENS		r Medical	LOCAL	OFFENSE DESC	RIPTION		<u> </u>	CITA	2 1_ CITATION NUMBER				
OL STATE	De la Contraction de la Contra						CODE					- A STATE OF THE S					
<u> </u>	SELECT UP TO 2	RESTRICTION SELECT		RIVER	ALCO	HOL / DRUG SUSPI	ECTED	CONDITION		COHOL	T EST VALUE	CTATUC		TEST(S			
	SELECT UP 10 2		В	ISTRACTED Y	=	_COHOL MAI	RIJUANA		SIAIUS	YPE	VALUE	STATUS	TYPE	KESUL	T SELECT UPTO 4		
4					THER DRUG		4					السالس					
UNIT#	NAME: LAST, F	•									E OF BIRTH			AGE	GENDER		
01	<u> </u>	DELORESE, ASHCRAF	-T						01/07/1944 77 F								
	STREET, CITY, ST		_						CONTACT PHONE - INCLUDE AREA CODE								
7745 QU INJURIES		West Chester, OH 4506 EMS AGENCY (NAME)	9	Імшверт	AVENTO	MEDICAL FACILITY	ALLE ALTON	CALETY FOR DIMENT	IT DOTA SEATING POSITION AIR BAG USAGE EJECTION TRAPPED								
5	TAKEN BY 1 1	LING AGENOT (NAME)		INJUNED I	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) USED 4				DOT-CO	OMPLIANT	1	AU USAUL	EJEG I IUN	١.,			
OL STATE		ICENSE NUMBER		OFFENS	OFFENSE CHARGED LOCAL				CRIPTION CITATION NUMBE			IMRER	11				
. OH .						CHARGED CODE CODE						1	ATTOM NOWIDER				
OL CLASS	ENDORSEMENT	RESTRICTION SELECT		RIVER					ALCOHOL TEST DRUG TEST(S)								
	SELECT UPTO 2			ISTRACTED Y	AI	LCOHOL MAI	RIJUANA		STATUS T	YPE	VALUE	STATUS	TYPE	RESUL	T SELECT UPTO 4		
4	_4			1	1 OTHER DRUG				1 1 1 1			1 1					
UNIT#	NAME: LAST, F	FIRST, MIDDLE							E OF BIRTH			AGE	GENDER				
ADDRESS:	DDRESS: STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE							
ADDRESS:	INJURED	EMS AGENCY (NAME)		TANIUBERT	AVENITO	: MEDICAL FACILITY	(NAME OF A	SAFETY FOLIDMENT	<u> </u>		SEATING POSIT	ION LID D	10 110 100	FIFATION	T		
INJUNIES	TAKEN BY	EMS AGENCT (NAME)		INJURED	AREN 10	; MICDIGAL PAGILITY	(NAME, CITY)	USED	DOT-C	OMPLIANT	SEATING PUSIT	TON THE R	AG USAGE	EJECTION	TRAPPED		
OL STATE	STATE OPERATOR LICENSE NUMBER OFFENSE C			E CHAI	CHARGED LOCAL OFFENSE			CRIPTION		CITA	CITATION NUMBER						
						CODE											
OL CLASS	OL CLASS ENDORSEMENT RESTRICTION SELECT UP TO 3 DRIVER DISTRACTED BY				ALCOHOL / DRUG SUSPECTED CONDITION			ALCOHOL TEST STATUS TYPE VALUE STATUS				DRUG TEST(S) TYPE RESULT SELECT UP TO 4					
				ALCOHOL MARIJUANA				STATES THE VALUE IS		314103	ATOS TIPE RESULT SELECTOPIO						
TNU	LLLL JRIES	SEATING POSITION		AIR BAG	☐ 0 ⁻	THER DRUG OL CLAS	c	OL DECEDIO	L L		/ER DISTRA	OTTON					
1 - FATAL	JRIES	1-FRONT-LEFT SIDE	1 - NOT 0	DEPLOYED		1-CLASS A		OL RESTRIC	25 A. J. Company		TER DISTRA T DISTRACTED	CHUN	1 - NONE	EST STA	ATUS		
4759 PAGE 1	SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - Front – Middle		OYED FRONT		2 - CLASS B		2 - CDL INTRASTAT	and a Ministration of		NUALLY OPERAT			REFUSED			
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY		3 - FRONT - RIGHT SIDE 4 - DEPLOY			ED BOTH FRONT / SIDE 4 - REGULAR CLASS				NSES DEVICE (TEXTING, T DIALING)								
5 - NO APPAREN	,她一直惊然,这些女子。	4 - SECOND – LEFT SIDE (MOTORCYCLE PASSENGER)	APPLICABLE	PLICABLE (OHIO = D)				A BUS	3-TAL	KING ON HANDS		£ 1. 1. 1. 1. 1. 1.		SULTS KNOWN			
INJURED TAKEN BY 5-SECOND - MIDDLE			9 - DEPLOYMENT UNKNOWN 5 - M/C MOPED ONLY 6 - NO VALID OL				6 - EXCEPT CLASS & CLASS B BUS			MMUNICATION DE KING ON HAND-H	Programme and the		GIVEN, RES	SULTS			
1 - NOT TRANSP /TREATED A		6 - SECOND – RIGHT SIDE 7 - Third – Left side		EJECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO		COI	MMUNICATION DE	VICE	ALCO	HOL TE	ST TYPE		
2-EMS	I JOCHE	(MOTORCYCLE SIDE CAR)	1 - NOT E			H - HAZMAT	MENI	8 - INTERMEDIATE RESTRICTIONS	LICENSE		HER ACTIVITY WI ECTRONIC DEVICE		1 - NONE				
3 - POLICE 8 - THIRD – MIDDLE 9 - THIRD - RIGHT SIDE			2 - PARTIALLY EJECTED M - MOTORCYCLE				9 - LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER 7 - OTHER DISTRACTION		2 - BLOOD 3 - URINE						
10 - SLEEPER SECTION			3 - TOTALLY EJECTED P - PASSENGER 4 - NOT APPLICABLE N - TANKER				10 - LIMITED TO DAY	LIGHT ONLY	ONLY INSIDE THE VEHICLE			4 - BREATH					
SAFETY EQUIPMENT OF TRUCK CAB 1. NONE USED 11 - PASSENGER IN OTHER				Q - MOTOR SCOOTER				11 - LIMITED TO EM 12 - LIMITED - OTHE		YMENT 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE		5-OTHER					
2 - SHOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS,			1 - NOT TRAPPED R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS				13 - MECHANICAL D	VICES 9 - OTHER / UNKNOWN		DRUG TEST TYPE							
3 - LAP BELT ONLY USED PICK-UP WITH CAP) 4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED			2 - EXTRICATED BY T - DOUBLE & TRIPLE TRAILERS				(SPECIAL BRAK CONTROLS, OR C	THER	HER CONDITION		2 - BLOOD						
5 - CHILD RESTRAINT SYSTEM -		CARGO AREA	3 - FREED BY			X - TANKER / HAZMAT			ES) 1 - APPARENTLY NORMAL LES ONLY 2 - PHYSICAL IMPAIRMENT			3 - URINE					
	FORWARD FACING 13 - TRAILING UNIT - CHILD RESTRAINT SYSTEM - 14 - RIDING ON VEHICLE EXTERIOR		NON-MECHANICAL MEANS					15 - MOTOR VEHICLE	S WITHOUT 3 - EMG		OTIONAL (E.G., DEI	ONAL (E.G., DEPRESSED,		4 - OTHER			
REAR FACING (NON-		(NON-TRAILING UNIT)					AIR BRAKES 16 - OUTSIDE MIRRO	GRY, DISTURBED)			DRUG TEST RESULT(S) 1-AMPHETAMINES						
. 5000721102711		15 - NON-MOTORIST 99 - OTHER / UNKNOWN						17 - PROSTHETIC AI		5- FEL	L ASLEEP, FAINT	ED,	筆言 ローバイン	BITURATES			
9 - PROTECTIVE	E PADS USED							18 - OTHER		4	IGUED, ETC. Der the influei	VCE	4	ODIAZEPIN	IES		
(ELBOW, KNEES, ETC,) 10 - REFLECTIVE CLOTHING										OF I	MEDICATIONS / D Cohol		4 - CANN 5 - COCA	IABINOIDS Ine			
11 - LIGHTING -	PEDESTRIAN									1	IER/UNKNOWN	ta Vir	6-OPIA	TES/OPIOI	DS		
/ BICYCLE OF													7 - OTHE 8 - NEGA	:R Ative Resu	ILTS		
化二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十	and a second of the second	医托马氏病 医乳腺 医二氯甲基甲基甲基				-	1.4						,ur				

ı	I	# OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) SROUFE, JAMES, MEL TON R ADDRESS: STREET, CITY, STATE, ZIP (R SAME AS DRIVER)			OWN	IER PHONE: NCL	UDE AREA CODE (X SAME AS DRIVER)	DAMAGE				
님					_	and the second segments		DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE				
OWNER		45 QUAKER CT West Chester, OH 45069 WMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP						L 2 J 2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
Θ-	COMMERC					OMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN				
5			T VEUTAL	E Inclusive Control #	<u> </u>					D AREA(S) L THAT APPLY		
	LP STATE	LICENSE PLATE # DG79ZR		e identification # T13S852248571		VEHICLE YE. 2005	AR VEHICLE MAKE BUIC	40				
	INSURAL	NCE INSURANCE COMP	PANY	INSURANCE POLICY #		COLOR	VEHICLE MODEL	11 12 1		11 12 1		
	INSURAL VERIFI	Mictio	politan	2953017060	GRY		Rainier	10 11 1	2	10 11 1 2		
	TYPE OF USE COMMERCIAL GOVERNMENT RESPONSE US DOT #			TOW	TOWED BY: COMPANY NAME		9 10 2	3	10 2 2			
H		<u> </u>		HICLE WEIGHT GVWR/GCWR	<u>' </u>	HAZARDOUS MATERIAL		8 4 -	<i>[</i>			
ı	INTERI	E HIT/SKIP UNI		1 - ≤10K LBS. 2 - 10,001 - 26K LBS.		MATERIAL RELEASED	CLASS # PLACARD ID #	8 7 6	4	8 7 5 4		
ı	EQUIP			3 - >26K LB5.	PLACARD L			5	11	12 7 5		
ı	_		7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12-GOLF CART 13-SNOWMOBILE		LIVERY VEHICLE) 6+ Passengers)	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)	10 /		12 2		
	3	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14-SINGLE UNIT TRUCK	20 - OTHER		25 - OTHER NON-MOTORIST	<u> </u>	10	1 2		
	UNIT TYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT		26 - BICYCLE	9	9	$\begin{bmatrix} 3 \\ 4 \end{bmatrix}$		
		6 - VAN (9-15 SEATS) 11 - ALL TERRAIN VEHICLE		17 - MOTORHOME	22 - ANIMAL WITH RIDER OR Animal-drawn vehicle		27 - TRAIN 99 - Unknown or hit/skip	8	7 7	alta 74		
ē	_ 0 _	(ATV/UTV) # of trailing units						12	7	6 5 12		
VERIFOLE		WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - I				CONDITIONAL AUTOMATION 9 - UNKNOWN		11 12		11 12		
>	. 2 .	MODE WHEN CRASH OCCURRED? 0 1 - DRIVER			4 - HIGH AUTOMATION			10/ 11/ 1	7	10 1 2		
	ا کا	1-YES 2-NO 9-OTHER/UNK	KNOWN AUTONOMOUS 2 - PARTIAL AUTOMATION MODE LEVEL			UTOMATION		9 9 3	3	9		
		1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE			21 - MAIL CARRIER	8 4 -	<i>!</i>			
	1	2 FLECTRONIC DIDE CHARING			17 - MOWING 18 - SNOW REMOVAL		99 - OTHER / UNKNOWN	6	4	8 6 6		
I	SPECIAL FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14-PUBLIC UTILITY	19-TOWIN	G		6 5		7 6 5		
		5 - BUS -TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL				12	12 12		
	1 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	NOTHER 5 - INTERMODAL CONTAINER CHASSIS		TANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12	1			
	CARGO BODY	2 - BU\$	4 - LOGGING		10 -FLAT BED 11 - DUMP		14 - GARBAGE/REFUSE	A A R.		3 9 3 3		
	TYPE			7 - GRAIN/CHIPS/GRAVEL			99-OTHER/UNKNOWN] ''())' '		3 9 3 3		
		1 - TURN SIGNALS 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	7 - WORN OR SLICKTIRES 8 - Trailer Equipment	9 - MOTOR	TROUBLE Led from Prior	99 - OTHER / UNKNOWN	6				
	DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCID			_	6	6 6		
7		1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIA	N/CROSSING ISLAND	12-FIRST RESPONDER	_ NO DAMAGE	[0]	UNDERCARRIAGE [14]		
	NON-MOTORIST				10 - DRIVEWAY ACCESS		AT INCIDENT SCENE 99-OTHER/UNKNOWN	□-TOP [13]		- ALL AREAS [15]		
	LOCATION AT IMPACT					D USE PATHS OR S	77-01112KY OKKNOWN	□-UN	IIT NOT	AT SCENE [16]		
		1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN			13 - NEGOT	TATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING	INITI	AI POIN	IT OF CONTACT		
ı	1 4 1	2-NON-COLLISION 3-STRIKING 11	11		14-ENTERING OR CROSSING Specified Location			INITIAL POINT OF CONTACT 0 - NO DAMAGE 14 - UNDERCARRIAGE				
	ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING		15-WALKING, RUNNING, Jogging, Playing		20 - OTHER NON-MOTORIST	7 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE				
		5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN 11 - SLOWING OR STOPPED & STRUCK 6 - MAKING LIFTTINEN INTRAFFIC 1			16 - WORK	•	21 - STANDING OUTSIDE DISABLED VEHICLE	99 - UNKNOWN 13 - TOP				
ı		9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	12-DRIVERLESS	17 - PUSHI	NG VEHICLE	99 - OTHER / UNKNOWN		TRA	FFIC		
		1-NONE	7 - LEFT OF CENTER	DADICED DACITION		OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW		TRAFFIC CONTROL		
	. 1 .	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8-FOLLOWING TOO CLOSE / ACT 9-IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	18-OPERA EQUIP	TING DEFECTIVE Ment	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - 0NE-WAY 2 - TW0-WAY		1 - ROUNDABOUT 4 - STOP SIGN		
		4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD S	SHIFTING/FALLING/	ROADWAY		6	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL		
(S)	CIRCUMSTANCES	5 - UNSAFE SPEED 6 - IMPROPER TURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	PROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER		PILLING 99-OTHER IMPROPER ACTION APROPER CROSSING		# of THROUGH LANES		RAIL GRADE CROSSING		
EVENT(S)	SEQUENCE	QUENCE OF EVENTS						ON ROAD		1 - NOT INVOLVED		
Ī	00	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS 11 - Cross centerline —	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM		22 - WORK ZONE MAINTENANCE	3	1	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING		
	1 20	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	ADDANTE DIDECTION OF			EQUIPMENT		ON 140-	The state of the s		
	21 1	3 - IMMERSION 4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	18 - ANIMA	IL — DEER IL — OTHER	23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNII/N	ORIST DIRECTION 1 - NORTH 5 - NORTHEAST			
		5 - CARGO/EQUIPMENT	10 - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - Pedestrian		VEHICLE IN	ANYTHING SET IN MOTION By a motor vehicle	1	2 - SOUTH 6 - NORTHWEST			
	3	LOSS OR SHIFT		TE BURLEAUS: W		D MOTOR VEHICLE	24-OTHER MOVABLE OBJECT	FROM 1 TO	_ 2	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST		
		25 - IMPACT ATTENUATOR	COLLISIO 31-GUARDRAIL END	N WITH FIXED OBJECT 37-TRAFFIC SIGN POST	- STR 43-CURB	UCK	50 - WORK ZONE MAINTENANCE	-		9 - OTHER / UNKNOWN		
	4	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH		EQUIPMENT	UNIT SPEED		DETECTED SPEED		
	5Li	STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39-LIGHT/LUMINARIES SUPPORT	45 - EMBAI 46 - FENCE		51 - WALL 52 - Building	, , ,		1 - STATED / ESTIMATED SPEED		
		27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	IDGE PIER OR ABUTMENT BARRIER 40 - UTILITY POLE IDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE IDGE RAIL BARRIER OR SUPPORT		47 -MAILBOX 48 -TREE 49 -FIRE HYDRANT		53 - TUNNEL		'	2 - CALCULATED / EDR		
	6	29 - BRIDGE RAIL					54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED		3 - UNDETERMINED		
	4	30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT						25				
		FIRST HARMFUL EVEN	IT LL MOST I	HARMFUL EVENT								

54 - OTHER FIXED OBJECT

99-OTHER/UNKNOWN

POSTED SPEED

25

28 - BRIDGE PARAPET

30 - GUARDRAIL FACE

☐ FIRST HARMFUL EVENT

」 29 - BRIDGE RAIL

35 - MEDIAN CONCRETE

36 - MEDIAN OTHER BARRIER

BARRIER

41 - OTHER POST, POLE

OR SUPPORT

■ MOST HARMFUL EVENT

48-TREE

49 - FIRE HYDRANT

3 - UNDETERMINED



OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION

