

# TRAFFIC CRASH REPORT

\*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER \*  
25-OPD-0418

<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> SECONDARY CRASH <input checked="" type="checkbox"/> PRIVATE PROPERTY		LOCAL INFORMATION REPORTING AGENCY NAME * Oxford Police Department NCIC * 00907		HIT/SKIP 1 - SOLVED 2 - UNSOLVED		NUMBER OF UNITS 2		UNIT IN ERROR 98 - ANIMAL 99 - UNKNOWN					
COUNTY* 9	LOCALITY* 1 - CITY 2 - VILLAGE 3 - TOWNSHIP 1	LOCATION: CITY, VILLAGE, TOWNSHIP* Oxford			CRASH DATE / TIME* 05/13/2025 22:55		CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY						
ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 2	LOCATION ROAD NAME Locust		ROAD TYPE ST	LATITUDE DECIMAL DEGREES 39.504471		INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES					
ROUTE TYPE	ROUTE NUMBER	PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) 601		ROAD TYPE	LONGITUDE DECIMAL DEGREES -84.748756							
REFERENCE POINT 1 - INTERSECTION 2 - MILE POST 3 - HOUSE # 3	DIRECTION FROM REFERENCE 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 1	ROUTE TYPE IR - INTERSTATE ROUTE (TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE		ROAD TYPE AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY		ROADWAY <input type="checkbox"/> ROADWAY DIVIDED							
DISTANCE FROM REFERENCE 0.00	DISTANCE UNIT OF MEASURE 1 - MILES 2 - FEET 3 - YARDS 2	LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP 8 - OFF RAMP 9 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS 11 - RAILWAY GRADE CROSSING 12 - SHARED USE PATHS OR TRAILS 13 - BIKE LANE 14 - TOLL BOOTH 99 - OTHER / UNKNOWN		MANNER OF CRASH COLLISION/IMPACT 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 - OTHER / UNKNOWN		DIRECTION OF TRAVEL 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST		MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN (≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER / UNKNOWN					
<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE		WORK ZONE TYPE 1 - LANE CLOSURE 2 - LANE SHIFT/ CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER		LOCATION OF CRASH IN WORK ZONE 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		CONTOUR 1 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER / UNKNOWN		CONDITIONS 1 1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL 6 - WATER (STANDING, MOVING) 7 - SLUSH 9 - OTHER / UNKNOWN		SURFACE 2 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER / UNKNOWN			
LIGHT CONDITION 1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN 3		WEATHER 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 - FREEZING RAIN OR FREEZING DRIZZLE 99 - OTHER / UNKNOWN 1		NARRATIVE Unit 1 backed into Unit 2 in the parking lot of 601 S. Locust Street, Oxford, OH. Unit 1 then fled the scene. Witness gathered license plate of skipping vehicle. Unit 2 was parked, unoccupied and suffered cosmetic damage to bumper. Unit 2's rear bumper had pre-existing functional damage. Unit 1 driver has been unable to be identified.									
CRASH REPORTED DATE / TIME 05/13/2025 22:56						DISPATCH DATE / TIME 05/13/2025 23:03		ARRIVAL DATE / TIME 05/13/2025 23:13		SCENE CLEARED DATE / TIME 05/13/2025 23:42		REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	
TOTAL TIME ROADWAY CLOSED		OTHER INVESTIGATION TIME		TOTAL MINUTES		OFFICER'S NAME*		CHECKED BY OFFICER'S NAME*		SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODP)			
				39		Hellwarth, Paul		King, David					
				OFFICER'S BADGE NUMBER*		CHECKED BY OFFICER'S BADGE NUMBER*							
				44		30							



<b>UNIT #</b> 1	<b>OWNER NAME:</b> LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER ) RICE, ROBERT, W	<b>OWNER PHONE:</b> INCLUDE AREA CODE ( <input type="checkbox"/> SAME AS DRIVER )
<b>OWNER ADDRESS:</b> STREET, CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER ) 111 VERLYN AVE, HAMILTON, OH, 450132425		
<b>COMMERCIAL CARRIER:</b> NAME, ADDRESS, CITY, STATE, ZIP		<b>COMMERCIAL CARRIER PHONE:</b> INCLUDE AREA CODE

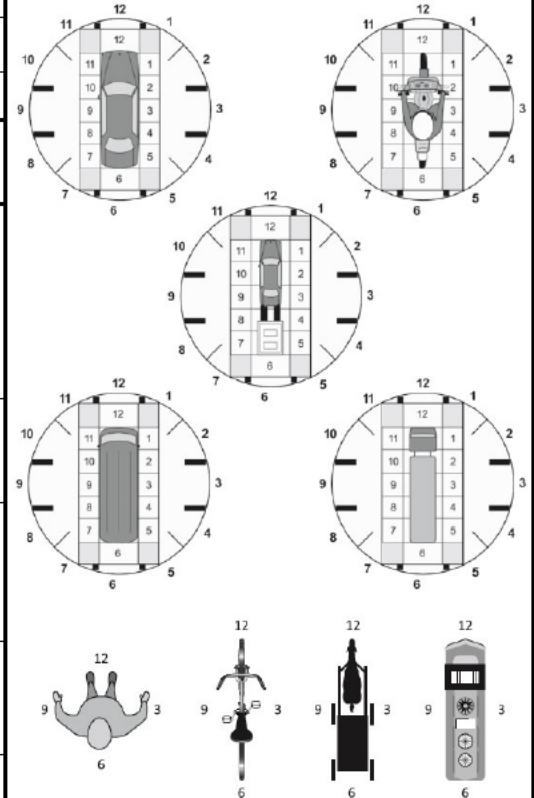
**DAMAGE**

**DAMAGE SCALE**

1 - NONE	3 - FUNCTIONAL DAMAGE
2 - MINOR DAMAGE	4 - DISABLING DAMAGE
9 - UNKNOWN	

**DAMAGED AREA(S)**

INDICATE ALL THAT APPLY



NO DAMAGE [ 0 ]       UNDERCARRIAGE [ 14 ]

TOP [ 13 ]       ALL AREAS [ 15 ]

UNIT NOT AT SCENE [ 16 ]

**INITIAL POINT OF CONTACT**

0 - NO DAMAGE	14 - UNDERCARRIAGE
1-12 - REFER TO UNIT DIAGRAM	15 - VEHICLE NOT AT SCENE
99 - UNKNOWN	

**TRAFFIC**

<b>TRAFFICWAY FLOW</b> 1 - ONE-WAY 2 - TWO-WAY [ 1 ]	<b>TRAFFIC CONTROL</b> 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL [ 6 ]
<b># OF THROUGH LANES ON ROAD</b> [ 1 ]	<b>RAIL GRADE CROSSING</b> 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING [ 1 ]
<b>UNIT / NON-MOTORIST DIRECTION</b> FROM [ 6 ] TO [ 7 ]	
<b>UNIT SPEED</b> [ 5 ]	<b>DETECTED SPEED</b> 1 - STATED / ESTIMATED SPEED [ 1 ] 2 - CALCULATED / EDR 3 - UNDETERMINED
<b>POSTED SPEED</b> [ ]	

<b>LP STATE</b> OH	<b>LICENSE PLATE #</b> JUC6409	<b>VEHICLE IDENTIFICATION #</b> 5NPET46C98H333575	<b>VEHICLE YEAR</b> 2008	<b>VEHICLE MAKE</b> HYUNDAI																														
<input type="checkbox"/> <b>INSURANCE VERIFIED</b>	<b>INSURANCE COMPANY</b>	<b>INSURANCE POLICY #</b>	<b>COLOR</b> GLD	<b>VEHICLE MODEL</b> OTHER/UNKNOWN																														
<b>TYPE OF USE</b> <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE		<b>US DOT #</b>	<b>TOWED BY:</b> COMPANY NAME																															
<input type="checkbox"/> <b>INTERLOCK DEVICE EQUIPPED</b>	<input checked="" type="checkbox"/> <b>HIT/SKIP UNIT</b>	<b># OCCUPANTS</b> 1	<b>HAZARDOUS MATERIAL</b> <input type="checkbox"/> MATERIAL RELEASED <input type="checkbox"/> PLACARD <b>CLASS #</b> <b>PLACARD ID #</b>																															
<b>UNIT TYPE</b> [ 1 ]	<table border="0"> <tr> <td>1 - PASSENGER CAR</td> <td>6 - VAN (9-15 SEATS)</td> <td>12 - GOLF CART</td> <td>18 - LIMO (LIVERY VEHICLE)</td> <td>23 - PEDESTRIAN/SKATER</td> </tr> <tr> <td>2 - PASSENGER VAN (MINIVAN)</td> <td>7 - MOTORCYCLE 2-WHEELED</td> <td>13 - SNOWMOBILE</td> <td>19 - BUS (16+ PASSENGERS)</td> <td>24 - WHEELCHAIR (ANY TYPE)</td> </tr> <tr> <td>3 - SPORT UTILITY VEHICLE</td> <td>8 - MOTORCYCLE 3-WHEELED</td> <td>14 - SINGLE UNIT TRUCK</td> <td>20 - OTHER VEHICLE</td> <td>25 - OTHER NON-MOTORIST</td> </tr> <tr> <td>4 - PICK UP</td> <td>9 - AUTOCYCLE</td> <td>15 - SEMI-TRACTOR</td> <td>21 - HEAVY EQUIPMENT</td> <td>26 - BICYCLE</td> </tr> <tr> <td>5 - CARGO VAN</td> <td>10 - MOPED OR MOTORIZED BICYCLE</td> <td>16 - FARM EQUIPMENT</td> <td>22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE</td> <td>27 - TRAIN</td> </tr> <tr> <td></td> <td>11 - ALL TERRAIN VEHICLE (ATV/UTV)</td> <td>17 - MOTORHOME</td> <td>99 - UNKNOWN OR HIT/SKIP</td> <td></td> </tr> </table>				1 - PASSENGER CAR	6 - VAN (9-15 SEATS)	12 - GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN/SKATER	2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED	13 - SNOWMOBILE	19 - BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED	14 - SINGLE UNIT TRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST	4 - PICK UP	9 - AUTOCYCLE	15 - SEMI-TRACTOR	21 - HEAVY EQUIPMENT	26 - BICYCLE	5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	16 - FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN		11 - ALL TERRAIN VEHICLE (ATV/UTV)	17 - MOTORHOME	99 - UNKNOWN OR HIT/SKIP	
1 - PASSENGER CAR	6 - VAN (9-15 SEATS)	12 - GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN/SKATER																														
2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED	13 - SNOWMOBILE	19 - BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)																														
3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED	14 - SINGLE UNIT TRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST																														
4 - PICK UP	9 - AUTOCYCLE	15 - SEMI-TRACTOR	21 - HEAVY EQUIPMENT	26 - BICYCLE																														
5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	16 - FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN																														
	11 - ALL TERRAIN VEHICLE (ATV/UTV)	17 - MOTORHOME	99 - UNKNOWN OR HIT/SKIP																															
<b># of TRAILING UNITS</b> [ 0 ]	<b>WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?</b>																																	
[ ] 1 - YES    2 - NO    9 - OTHER / UNKNOWN		[ ] 0 - NO AUTOMATION    [ ] 1 - DRIVER ASSISTANCE		[ ] 3 - CONDITIONAL AUTOMATION    [ ] 4 - HIGH AUTOMATION																														
[ ] 2 - PARTIAL AUTOMATION    [ ] 5 - FULL AUTOMATION																																		
<b>SPECIAL FUNCTION</b> [ 1 ]	<table border="0"> <tr> <td>1 - NONE</td> <td>6 - BUS - CHARTER/TOUR</td> <td>11 - FIRE</td> <td>16 - FARM</td> <td>21 - MAIL CARRIER</td> </tr> <tr> <td>2 - TAXI</td> <td>7 - BUS - INTERCITY</td> <td>12 - MILITARY</td> <td>17 - MOWING</td> <td>99 - OTHER / UNKNOWN</td> </tr> <tr> <td>3 - ELECTRONIC RIDE SHARING</td> <td>8 - BUS - SHUTTLE</td> <td>13 - POLICE</td> <td>18 - SNOW REMOVAL</td> <td></td> </tr> <tr> <td>4 - SCHOOL TRANSPORT</td> <td>9 - BUS - OTHER</td> <td>14 - PUBLIC UTILITY</td> <td>19 - TOWING</td> <td></td> </tr> <tr> <td>5 - BUS - TRANSIT/COMMUTER</td> <td>10 - AMBULANCE</td> <td>15 - CONSTRUCTION EQUIP.</td> <td>20 - SAFETY SERVICE PATROL</td> <td></td> </tr> </table>				1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16 - FARM	21 - MAIL CARRIER	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - MOWING	99 - OTHER / UNKNOWN	3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE	18 - SNOW REMOVAL		4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19 - TOWING		5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIP.	20 - SAFETY SERVICE PATROL						
1 - NONE	6 - BUS - CHARTER/TOUR	11 - FIRE	16 - FARM	21 - MAIL CARRIER																														
2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - MOWING	99 - OTHER / UNKNOWN																														
3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE	18 - SNOW REMOVAL																															
4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19 - TOWING																															
5 - BUS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIP.	20 - SAFETY SERVICE PATROL																															
<b>CARGO BODY TYPE</b> [ 1 ]	<table border="0"> <tr> <td>1 - NO CARGO BODY TYPE / NOT APPLICABLE</td> <td>4 - LOGGING</td> <td>7 - GRAIN/CHIPS/GRAVEL</td> <td>11 - DUMP</td> <td>99 - OTHER / UNKNOWN</td> </tr> <tr> <td>2 - BUS</td> <td>5 - INTERMODAL CONTAINER CHASSIS</td> <td>8 - POLE</td> <td>12 - CONCRETE MIXER</td> <td></td> </tr> <tr> <td>3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE</td> <td>6 - CARGOVAN /ENCLOSED BOX</td> <td>9 - CARGO TANK</td> <td>13 - AUTO TRANSPORTER</td> <td></td> </tr> <tr> <td></td> <td></td> <td>10 - FLAT BED</td> <td>14 - GARBAGE/REFUSE</td> <td></td> </tr> </table>				1 - NO CARGO BODY TYPE / NOT APPLICABLE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99 - OTHER / UNKNOWN	2 - BUS	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE	12 - CONCRETE MIXER		3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	6 - CARGOVAN /ENCLOSED BOX	9 - CARGO TANK	13 - AUTO TRANSPORTER				10 - FLAT BED	14 - GARBAGE/REFUSE											
1 - NO CARGO BODY TYPE / NOT APPLICABLE	4 - LOGGING	7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99 - OTHER / UNKNOWN																														
2 - BUS	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE	12 - CONCRETE MIXER																															
3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	6 - CARGOVAN /ENCLOSED BOX	9 - CARGO TANK	13 - AUTO TRANSPORTER																															
		10 - FLAT BED	14 - GARBAGE/REFUSE																															
<b>VEHICLE DEFECTS</b>	<table border="0"> <tr> <td>1 - TURN SIGNALS</td> <td>4 - BRAKES</td> <td>7 - WORN OR SLICK TIRES</td> <td>9 - MOTOR TROUBLE</td> <td>99 - OTHER / UNKNOWN</td> </tr> <tr> <td>2 - HEAD LAMPS</td> <td>5 - STEERING</td> <td>8 - TRAILER EQUIPMENT DEFECTIVE</td> <td>10 - DISABLED FROM PRIOR ACCIDENT</td> <td></td> </tr> <tr> <td>3 - TAIL LAMPS</td> <td>6 - TIRE BLOWOUT</td> <td></td> <td></td> <td></td> </tr> </table>				1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT		3 - TAIL LAMPS	6 - TIRE BLOWOUT																		
1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN																														
2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT																															
3 - TAIL LAMPS	6 - TIRE BLOWOUT																																	

<b>NON-MOTORIST LOCATION</b> [ ]	<table border="0"> <tr> <td>1 - INTERSECTION - MARKED CROSSWALK</td> <td>4 - MIDBLOCK - MARKED CROSSWALK</td> <td>7 - SHOULDER/ROADSIDE</td> <td>10 - DRIVEWAY ACCESS</td> <td>99 - OTHER / UNKNOWN</td> </tr> <tr> <td>2 - INTERSECTION - UNMARKED CROSSWALK</td> <td>5 - TRAVEL LANE - OTHER LOCATION</td> <td>8 - SIDEWALK</td> <td>11 - SHARED USE PATHS OR TRAILS</td> <td></td> </tr> <tr> <td>3 - INTERSECTION - OTHER</td> <td>6 - BICYCLE LANE</td> <td>9 - MEDIAN/CROSSING ISLAND</td> <td>12 - FIRST RESPONDER AT INCIDENT SCENE</td> <td></td> </tr> </table>				1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER/ROADSIDE	10 - DRIVEWAY ACCESS	99 - OTHER / UNKNOWN	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS		3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER AT INCIDENT SCENE																										
1 - INTERSECTION - MARKED CROSSWALK	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER/ROADSIDE	10 - DRIVEWAY ACCESS	99 - OTHER / UNKNOWN																																								
2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS																																									
3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER AT INCIDENT SCENE																																									
<b>ACTION</b> [ 3 ]	<b>PRE-CRASH ACTIONS</b> [ 2 ]	<table border="0"> <tr> <td>1 - NON-CONTACT</td> <td>1 - STRAIGHT AHEAD</td> <td>9 - LEAVING TRAFFIC LANE</td> <td>15 - WALKING, RUNNING, JOGGING, PLAYING</td> <td>21 - STANDING OUTSIDE DISABLED VEHICLE</td> </tr> <tr> <td>2 - NON-COLLISION</td> <td>2 - BACKING</td> <td>10 - PARKED</td> <td>16 - WORKING</td> <td>99 - OTHER / UNKNOWN</td> </tr> <tr> <td>3 - STRIKING</td> <td>3 - CHANGING LANES</td> <td>11 - SLOWING OR STOPPED IN TRAFFIC</td> <td>17 - PUSHING VEHICLE</td> <td></td> </tr> <tr> <td>4 - STRUCK</td> <td>4 - OVERTAKING/PASSING</td> <td>12 - DRIVERLESS</td> <td>18 - APPROACHING OR LEAVING VEHICLE</td> <td></td> </tr> <tr> <td>5 - BOTH STRIKING &amp; STRUCK</td> <td>5 - MAKING RIGHT TURN</td> <td>13 - NEGOTIATING A CURVE</td> <td>19 - STANDING</td> <td></td> </tr> <tr> <td>9 - OTHER / UNKNOWN</td> <td>6 - MAKING LEFT TURN</td> <td>14 - ENTERING OR CROSSING SPECIFIED LOCATION</td> <td>20 - OTHER NON-MOTORIST</td> <td></td> </tr> <tr> <td></td> <td>7 - MAKING U-TURN</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>8 - ENTERING TRAFFIC LANE</td> <td></td> <td></td> <td></td> </tr> </table>			1 - NON-CONTACT	1 - STRAIGHT AHEAD	9 - LEAVING TRAFFIC LANE	15 - WALKING, RUNNING, JOGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE	2 - NON-COLLISION	2 - BACKING	10 - PARKED	16 - WORKING	99 - OTHER / UNKNOWN	3 - STRIKING	3 - CHANGING LANES	11 - SLOWING OR STOPPED IN TRAFFIC	17 - PUSHING VEHICLE		4 - STRUCK	4 - OVERTAKING/PASSING	12 - DRIVERLESS	18 - APPROACHING OR LEAVING VEHICLE		5 - BOTH STRIKING & STRUCK	5 - MAKING RIGHT TURN	13 - NEGOTIATING A CURVE	19 - STANDING		9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	14 - ENTERING OR CROSSING SPECIFIED LOCATION	20 - OTHER NON-MOTORIST			7 - MAKING U-TURN					8 - ENTERING TRAFFIC LANE			
1 - NON-CONTACT	1 - STRAIGHT AHEAD	9 - LEAVING TRAFFIC LANE	15 - WALKING, RUNNING, JOGGING, PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE																																								
2 - NON-COLLISION	2 - BACKING	10 - PARKED	16 - WORKING	99 - OTHER / UNKNOWN																																								
3 - STRIKING	3 - CHANGING LANES	11 - SLOWING OR STOPPED IN TRAFFIC	17 - PUSHING VEHICLE																																									
4 - STRUCK	4 - OVERTAKING/PASSING	12 - DRIVERLESS	18 - APPROACHING OR LEAVING VEHICLE																																									
5 - BOTH STRIKING & STRUCK	5 - MAKING RIGHT TURN	13 - NEGOTIATING A CURVE	19 - STANDING																																									
9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	14 - ENTERING OR CROSSING SPECIFIED LOCATION	20 - OTHER NON-MOTORIST																																									
	7 - MAKING U-TURN																																											
	8 - ENTERING TRAFFIC LANE																																											
<b>CONTRIBUTING CIRCUMSTANCES</b> [ 12 ]	<table border="0"> <tr> <td>1 - NONE</td> <td>8 - FOLLOWING TOO CLOSE /ACDA</td> <td>13 - IMPROPER START FROM A PARKED POSITION</td> <td>18 - OPERATING DEFECTIVE EQUIPMENT</td> <td>23 - OPENING DOOR INTO ROADWAY</td> </tr> <tr> <td>2 - FAILURE TO YIELD</td> <td>9 - IMPROPER LANE CHANGE</td> <td>14 - STOPPED OR PARKED ILLEGALLY</td> <td>19 - LOAD SHIFTING /FALLING/SPILLING</td> <td>99 - OTHER IMPROPER ACTION</td> </tr> <tr> <td>3 - RAN RED LIGHT</td> <td>10 - IMPROPER PASSING</td> <td>15 - SWERVING TO AVOID</td> <td>20 - IMPROPER CROSSING</td> <td></td> </tr> <tr> <td>4 - RAN STOP SIGN</td> <td>11 - DROVE OFF ROAD</td> <td>16 - WRONG WAY</td> <td>21 - LYING IN ROADWAY</td> <td></td> </tr> <tr> <td>5 - UNSAFE SPEED</td> <td>12 - IMPROPER BACKING</td> <td>17 - VISION OBSTRUCTION</td> <td>22 - NOT DISCERNIBLE</td> <td></td> </tr> <tr> <td>6 - IMPROPER TURN</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>7 - LEFT OF CENTER</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>				1 - NONE	8 - FOLLOWING TOO CLOSE /ACDA	13 - IMPROPER START FROM A PARKED POSITION	18 - OPERATING DEFECTIVE EQUIPMENT	23 - OPENING DOOR INTO ROADWAY	2 - FAILURE TO YIELD	9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY	19 - LOAD SHIFTING /FALLING/SPILLING	99 - OTHER IMPROPER ACTION	3 - RAN RED LIGHT	10 - IMPROPER PASSING	15 - SWERVING TO AVOID	20 - IMPROPER CROSSING		4 - RAN STOP SIGN	11 - DROVE OFF ROAD	16 - WRONG WAY	21 - LYING IN ROADWAY		5 - UNSAFE SPEED	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION	22 - NOT DISCERNIBLE		6 - IMPROPER TURN					7 - LEFT OF CENTER									
1 - NONE	8 - FOLLOWING TOO CLOSE /ACDA	13 - IMPROPER START FROM A PARKED POSITION	18 - OPERATING DEFECTIVE EQUIPMENT	23 - OPENING DOOR INTO ROADWAY																																								
2 - FAILURE TO YIELD	9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY	19 - LOAD SHIFTING /FALLING/SPILLING	99 - OTHER IMPROPER ACTION																																								
3 - RAN RED LIGHT	10 - IMPROPER PASSING	15 - SWERVING TO AVOID	20 - IMPROPER CROSSING																																									
4 - RAN STOP SIGN	11 - DROVE OFF ROAD	16 - WRONG WAY	21 - LYING IN ROADWAY																																									
5 - UNSAFE SPEED	12 - IMPROPER BACKING	17 - VISION OBSTRUCTION	22 - NOT DISCERNIBLE																																									
6 - IMPROPER TURN																																												
7 - LEFT OF CENTER																																												

<b>SEQUENCE OF EVENTS</b>				
1	[ 21 ]	1 - OVERTURN/ROLLOVER	7 - SEPARATION OF UNITS	12 - DOWNHILL RUNAWAY
2	[ ]	2 - FIRE/EXPLOSION	8 - RAN OFF ROAD RIGHT	13 - OTHER NON-COLLISION
3	[ ]	3 - IMMERSION	9 - RAN OFF ROAD LEFT	14 - PEDESTRIAN
4	[ ]	4 - JACKKNIFE	10 - CROSS MEDIAN	15 - PEDALCYCLE
5	[ ]	5 - CARGO / EQUIPMENT LOSS OR SHIFT	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE
6	[ ]	6 - EQUIPMENT FAILURE		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
<b>COLLISION WITH FIXED OBJECT - STRUCK</b>				
4	[ ]	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END	38 - OVERHEAD SIGN POST
5	[ ]	26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER	39 - LIGHT / LUMINARIES SUPPORT
6	[ ]	27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER	40 - UTILITY POLE
	[ ]		34 - MEDIAN GUARDRAIL BARRIER	41 - OTHER POST, POLE OR SUPPORT
	[ ]		35 - MEDIAN CONCRETE BARRIER	42 - CULVERT
	[ ]		36 - MEDIAN OTHER BARRIER	43 - CURB
	[ ]		37 - TRAFFIC SIGN POST	44 - DITCH
	[ ]			45 - EMBANKMENT
	[ ]			46 - FENCE
	[ ]			47 - MAILBOX
	[ ]			48 - TREE
	[ ]			49 - FIRE HYDRANT
	[ ]			50 - WORK ZONE MAINTENANCE EQUIPMENT
	[ ]			51 - WALL
	[ ]			52 - BUILDING
	[ ]			53 - TUNNEL
	[ ]			54 - OTHER FIXED OBJECT
	[ ]			99 - OTHER / UNKNOWN
1	[ ]	<b>FIRST HARMFUL EVENT</b>		
1	[ ]	<b>MOST HARMFUL EVENT</b>		

**OWNER**

UNIT # 2 OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER) **SHOCKLEY, MORGAN, HENRY**

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER) **7791 CAMDEN COLLEGE CORNER RD, COLLEGE CORNER, OH, 450039281**

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP \_\_\_\_\_ COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE \_\_\_\_\_

**VEHICLE**

LP STATE OH LICENSE PLATE # JWV3151 VEHICLE IDENTIFICATION # 1FAHP2E82EG140256 VEHICLE YEAR 2014 VEHICLE MAKE FORD

INSURANCE VERIFIED  INSURANCE COMPANY \_\_\_\_\_ INSURANCE POLICY # \_\_\_\_\_ COLOR RED VEHICLE MODEL FUSION

TYPE OF USE:  COMMERCIAL  GOVERNMENT  IN EMERGENCY RESPONSE

US DOT # \_\_\_\_\_ TOWED BY: COMPANY NAME \_\_\_\_\_

HAZARDOUS MATERIAL:  MATERIAL RELEASED  PLACARD CLASS # \_\_\_\_\_ PLACARD ID # \_\_\_\_\_

VEHICLE WEIGHT GVWR/GCWR:  1 - ≤ 10K LBS.  2 - 10.001 - 26K LBS.  3 - > 26K LBS.

UNIT TYPE: 1

# OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 2

AUTONOMOUS MODE LEVEL: 0

SPECIAL FUNCTION: 1

CARGO BODY TYPE: 1

VEHICLE DEFECTS: 1

NON-MOTORIST LOCATION: 1

ACTION: 4

PRE-CRASH ACTIONS: 10

CONTRIBUTING CIRCUMSTANCES: 1

SEQUENCE OF EVENTS: 1

EVENTS: 20

COLLISION WITH FIXED OBJECT - STRUCK: 1

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

SEQUENCE OF EVENTS: 1

COLLISION WITH FIXED OBJECT - STRUCK: 1

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

**LOCAL REPORT NUMBER**

25-OPD-0418

**DAMAGE**

**DAMAGE SCALE**

2 1 - NONE 3 - FUNCTIONAL DAMAGE  
2 - MINOR DAMAGE 4 - DISABLING DAMAGE  
9 - UNKNOWN

**DAMAGED AREA(S)**

INDICATE ALL THAT APPLY

NO DAMAGE [ 0 ]  UNDERCARRIAGE [ 14 ]

TOP [ 13 ]  ALL AREAS [ 15 ]

UNIT NOT AT SCENE [ 16 ]

**INITIAL POINT OF CONTACT**

6 0 - NO DAMAGE 14 - UNDERCARRIAGE  
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE  
99 - UNKNOWN  
13 - TOP

**TRAFFIC**

**TRAFFICWAY FLOW**: 1 1 - ONE-WAY 2 - TWO-WAY

**TRAFFIC CONTROL**: 6 1 - ROUNDABOUT 4 - STOP SIGN  
2 - SIGNAL 5 - YIELD SIGN  
3 - FLASHER 6 - NO CONTROL

**# OF THROUGH LANES ON ROAD**: 1

**RAIL GRADE CROSSING**: 1 1 - NOT INVOLVED  
2 - INVOLVED-ACTIVE CROSSING  
3 - INVOLVED-PASSIVE CROSSING

**UNIT / NON-MOTORIST DIRECTION**

FROM 9 TO 9

1 - NORTH 5 - NORTHEAST  
2 - SOUTH 6 - NORTHWEST  
3 - EAST 7 - SOUTHEAST  
4 - WEST 8 - SOUTHWEST  
9 - OTHER / UNKNOWN

**UNIT SPEED**: 0

**POSTED SPEED**: \_\_\_\_\_

**DETECTED SPEED**: 1 1 - STATED / ESTIMATED SPEED  
2 - CALCULATED / EDR  
3 - UNDETERMINED

# MOTORIST / Non-MOTORIST

LOCAL REPORT NUMBER  
25-OPD-0418

<b>UNIT #</b> 1	<b>NAME: LAST, FIRST, MIDDLE</b>					<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>			
<b>ADDRESS: STREET, CITY, STATE, ZIP</b>					<b>CONTACT PHONE - INCLUDE AREA CODE</b>							
<b>INJURIES</b>	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>		<b>SAFETY EQUIPMENT USED</b>	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	<b>SEATING POSITION</b>	<b>AIR BAG USAGE</b>	<b>EJECTION</b>	<b>TRAPPED</b>		
<b>OL STATE</b>	<b>OPERATOR LICENSE NUMBER</b>		<b>OFFENSE CHARGED</b>		<b>LOCAL CODE</b> <input type="checkbox"/>	<b>OFFENSE DESCRIPTION</b>			<b>CITATION NUMBER</b>			
<b>OL CLASS</b>	<b>ENDORSEMENT</b>	<b>RESTRICTION SELECT UP TO 3</b>	<b>DRIVER DISTRACTED BY</b>	<b>ALCOHOL / DRUG SUSPECTED</b> <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b>	<b>ALCOHOL TEST</b>		<b>DRUG TEST(S)</b>			
							STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS SELECT UP TO 4

<b>UNIT #</b>	<b>NAME: LAST, FIRST, MIDDLE</b>					<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>			
<b>ADDRESS: STREET, CITY, STATE, ZIP</b>					<b>CONTACT PHONE - INCLUDE AREA CODE</b>							
<b>INJURIES</b>	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>		<b>SAFETY EQUIPMENT USED</b>	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	<b>SEATING POSITION</b>	<b>AIR BAG USAGE</b>	<b>EJECTION</b>	<b>TRAPPED</b>		
<b>OL STATE</b>	<b>OPERATOR LICENSE NUMBER</b>		<b>OFFENSE CHARGED</b>		<b>LOCAL CODE</b> <input type="checkbox"/>	<b>OFFENSE DESCRIPTION</b>			<b>CITATION NUMBER</b>			
<b>OL CLASS</b>	<b>ENDORSEMENT</b>	<b>RESTRICTION SELECT UP TO 3</b>	<b>DRIVER DISTRACTED BY</b>	<b>ALCOHOL / DRUG SUSPECTED</b> <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b>	<b>ALCOHOL TEST</b>		<b>DRUG TEST(S)</b>			
							STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS SELECT UP TO 4

<b>UNIT #</b>	<b>NAME: LAST, FIRST, MIDDLE</b>					<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>			
<b>ADDRESS: STREET, CITY, STATE, ZIP</b>					<b>CONTACT PHONE - INCLUDE AREA CODE</b>							
<b>INJURIES</b>	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>		<b>SAFETY EQUIPMENT USED</b>	<input type="checkbox"/> DOT-COMPLIANT <input type="checkbox"/> MC HELMET	<b>SEATING POSITION</b>	<b>AIR BAG USAGE</b>	<b>EJECTION</b>	<b>TRAPPED</b>		
<b>OL STATE</b>	<b>OPERATOR LICENSE NUMBER</b>		<b>OFFENSE CHARGED</b>		<b>LOCAL CODE</b> <input type="checkbox"/>	<b>OFFENSE DESCRIPTION</b>			<b>CITATION NUMBER</b>			
<b>OL CLASS</b>	<b>ENDORSEMENT</b>	<b>RESTRICTION SELECT UP TO 3</b>	<b>DRIVER DISTRACTED BY</b>	<b>ALCOHOL / DRUG SUSPECTED</b> <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		<b>CONDITION</b>	<b>ALCOHOL TEST</b>		<b>DRUG TEST(S)</b>			
							STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS SELECT UP TO 4

INJURIES	SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION	TEST STATUS
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, 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 99 - OTHER / UNKNOWN	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN  <b>EJECTION</b> 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  <b>TRAPPED</b> 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS	1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO = D) 5 - M/C MOPED ONLY 6 - NO VALID OL	1 - ALCOHOL INTERLOCK DEVICE 2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS & CLASS B BUS 6 - EXCEPT CLASS A & CLASS B BUS 7 - EXCEPT TRACTOR-TRAILER 8 - INTERMEDIATE LICENSE RESTRICTIONS 9 - LEARNER'S PERMIT RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY 11 - LIMITED TO EMPLOYMENT 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER	1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING) 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD COMMUNICATION DEVICE 5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE 6 - PASSENGER 7 - OTHER DISTRACTION INSIDE THE VEHICLE 8 - OTHER DISTRACTION OUTSIDE THE VEHICLE 9 - OTHER / UNKNOWN  <b>CONDITION</b> 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL 9 - OTHER / UNKNOWN	1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN  <b>ALCOHOL TEST TYPE</b> 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER  <b>DRUG TEST TYPE</b> 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER  <b>DRUG TEST RESULT(S)</b> 1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOIDS 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS
<b>INJURIES TAKEN BY</b> 1 - NOT TRANSPORTED /TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN			<b>OL ENDORSEMENT</b> H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT			
<b>SAFETY EQUIPMENT</b> 1 - NONE USED 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN			<b>GENDER</b> F - FEMALE M - MALE U - OTHER / UNKNOWN			

# OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER  
25-OPD-0418

<b>OCCUPANT</b>	<b>UNIT #</b>	<b>NAME:</b> LAST, FIRST, MIDDLE			<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>	
	<b>ADDRESS:</b> STREET, CITY, STATE, ZIP				<b>CONTACT PHONE</b> - INCLUDE AREA CODE				
<b>INJURIES</b>	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>	<b>SAFETY EQUIPMENT</b>	<input type="checkbox"/> <b>DOT-COMPLIANT MC HELMET</b>	<b>SEATING POSITION</b>	<b>AIR BAG USAGE</b>	<b>EJECTION</b>	<b>TRAPPED</b>
<b>UNIT #</b>	<b>NAME:</b> LAST, FIRST, MIDDLE			<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>		
<b>ADDRESS:</b> STREET, CITY, STATE, ZIP				<b>CONTACT PHONE</b> - INCLUDE AREA CODE					
<b>INJURIES</b>	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>	<b>SAFETY EQUIPMENT</b>	<input type="checkbox"/> <b>DOT-COMPLIANT MC HELMET</b>	<b>SEATING POSITION</b>	<b>AIR BAG USAGE</b>	<b>EJECTION</b>	<b>TRAPPED</b>
<b>UNIT #</b>	<b>NAME:</b> LAST, FIRST, MIDDLE			<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>		
<b>ADDRESS:</b> STREET, CITY, STATE, ZIP				<b>CONTACT PHONE</b> - INCLUDE AREA CODE					
<b>INJURIES</b>	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>	<b>SAFETY EQUIPMENT</b>	<input type="checkbox"/> <b>DOT-COMPLIANT MC HELMET</b>	<b>SEATING POSITION</b>	<b>AIR BAG USAGE</b>	<b>EJECTION</b>	<b>TRAPPED</b>
<b>UNIT #</b>	<b>NAME:</b> LAST, FIRST, MIDDLE			<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>		
<b>ADDRESS:</b> STREET, CITY, STATE, ZIP				<b>CONTACT PHONE</b> - INCLUDE AREA CODE					
<b>INJURIES</b>	<b>INJURED TAKEN BY</b>	<b>EMS AGENCY (NAME)</b>	<b>INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)</b>	<b>SAFETY EQUIPMENT</b>	<input type="checkbox"/> <b>DOT-COMPLIANT MC HELMET</b>	<b>SEATING POSITION</b>	<b>AIR BAG USAGE</b>	<b>EJECTION</b>	<b>TRAPPED</b>

<b>INJURIES</b>	<b>SAFETY EQUIPMENT USED</b>	<b>SEATING POSITION</b>	<b>AIR BAG USAGE</b>
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY	1 - NONE USED - VEHICLE OCCUPANT 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER & LAP BELT USED 5 - CHILD RESTRAINT SYSTEM - FORWARD FACING 6 - CHILD RESTRAINT SYSTEM - REAR FACING 7 - BOOSTER SEAT 8 - HELMET USED 9 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC) 10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY 99 - OTHER / UNKNOWN	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 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 99 - OTHER / UNKNOWN	1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN
<b>INJURED TAKEN BY</b>			<b>EJECTION</b>
1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER / UNKNOWN			1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE
<b>GENDER</b>			<b>TRAPPED</b>
F - FEMALE M - MALE U - OTHER / UNKNOWN			1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS

<b>WITNESS</b>	<b>NAME:</b> LAST, FIRST, MIDDLE DORRIS, DESTONIE	<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>
	<b>ADDRESS:</b> STREET, CITY, STATE, ZIP 601 S LOCUST ST, OXFORD, OH, 450562111	<b>CONTACT PHONE</b> - INCLUDE AREA CODE			
<b>NAME:</b> LAST, FIRST, MIDDLE	<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>	
<b>ADDRESS:</b> STREET, CITY, STATE, ZIP	<b>CONTACT PHONE</b> - INCLUDE AREA CODE				
<b>NAME:</b> LAST, FIRST, MIDDLE	<b>DATE OF BIRTH</b>		<b>AGE</b>	<b>GENDER</b>	
<b>ADDRESS:</b> STREET, CITY, STATE, ZIP	<b>CONTACT PHONE</b> - INCLUDE AREA CODE				