

# OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 10/99)

State Seal: **OHIO**

LOCAL REPORT #\*: **2012014866**

CRASH SEVERITY: **3** 1 FATAL 3 PDO  
2 Injury 4 Unknown

PRIVATE PROPERTY:

HIT / SKIP: **1** 1 NOT HIT / SKIP  
2 SOLVED  
3 UNSOLVED

PHOTOS TAKEN: **Y**

OH-2 **X** OH-3  OH-1P  OTHR

NCIC #: **08304** REPORTING AGENCY\*: **City of Mason - City of Mason Police Depart**

# UNITS: **2** UNIT ERROR: **01** 88=ANIMAL 89=UNKNOWN

DATE OF CRASH\*: **07032012**

TIME OF CRASH: **14:10** DAY OF WEEK: **Tue** CITY\*: **X** VILLAGE\*:  TWP\*:

NAME (OF CITY, VILLAGE OR TOWNSHIP)\*: **Mason** COUNTY #\*: **83** LATITUDE:  LONGITUDE:

CRASH OCCURRED ON: PREFIX:  CRASH LOCATION: **Mason-Montgomery Road** TYPE LOC: **1**

TYPE LOCATION POINT USED: 1 NAMED STREET 3 NUMBERED ROUTE 2 NUMBERED STREET

LOCAL INFORMATION:

CRASH AT / REFERENCE: DIST REFERENCE: **100.00** DR: **E** PREFIX:  REFERENCE: **Mason-Montgomery Road** REF POINT: **02**

REFERENCE POINT USED: 01 STATE LINE 02 INTERSECTION 2 STREETS 03 COUNTY LINE 04 HOUSE NUMBER 05 TOWNSHIP BOUNDARY 06 MILE POST 07 CORPORATION LIMIT 08 PLACE NAME W/O REFERENCE 09 DRIVEWAY 10 STREET OR ROUTE W/O REFERENCE

UNIT #: **A** 1 2 NAME (LAST, FIRST, MIDDLE): **Oppy, Ricky J**

ADDRESS (STREET, CITY, STATE, ZIP CODE): **330 Charlotte Avenue, Lebanon OH, 45036**

SOCIAL SECURITY NUM:  DATE OF BIRTH: **06171964** AGE: **48** SEX: **M** HOME PHONE #: **(513) 932-3822** WORK PHONE #:

IL STATE: **OH** IL #: **RN105867** LP STATE: **OH** LP #: **236YFQ** INJURED TAKEN BY: 1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY:  INJURED TAKEN TO:

OWNER'S NAME (IF SAME WRITE "SAME"): **City of Mason - Public Works** ADDRESS (STREET, CITY, STATE, ZIP CODE): **4211 State Route 741, Mason, OH 45040**

YEAR: **2001** MAKE: **FORD** MODEL:  COLOR: **WHI** INSURANCE COMPANY: **Miami Valley Risk Management** TOWING SERVICE:  OWNER PHONE #: **513-229-8500(W)**

OFFENSE CHARGED: **331.13** OFFENSE DESCRIPTION: **Starting and Backing Vehicles** CITATION #: **71633** LOCAL CODE?: **X**

UNIT #: **B** 2 1 NAME (LAST, FIRST, MIDDLE): **Ferguson, Linda L**

ADDRESS (STREET, CITY, STATE, ZIP CODE): **12010 Carrington Lane, Apt: 104, Loveland OH, 45140**

SOCIAL SECURITY NUM:  DATE OF BIRTH: **11221947** AGE: **64** SEX: **F** HOME PHONE #: **(513) 324-6832** WORK PHONE #:

IL STATE: **OH** IL #: **RM238560** LP STATE: **OH** LP #: **EWU1861** INJURED TAKEN BY: 1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY:  INJURED TAKEN TO:

OWNER'S NAME (IF SAME WRITE "SAME"): **Ferguson, Michael** ADDRESS (STREET, CITY, STATE, ZIP CODE): **Same**

YEAR: **2009** MAKE: **HYUN** MODEL: **Elantra** COLOR: **GRY** INSURANCE COMPANY: **Liberty Mutual** TOWING SERVICE:  OWNER PHONE #: **513-324-6832(H)**

OFFENSE CHARGED:  OFFENSE DESCRIPTION:  CITATION #:  LOCAL CODE?:

UNIT #: **C** 1 NAME (LAST, FIRST, MIDDLE): **Vogelsang, Ben** HOME PHONE #: **513-777-0907** DATE OF BIRTH: **10161963** AGE: **48** SEX: **M**

ADDRESS (STREET, CITY, STATE, ZIP CODE): **7711 Kyles Station Road, Middletown OH,**

INJURED TAKEN BY:  1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY:  INJURED TAKEN TO:

UNIT #: **D** NAME (LAST, FIRST, MIDDLE):  HOME PHONE #:  DATE OF BIRTH:  AGE:  SEX:

ADDRESS (STREET, CITY, STATE, ZIP CODE):

INJURED TAKEN BY:  1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY:  INJURED TAKEN TO:

SEATING POSITION	SAFETY EQUIPMENT	AIR BAG	AIR BAG SWITCH	EJECTION	TRAPPED	INJURIES
01 A 01 FRONT - LEFT (MC DRIVER)	04 A 01 NONE USED	1 A 01 NOT DEPLOYED	1 A 01 NOT PRESENT	1 A 01 NOT EJECTED	1 A 01 NOT TRAPPED	1 A 01 NO INJURY
02 A 02 FRONT - MIDDLE	02 A 02 SHOULDER BELT ONLY	02 A 02 DEPLOYED - FRONT	02 A 02 IN ON POSITION	02 A 02 TOTALLY EJECTED	02 A 02 EXTRACTED BY MECHANICAL MEANS	02 A 02 POSSIBLE
03 A 03 FRONT - RIGHT	03 A 03 LAP BELT ONLY	03 A 03 DEPLOYED - SIDE	03 A 03 IN OFF POSITION	03 A 03 PARTIALLY EJECTED	03 A 03 FREED BY MEANS	03 A 03 NON-
04 B 04 SECOND - LEFT (MC PASS)	04 B 04 SHOULDER LAP BELT	04 B 04 DEPLOYED BOTH FRONT / SIDE	04 B 04 UNKNOWN POSITION	04 B 04 NOT APPLIED	04 B 04 INCAPACITATED BY MEANS	04 B 04 INCAPACITATED
05 B 05 SECOND - MIDDLE	05 B 05 CHILD SAFETY SEAT	05 B 05 NOT APPLIED		05 B 05 UNKNOWN	05 B 05 NON-MECHANICAL MEANS	05 B 05 FATAL INJURY
06 B 06 SECOND - RIGHT	06 B 06 MC HELMET USED	06 B 06 UNKNOWN			06 B 06 UNKNOWN	06 B 06 UNKNOWN
07 C 07 THIRD - LEFT (MC PASSENGER SIDE CAR)	07 C 07 USE UNKNOWN					
08 C 08 THIRD - MIDDLE	08 C 08 NON-MOTORIST	1 C 01 NOT DEPLOYED	1 C 01 NOT PRESENT	1 C 01 NOT EJECTED	1 C 01 NOT TRAPPED	1 C 01 NO INJURY
09 C 09 THIRD - RIGHT	09 C 09 NONE USED	02 C 02 DEPLOYED - FRONT	02 C 02 IN ON POSITION	02 C 02 TOTALLY EJECTED	02 C 02 EXTRACTED BY MECHANICAL MEANS	02 C 02 POSSIBLE
10 D 10 SLEEPER SECTION OF CAB	10 D 10 HELMET USED	03 C 03 DEPLOYED - SIDE	03 C 03 IN OFF POSITION	03 C 03 PARTIALLY EJECTED	03 C 03 FREED BY MEANS	03 C 03 NON-
11 D 11 ENCLOSED CARGO AREA	11 D 11 PROTECTIVE PADS	04 C 04 DEPLOYED BOTH FRONT / SIDE	04 C 04 UNKNOWN POSITION	04 C 04 NOT APPLIED	04 C 04 INCAPACITATED BY MEANS	04 C 04 INCAPACITATED
12 D 12 UNENCLOSED CARGO AREA	12 D 12 REFLECTIVE CLOTHING	05 C 05 NOT APPLIED		05 C 05 UNKNOWN	05 C 05 NON-MECHANICAL MEANS	05 C 05 FATAL INJURY
13 D 13 TRAILING UNIT	13 D 13 OTHER	06 C 06 UNKNOWN			06 C 06 UNKNOWN	06 C 06 UNKNOWN
14 D 14 EXTERIOR	14 D 14 UNKNOWN					
15 D 15 OTHER						
16 D 16 NON-MOTORIST						
17 D 17 UNKNOWN						

BLANK FOR WITNESS

SUPPLEMENT "X" IF YES

**Narrative**

Unit 1 attempted to back up on Nixon Park Drive striking unit 2.

**MANNER OF COLLISION OR IMPACT**

**SCHOOL BUS RELATED**

**5**

01 NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT  
 02 REAR-END  
 03 HEAD-ON  
 04 REAR-TO-REAR  
 05 BACKING  
 06 ANGLE  
 07 SIDESWIRE, SAME DIRECTION  
 08 SIDESWIRE, OPPOSITE DIRECTION  
 09 UNKNOWN

**1**

01 NO  
 02 YES, DIRECTLY INVOLVED  
 03 YES, INDIRECTLY INVOLVED  
 04 UNKNOWN

**WEATHER**

**01**

01 CLEAR  
 02 CLOUDY  
 03 FOG, SMOG, SMOKE  
 04 RAIN  
 05 SLEET, HAIL (FREEZING RAIN DRIZZLE)  
 06 SNOW  
 07 SEVERE CROSSWINDS  
 08 BLOWING SAND, SOIL, DIRT, SNOW  
 09 OTHER  
 10 UNKNOWN

**WORK ZONE RELATED**

**1**

01 NO  
 02 YES  
 03 UNKNOWN

**TYPE OF WORK ZONE**

01 LANE CLOSURE  
 02 LANE SHIFT/CROSSOVER  
 03 WORK ON SHOULDER OR MEDIAN  
 04 INTERMITTENT/MOVING WORK  
 05 OTHER

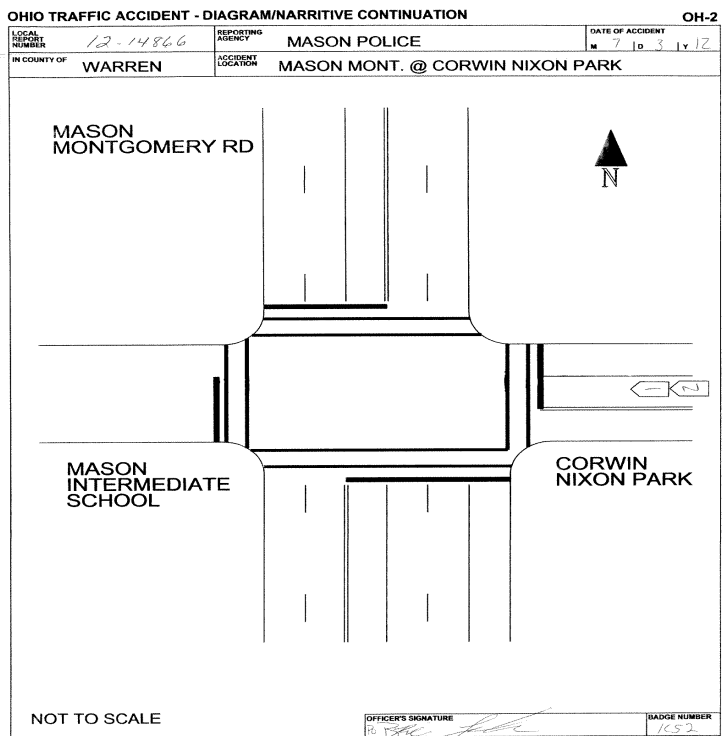
**LOCATION OF CRASH IN WORK ZONE**

01 BEFORE FIRST WORK ZONE WARNING SIGN  
 02 ADVANCE WARNING AREA  
 03 TRANSITION AREA  
 04 ACTIVITY AREA

**WORKERS PRESENT**

01 NO  
 02 YES  
 03 UNKNOWN

**Diagram**



**Truck/Bus**

THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING:  
 A TRUCK (MOTOR VEHICLE) WITH A GVWR MORE THAN 10,000 POUNDS; OR  
 A TRUCK (MOTOR VEHICLE) WITH A HAZARDOUS MATERIALS PLACARD; OR  
 A BUS DESIGNED FOR AT LEAST 8 PERSONS, INCLUDING DRIVER.

**A  
N  
D**

THE CRASH RESULTED IN ONE OR MORE OF THE FOLLOWING:  
 A FATALITY; OR  
 AN INJURY REQUIRING TRANSPORTATION FOR IMMEDIATE MEDICAL TREATMENT; OR  
 AT LEAST ONE VEHICLE WAS TOWED DUE TO DISABLING DAMAGE OR REQUIRED  
 INTERVENING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER.

Unit#

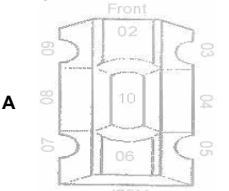
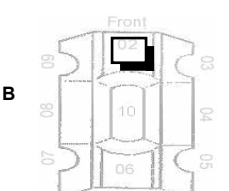
COMPANY (FROM SHIPPING PAPERS)  COMPANY PHONE

ADDRESS (STREET, CITY, ST, ZIP CODE)

US DOT	ICC MC	EUCO	TRAILER LP ST.	TRAILER LP YEAR	TRAILER LP#	PLACARD #	# DIA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CARGO BODY TYPE	WEIGHT (GVWR)	CDL Class	Hazardous Materials Placard	Hazardous Materials Released			
01 NOT APPLI CABLE 02 BUS (9-15 INCLUDING DRIVER) 03 VAN ENCLOSED BOX 04 GRAIN CHIPS/ GRAVEL	05 POLE 06 CARGO TAN 07 FLATBED 08 DUMP 09 CONCRETE MIXER 10 AUTO TRANSPORTER 11 GARBAGE/ REFUSE 12 OTHER 13 UNKNOWN	01 CLASS A 02 CLASS B 03 CLASS C 04 CLASS M 05 CLASS D	01 NO 02 YES 03 UNKNOWN	01 NO 02 YES 03 NOT APPLI CABLE 04 UNKNOWN			

**Police Action**

DATE CRASH REPORTED	TIME REC CALL	DISPATCH	ARRIVED	CLEARED	OTHER	TOTAL MINUTES
07/03/2012	14:10	14:11	14:11	14:29	0.00	18.82
OFFICER'S NAME*	PAGE #*	CHECKED BY	DATE REPORT FILED*			
Police Officer Brian M Lahman	1C52		07/06/2012			
REPORT TAKEN BY <b>1</b>	REPORT TAKEN AT <b>1</b>	SUPPLEMENT * "X" IF YES	LOCAL REPORT #			
01 POLICE AGENCY 02 MOTORIST	01 SCENE 02 STATION 03 OTHER		2012000014866			

<b>UNIT NUMBERS</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">2 <small>B</small></div> </div>	<b>DAMAGE AREA</b>  	<b>PRE-CRASH ACTIONS</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">02 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">11 <small>B</small></div> </div>	<b>SEQUENCE OF EVENTS</b> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 50%; padding: 2px;">20 <small>1</small></td> <td style="width: 50%; padding: 2px;">20 <small>1</small></td> </tr> <tr> <td style="padding: 2px;">2 <small>2</small></td> <td style="padding: 2px;">2 <small>2</small></td> </tr> <tr> <td style="padding: 2px;">3 <small>3</small></td> <td style="padding: 2px;">3 <small>3</small></td> </tr> <tr> <td style="padding: 2px;">4 <small>4</small></td> <td style="padding: 2px;">4 <small>4</small></td> </tr> </table>	20 <small>1</small>	20 <small>1</small>	2 <small>2</small>	2 <small>2</small>	3 <small>3</small>	3 <small>3</small>	4 <small>4</small>	4 <small>4</small>	<b>POSTED SPEED</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">25 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">25 <small>B</small></div> </div>	<b>DRUG TEST STATUS</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>B</small></div> </div>				
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3 <small>3</small>	3 <small>3</small>																
4 <small>4</small>	4 <small>4</small>																
<b>NON-MOTORIST LOCATION</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">A</div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">B</div> </div>	<b>MOST DAMAGED AREA</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">01 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">02 <small>B</small></div> </div>	<b>MOTORIST</b> 01 MOVEMENTS ESSENTIALLY STRAIGHT AHEAD 02 BACKING 03 CHANGING LANES 04 OVERTAKING/PASSING 05 TURNING RIGHT 06 TURNING LEFT 07 MAKING U-TURN 08 ENTERING TRAFFIC LANE 09 LEAVING TRAFFIC LANE 10 PARKED 11 SLOWING/STOPPING IN TRAFFIC 12 DRIVERLESS 13 OTHER 14 UNKNOWN  <b>NON-MOTORIST</b> 15 ENTERING / CROSSING IN INTERSECTION 16 SPECIALIZED LOCATION 17 WALKING, RUNNING, JOGGING, PLAYING, CYCLING 18 WORKING 19 PUSHING VEHICLE 20 APPROACHING/LEAVING VEHICLE 21 PLAYING / WORKING ON VEHICLE 22 STANDING 23 OTHER 24 UNKNOWN	<b>NON-COLLISION</b> 01 OVERTURN/ROLLOVER 02 FIRE/EXPLOSION 03 IMMERSION 04 JACKKNIFE 05 CARGO EQUIPMENT LOSS / SHIFTS 06 EQUIPMENT FAILURE 07 SEPARATION OF UNITS 08 RAN OFF ROAD RIGHT 09 RAN OFF ROAD LEFT 10 CROSS MEDIAN/CENTERLINE 11 DOWNHILL RUNAWAY 12 OTHER NON-COLLISION 13 UNKNOWN NON-COLLISION  <b>COLLISION w/ PERSON, VEHICLE, OR OBJECT, NOT FIXED</b> 14 PEDESTRIAN 15 PEDICYCLE 16 RAILWAY VEHICLE 17 ANIMAL - FARM 18 ANIMAL - DEER 19 ANIMAL - OTHER 20 MOTOR VEHICLE IN TRANSPORT 21 PARKED MOTOR VEHICLE 22 WORK ZONE MAINTENANCE EQUIPMENT 23 OTHER MOVABLE OBJECT 24 UNKNOWN MOVABLE OBJECT  <b>COLLISION WITH FIXED OBJECT</b> 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 MEDIAN BARRIER 33 HIGHWAY TRAFFIC SIGN POST 34 OVERHEAD SIGN POST 35 LIGHT/LUMINAIRE SUPPORT 36 UTILILITY POLE 37 OTHER POST, POLE OR SUPPORT 38 CULVERT 39 CURB 40 DITCH 41 EMBANKMENT 42 FENCE 43 MAILBOX 44 TREE 45 OTHER FIXED OBJECT 46 WORK ZONE MAINTENANCE EQUIPMENT 47 UNKNOWN FIXED OBJECT 48 OTHER 49 UNKNOWN	<b>TRAFFIC CONTROL</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">04 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">04 <small>B</small></div> </div>	<b>DRUG TEST TYPE</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>B</small></div> </div>												
<b>TYPE OF UNIT</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">09 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">03 <small>B</small></div> </div>	<b>POINT OF IMPACT</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">01 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">02 <small>B</small></div> </div>	<b>CONTRIBUTING CIRCUMSTANCES</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">10 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">01 <small>B</small></div> </div>	<b>DIIRECTION</b> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 25%;">FROM</td> <td style="width: 25%;">TO</td> <td style="width: 25%;">FROM</td> <td style="width: 25%;">TO</td> </tr> <tr> <td style="padding: 2px;">4 <small>A</small></td> <td style="padding: 2px;">3 <small>B</small></td> <td style="padding: 2px;">3 <small>A</small></td> <td style="padding: 2px;">4 <small>B</small></td> </tr> </table>	FROM	TO	FROM	TO	4 <small>A</small>	3 <small>B</small>	3 <small>A</small>	4 <small>B</small>	<b>DRUG TEST 1&amp;2 RESULT</b> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 50%; padding: 2px;">1 <small>A</small></td> <td style="width: 50%; padding: 2px;">1 <small>B</small></td> </tr> <tr> <td style="padding: 2px;">2 <small>A</small></td> <td style="padding: 2px;">2 <small>B</small></td> </tr> </table>	1 <small>A</small>	1 <small>B</small>	2 <small>A</small>	2 <small>B</small>	<b>TYPE OF INTERSECTION</b> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">02</div>
FROM	TO	FROM	TO														
4 <small>A</small>	3 <small>B</small>	3 <small>A</small>	4 <small>B</small>														
1 <small>A</small>	1 <small>B</small>																
2 <small>A</small>	2 <small>B</small>																
<b>MOTORIST</b> 01 SUB-COMPACT 02 COMPACT 03 MID SIZE 04 FULL SIZE 05 MINI VAN 06 SPORT UTILITY VEHICLE 07 PICKUP 08 PANEL VAN 09 SINGLE UNIT TRUCK; 10 2 AXLES, 6 TIRES 11 SINGLE UNIT TRUCK; 3+AXLES 12 TRUCK/ TRAILER 13 TRUCK TRACTOR (BOBTAIL) 14 TRACTOR/SEMI-TRAILER 15 TRACTOR/DOUBLE SHORT 16 TRACTOR/DOUBLE LONG 17 FIFTH WHEEL OR CONVERTER DOLLY 18 TRACTOR/TRIPLES 19 MOTORCYCLE 20 MOTOR ZED BICYCLE 21 SCHOOL BUS 22 CHURCH BUS 23 PUBLIC BUS 24 OTHER BUS 25 POLICE VEHICLE 26 FIRE TRUCK 27 AMBULANCE/RESCUE 28 TAXI 29 MOTOR HOME 30 TRAIN 31 FARM VEHICLE 32 FARM EQUIPMENT 33 SNOWMOBILE 34 CONSTRUCTION EQUIPMENT 35 ALL OTHERS	<b>ACTION</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">4 <small>B</small></div> </div>	<b>MOTORIST</b> 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 15 UNKNOWN	<b>CONDITON</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>B</small></div> </div>	<b>ALCOHOL/ DRUG SUSPECTED</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>B</small></div> </div>	<b>OCCURRENCE</b> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1</div>												
<b>NON-MOTORIST</b> 35 ANIMAL W/ RIDER 36 ANIMAL W/ BUGGY 37 BICYCLE 38 PEDESTRIAN 39 PEDALCYCLIST 40 SKATER 41 OTHER-NON MOTORIST 42 UNKNOWN	<b>STRIKING VEHICLE: OVERRIDEN/ UNDERRIDDEN</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">B</div> </div>	<b>VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">A</div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">B</div> </div>	<b>FIRST HARMFUL EVENT</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>B</small></div> </div>	<b>ALCOHOL TEST STATUS</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>B</small></div> </div>	<b>ROAD CONTOUR</b> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1</div>												
<b>LINE EMERGENCY RESPONSE</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">A</div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">B</div> </div>	<b>DAMAGE SCALE</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">2 <small>B</small></div> </div>	<b>VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE</b> 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 CRASH 11 OTHER DEFECTS	<b>MOST HARMFUL EVENT</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>B</small></div> </div>	<b>ALCOHOL TEST TYPE</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>A</small></div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">1 <small>B</small></div> </div>	<b>ROAD CONDITIONS</b> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 50%; padding: 2px;">PRIMARY</td> <td style="width: 50%; padding: 2px;">SECONDARY</td> </tr> <tr> <td style="padding: 2px;">01</td> <td style="padding: 2px;">B</td> </tr> </table>	PRIMARY	SECONDARY	01	B								
PRIMARY	SECONDARY																
01	B																
01 NO 02 YES 03 UNKNOWN	01 NO UNDERDRIVE OR OVERRIDE 02 UNDERDRIVE, COMPARTMENT INTRUSION 03 UNDERDRIVE, NO COMPARTMENT INTRUSION 04 UNDERDRIVE, COMPARTMENT INTRUSION UNKNOWN 05 OVERRIDE, MOTOR VEHICLE IN TRANSPORT 06 OVERRIDE, OTHER VEHICLE 07 UNKNOWN	01 NONE 02 NON-FUNCTIONAL DAMAGE 03 FUNCTIONAL DAMAGE 04 DISABLING DAMAGE 05 SEVERE 06 UNKNOWN	01 NONE 02 TEST REFUSED 03 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 04 TEST GIVEN, RESULTS KNOWN 05 TEST GIVEN, RESULTS UNKNOWN 06 UNKNOWN	01 NONE 02 BLOOD 03 URINE 04 OTHER	01 DRY 02 WET 03 SNOW 04 ICE 05 SAND, MUD, DRY, OIL, GRAVEL 06 WATER/STANDING / MOVENG 07 SLUSH 08 DEBRIS 09 RUTS, HOLES, BUMPS, UNEVEN PAVEMENT 10 OTHER 11 UNKNOWN 12 SECONDARY ROAD CONDITIONS ONLY												
				<b>ALCOHOL TEST RESULT</b> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">A</div> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">B</div> </div>		<b>SUPPLEMENTS *X* IF YES</b> <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">LOCAL REPORT#*</div>		<b>201200014866</b>									

**OHIO TRAFFIC ACCIDENT - STATEMENT CONTINUATION**

LOCAL REPORT NUMBER	REPORTING AGENCY <b>Mason Police Department</b>	
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