TRAFFIC CRASH REPORT

OHIO DEPARTMENT OF PUBLIC SAFETY

Local Information

Local Report Number *: 14-398

Crash Severity: 3 (1 - Fatal, 2 - Injury, 3 - PDO)

Hit/Skip: 1 - Solved, 2 - Unsolved

☑ Photos Taken; OH-2, OH-1P, OH-3, Other

PDO Under State Reportable Dollar Amount

Private Property

Reporting Agency NCIC *: 08303

Reporting Agency Name *: Lebanon P.D.

Number of Units: 1

Unit in Error: 01 (98 - Animal, 99 - Unknown)

County *: 83

☑ City * / ☐ Village * / ☐ Township *

City, Village, Township *: Lebanon

Crash Date *: 11 19 2014

Time of Crash: 2058

Day of Week: WED

14-17831

Degrees / Minutes / Seconds — Latitude: ° ' . " Longitude: ° ' . "

Decimal Degrees — Latitude: 39.428804 Longitude: -84.207335

Roadway Division: ☐ Divided ☑ Undivided

Divided Lane Direction of Travel: N - Northbound, S - Southbound, E - Eastbound, W - Westbound

Number of Thru Lanes: 2

Road Types or Milepost [2]: AL - Alley, AV - Avenue, BL Boulevard, CR Circle, CT - Court, DR Drive, HE - Heights, HW - Highway, LA Lane, MP Milepost, PK - Parkway, PI Pike, PL Place, RD Road, SQ Square, ST Street, TE - Terrace, TL Trail, WA Way

Location Route Type [1]

Location Route Number

Loc Prefix: S (N, S, E, W)

Location Road Name: Mechanic

Location Road Type [2]: ST

Route Types [1]: IR - Interstate Route (inc. turnpike), US - US Route, SR - State Route, CR - Numbered County Route, TR - Numbered Township Route

Distance From Reference: ☐ Miles ☐ Feet ☐ Yards

Dir From Ref: N, S, E, W

Reference Route Type [1]

Reference Route Number

Ref Prefix: N, S, E, W

Reference Name (Road, Milepost, House #): 308

Reference Road Type [2]

Reference Point Used: 3 (1 - Intersection, 2 - Mile Post, 3 - House Number)

Crash Location: 01 (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)

☐ Intersection Related

Location of First Harmful Event: 2 (1 - On Roadway, 2 - On Shoulder, 3 - In Median, 4 - On Roadside, 5 - On Gore, 6 - Outside Trafficway, 9 - Unknown)

Road Contour: 2 (1 - Straight Level, 2 - Straight Grade, 3 - Curve Level, 4 - Curve Grade, 9 - Unknown)

Road Conditions — Primary: 03 — Secondary: (01 - Dry, 02 - Wet, 03 - Snow, 04 - Ice, 05 - Sand, Mud, Dirt, Oil, Gravel, 06 - Water (Standing, Moving), 07 - Slush, 08 - Debris*, 09 - Rut, Holes, Bumps, Uneven Pavement*, 10 - Other, 99 - Unknown)

* Secondary Condition Only

Manner of Crash Collision/Impact: 1 (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)

Weather: 1 (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: 2 (1 - Concrete, 2 - Blacktop, Bituminous, Asphalt, 3 - Brick/Block, 4 - Slag, Gravel, Stone, 5 - Dirt, 6 - Other)

Light Conditions — Primary: 4 — Secondary: (1 - Daylight, 2 - Dawn, 3 - Dusk, 4 - Dark - Lighted Roadway, 5 - Dark - Roadway Not Lighted, 6 - Dark - Unknown Roadway Lighting, 7 - Glare*, 8 - Other, 9 - Unknown)

* Secondary Condition Only

☐ School Zone Related

School Bus Related: ☐ Yes, School Bus Directly Involved ☐ Yes, School Bus Indirectly Involved

☐ Work Zone Related

☐ Workers Present ☐ Law Enforcement Present (Officer/Vehicle) ☐ Law Enforcement Present (Vehicle Only)

Type of Work Zone: 1 - Lane Closure, 2 - Lane Shift/Crossover, 3 - Work on Shoulder or Median, 4 - Intermittent or Moving Work, 5 - Other

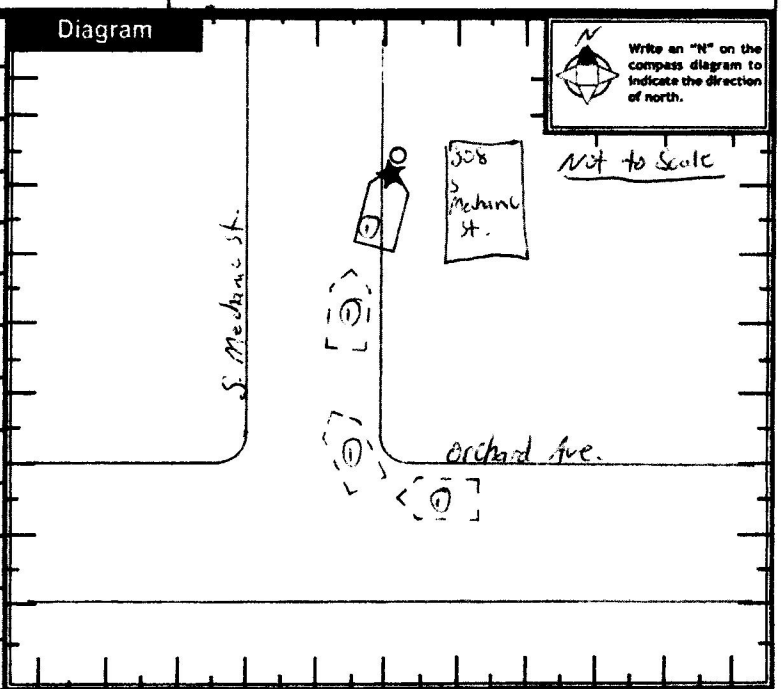
Location of Crash in Work Zone: 1 - Before the First Work Zone Warning Sign, 2 - Advance Warning Area, 3 - Transition Area, 4 - Activity Area, 5 - Termination Area

Narrative

Unit 1 left roadway right and struck a wooden utility pole. The stated that she came around the corner too fast and lost control of the vehicle because she was not used to driving a rear wheel drive truck. The pole was destroyed and the truck has heavy front-end damage.

Diagram

Write an "N" on the compass diagram to indicate the direction of north.



Report Taken By: ☑ Police Agency ☐ Motorist

☐ Supplement (Correction or Addition to an Existing Report Sent to ODPS)

Date Crash Reported	Time Crash Reported	Dispatch Time	Arrival Time	Time Cleared	Other Investigation Time	Total Minutes
11 19 2014	2058	2059	2100	2149	30	79

Officer's Name *: Ptl. P. Jenkinson

Officer's Badge Number: 112

Checked By: ACM

UNIT

LEA REPORT NUMBER: 14-398

UNIT NUMBER: 01

OWNER NAME: LAST, FIRST, MIDDLE (☑ SAME AS DRIVER)

OWNER PHONE NUMBER - INC. AREA CODE (☑ SAME AS DRIVER)

DAMAGE SCALE: 4 (1 - NONE, 2 - MINOR, 3 - FUNCTIONAL, 4 - DISABLING, 9 - UNKNOWN)

DAMAGED AREA: FRONT 00, 09, 03, 08, 10, 04, 07, 06, 05, REAR

OWNER ADDRESS: CITY, STATE, ZIP (☑ SAME AS DRIVER)

LP STATE: OH

LICENSE PLATE NUMBER: FHT7211

VEHICLE IDENTIFICATION NUMBER: 3D7KA28C94G244947

OCCUPANTS: 01

VEHICLE YEAR: 2004

VEHICLE MAKE: Dodge

VEHICLE MODEL: Ram

VEHICLE COLOR: Grey

☑ PROOF OF INSURANCE SHOWN

INSURANCE COMPANY: State Farm

POLICY NUMBER: 155-4328-B31-35E

TOWED BY: Jacobs Towing

CARRIER NAME, ADDRESS, CITY, STATE, ZIP

CARRIER PHONE - INCLUDE AREA CODE

US DOT

HM PLACARD ID NO.

HM CLASS NUMBER

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.

☐ HAZARDOUS MATERIAL RELEASED

CARGO BODY TYPE: 01
- 01 - NO CARGO BODY TYPE/NOT APPLICABLE
- 02 - BUS/VAN (9-15 SEATS, INC DRIVER)
- 03 - BUS (16+ SEATS, INC DRIVER)
- 04 - VEHICLE TOWING ANOTHER VEHICLE
- 05 - LOGGING
- 06 - INTERMODAL CONTAINER CHASSIS
- 07 - CARGO VAN/ENCLOSED BOX
- 08 - GRAIN, CHIPS, GRAVEL
- 09 - POLE
- 10 - CARGO TANK
- 11 - FLAT BED
- 12 - DUMP
- 13 - CONCRETE MIXER
- 14 - AUTO TRANSPORTER
- 15 - GARBAGE/REFUSE
- 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: 07
- 99 - UNKNOWN OR HIT/SKIP

PASSENGER VEHICLES (LESS THAN 9 PASSENGERS)
- 01 - SUB-COMPACT
- 02 - COMPACT
- 03 - MID SIZE
- 04 - FULL SIZE
- 05 - MINI VAN
- 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; 2 AXLES, 6 TIRES
- 14 - SINGLE UNIT TRUCK; 3+ AXLES
- 15 - SINGLE UNIT TRUCK / TRAILER
- 16 - TRUCK TRACTOR (BOBTAIL)
- 17 - TRACTOR/SEMI-TRAILER
- 18 - TRACTOR/DOUBLES
- 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: 07
- 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 - ELECTRONIC ESCORT
- 17 - FARM VEHICLE
- 18 - FARM EQUIPMENT
- 19 - MOTORHOME
- 20 - GOLF CART
- 21 - TRAIN
- 22 - OTHER (EXPLAIN IN NARRATIVE)

MOST DAMAGED AREA: 02
- 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
- 99 - UNKNOWN

IMPACT AREA: 02

ACTION: 3
- 1 - NON-CONTACT
- 2 - NON-COLLISION
- 3 - STRIKING
- 4 - STRUCK
- 5 - STRIKING/STRUCK
- 9 - UNKNOWN

PRE-CRASH ACTIONS: 05

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

- 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES

PRIMARY: 17

SECONDARY:

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

- 99 - UNKNOWN

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 - 08, 2 - 40, 3, 4, 5, 6

FIRST HARMFUL EVENT: 2

MOST HARMFUL EVENT: 2

- 99 - UNKNOWN

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 - PEDALCYCLE
- 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: 15 ☑ STATED ☐ ESTIMATED

POSTED SPEED: 25

TRAFFIC CONTROL: 01
- 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 2 TO 1
- 1 - NORTH
- 2 - SOUTH
- 3 - EAST
- 4 - WEST
- 5 - NORTHEAST
- 6 - NORTHWEST
- 7 - SOUTHEAST
- 8 - SOUTHWEST
- 9 - UNKNOWN

MOTORIST / NON-MOTORIST / OCCUPANT

OHIO DEPARTMENT OF PUBLIC SAFETY — EDUCATION · SERVICE · PROTECTION

LOCAL REPORT NUMBER: 14-398

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
01	Stevens, Amy B.	04 29 1965	49	F (F - FEMALE, M - MALE)

ADDRESS, CITY, STATE, ZIP: 1105 Lake Pointe Ct. Lebanon, OH 45036

CONTACT PHONE - INCLUDE AREA CODE: (513) 933-0878

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
1	1			04	☐	01	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	☐ NO VALID OL	☐ M/C END.	CONDITION	ALCOHOL/DRUG SUSPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST STATUS	DRUG TEST TYPE
OH	RN103831	4			1	1	1	1	.	1	1

OFFENSE CHARGED (☒ LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	☐ HANDS-FREE DEVICE USED	DRIVER DISTRACTED BY
331.38	Failure to Control	66660		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 MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	☐ NO VALID OL	☐ M/C END.	CONDITION	ALCOHOL/DRUG SUSPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST STATUS	DRUG TEST TYPE
									.		

OFFENSE CHARGED (☐ LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	☐ HANDS-FREE 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
05 - CHILD RESTRAINT SYSTEM-FORWARD FACING
06 - CHILD RESTRAINT SYSTEM-REAR FACING
07 - BOOSTER SEAT
08 - HELMET USED
99 - UNKNOWN SAFETY EQUIPMENT

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 ONLY)
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

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 MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
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					☐				