OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER: 16-196
LOCAL INFORMATION NO.: 16-10939
CRASH SEVERITY: 3 (1 - Fatal, 2 - Injury, 3 - PDO)
HIT/SKIP: (1 - Solved, 2 - Unsolved)

PHOTOS TAKEN	PDO UNDER STATE REPORTABLE DOLLAR AMOUNT	PRIVATE PROPERTY	REPORTING AGENCY NCIC	REPORTING AGENCY NAME	NUMBER OF UNITS	UNIT IN ERROR
OH-2 OH-2P OH-3 OTHER			08303	Lebanon	2	01 (98 - Animal, 99 - Unknown)

COUNTY	CITY / VILLAGE / TOWNSHIP	CRASH DATE	TIME OF CRASH	DAY OF WEEK
83	Lebanon	06/11/2016	0912	SAT

DEGREES / MINUTES / SECONDS — LATITUDE: ° ' " LONGITUDE: ° ' "

DECIMAL DEGREES — LATITUDE: 39.447752 LONGITUDE: -84.195087

ROADWAY DIVISION	DIVIDED LANE DIRECTION OF TRAVEL	NUMBER OF THRU LANES
☐ Divided ☑ Undivided	N - Northbound E - Eastbound S - Southbound W - Westbound	

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	LOCATION ROUTE NUMBER	LOC PREFIX (N,S,E,W)	LOCATION ROAD NAME	LOCATION ROAD TYPE
			Monroe	Rd

ROUTE TYPES [1]: IR - Interstate Route (inc. Turnpike); US - US Route; SR - State Route; CR - Numbered County Route; TR - Numbered Township Route

DISTANCE FROM REF.	DIR FROM REF	REFERENCE ROUTE TYPE	REFERENCE ROUTE NUMBER	REF PREFIX (N,S,E,W)	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	REFERENCE ROAD TYPE
(Miles / Feet / Yards)	N,S,E,W			N,S E,W	Country Creek	Dr

REFERENCE POINT USED	CRASH LOCATION	INTERSECTION RELATED	LOCATION OF FIRST HARMFUL EVENT
1 - Intersection; 2 - Mile Post; 3 - House Number	02 (01 - Non-Intersection; 02 - Four-Way Intersection; 03 - T-Intersection; 04 - Y-Intersection; 05 - Traffic Circle/Roundabout; 06 - Five-Point, or More; 07 - On Ramp; 08 - Off Ramp; 09 - Crossover; 10 - Driveway/Alley Access; 11 - Railway Grade Crossing; 12 - Shared-Use Paths or Trails; 99 - Unknown)	☑	1 (1 - On Roadway; 2 - On Shoulder; 3 - In Median; 4 - On Roadside; 5 - On Gore; 6 - Outside Trafficway; 9 - Unknown)

ROAD CONTOUR	ROAD CONDITIONS PRIMARY	ROAD CONDITIONS SECONDARY
1 (1 - Straight Level; 2 - Straight Grade; 3 - Curve Level; 4 - Curve Grade; 9 - Unknown)	01 (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	WEATHER
2 (1 - Not Collision Between Two Motor Vehicles In Transport; 2 - Rear End; 3 - Head-On; 4 - Rear-to-Rear; 5 - Backing; 6 - Angle; 7 - Sideswipe, Same Direction; 8 - Sideswipe, Opposite Direction; 9 - Unknown)	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	LIGHT CONDITIONS PRIMARY	LIGHT CONDITIONS SECONDARY	SCHOOL ZONE RELATED	SCHOOL BUS RELATED
2 (1 - Concrete; 2 - Blacktop, Bituminous, Asphalt; 3 - Brick/Block; 4 - Slag, Gravel, Stone; 5 - Dirt; 6 - Other)	1	(1 - Daylight; 2 - Dawn; 3 - Dusk; 4 - Dark - Lighted Roadway; 5 - Dark - Roadway Not Lighted; 6 - Dark - Unknown Roadway Lighting; 7 - Glare*; 8 - Other; 9 - Unknown) * Secondary Condition Only	☐	☐ Yes, School Bus Directly Involved; ☐ Yes, School Bus Indirectly Involved

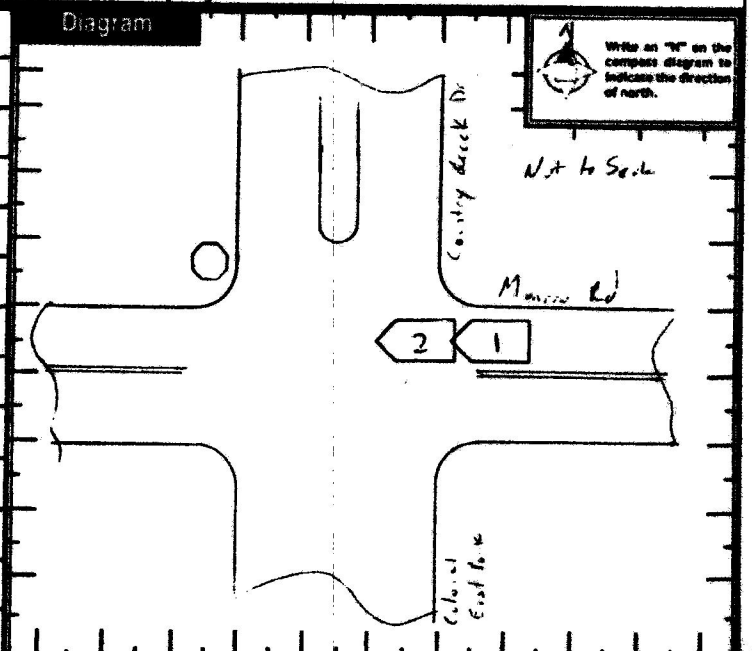
WORK ZONE RELATED	WORKERS PRESENT	LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE)	LAW ENFORCEMENT PRESENT (VEHICLE ONLY)	TYPE OF WORK ZONE	LOCATION OF CRASH IN WORK ZONE
☐	☐	☐	☐	(1 - Lane Closure; 2 - Lane Shift/ Crossover; 3 - Work on Shoulder or Median; 4 - Intermittent or Moving Work; 5 - Other)	(1 - Before the First Work Zone Warning Sign; 2 - Advance Warning Area; 3 - Transition Area; 4 - Activity Area; 5 - Termination Area)

NARRATIVE

Unit 2 was stopped in traffic waiting to turn into Colonial East Park.

Unit approached unit 2 and was unable to stop in time, rear ending unit 2.

DIAGRAM



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
06/12/2016	0912	0912	0915	0931	25	44

OFFICER'S NAME	OFFICER'S BADGE NUMBER	CHECKED BY
Ptl. B. Haussermann	117	

UNIT

Local Police Report # 16-196

Unit Number	Owner Name: Last, First, Middle (☑ Same As Driver)	Owner Phone Number - Inc. Area Code (☑ Same As Driver)	Damage Scale	Damaged Area
01	Vanover, Zachary J	(937) 475-3117	3	

Owner Address: Street, State, Zip (☑ Same As Driver)

25 Monroe Rd. Lebanon, OH 45036

LP State	License Plate Number	Vehicle Identification Number	# Occupants
OH	DXS8122	5TBBT44192S297353	01

Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Color
2002	Toyota	Truck	Black

☑ Proof of Insurance Shown	Insurance Company	Policy Number	Towed By
	AllState	992437888	

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 - No Cargo Body Type/Not Applicable; 02 - Bus/Van (9-15 Seats, Inc Driver); 03 - Bus (16+ Seats, Inc Driver); 04 - Vehicles 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 - Two-Way, Not Divided; 2 - Two Way, Not Divided, Continuous Left Turn Lane; 3 - Two-Way, Divided, Unprotected (Painted or Grass) 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 - Personal; 2 - Commercial; 3 - Government

☐ In Emergency Response

Unit Type: 07

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

Med/Heavy Trucks or Combo Units > 10K Lbs.: 13 - Single Unit Truck or Van 2Axle, 6 Tires; 14 - Single Unit Truck; 3+ Axles; 15 - Single Unit Truck / Trailer; 16 - Truck/Tractor (Bobtail); 17 - Tractor/Semi-Trailer; 18 - Tractor/Double; 19 - Tractor/Triples; 20 - Other Med/Heavy Vehicle

Bus/Van/Limo (9 or More Inc 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; 26 - Pedestrian/Skater; 27 - Other Non-Motorist

☐ Has HM Placard

Special Function: 01 - None; 02 - Taxi; 03 - Light Truck (Over 10K Lbs); 04 - Bus - School; 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 - Construction; 16 - Federal; 17 - Farm Vehicle; 18 - Farm Equipment; 19 - Motorcycle; 20 - Golf Cart; 21 - Train; 22 - Other Special Function

Most Damaged Area: 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 & Windows; 11 - Undercarriage; 12 - Left Top & Rail; 13 - Top & Rail; 14 - Other; 99 - Unknown

Impact Area: 01 - 12 o'clock; 02 - 1 o'clock; 03 - 2 o'clock; 04 - 3 o'clock; 05 - 4 o'clock; 06 - 5 o'clock; 07 - 6 o'clock; 08 - 7 o'clock; 09 - 8 o'clock; 10 - 9 o'clock; 11 - 10 o'clock; 12 - 11 o'clock; 99 - Unknown

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

Pre-Crash Actions: 99 - Unknown

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 Stopping in Traffic; 12 - Driverless; 13 - Negotiating a Curve; 14 - Other Motorist Action

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

Contributing Circumstances

Primary: 09

Secondary:

99 - Unknown

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 Start From Parked Position; 12 - Improper Stop 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; 27 - Not Visible (Dark Clothing); 28 - Inattentive; 29 - Failure to Obey Traffic Signs/Signals/Officer; 30 - Wrong Side of the Road; 31 - Other Non-Motorist Action

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

Sequence of Events

1	2	3	4	5	6
20					

First Harmful Event: 1

Most Harmful Event: 1

99 - Unknown

Non-Collision Events: 01 - Overturn/Rollover; 02 - Fire/Explosion; 03 - Immersion; 04 - Jackknife; 05 - Carry Free Equipment Loss; 06 - Equipment Body/Trailer Separation; 07 - Separation of Unit; 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 - Pedalcyclist; 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 - Struck By Falling, Shifting Cargo or Anything Set In Motion By 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 Pole/Luminaire 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

Speed Limit: 35

Traffic Control: 01 - No Control; 02 - R.R. Sign; 03 - R.R. Signal; 04 - Traffic Signal; 05 - Traffic Flashers; 06 - School Zone; 07 - Police/Flagman; 08 - R.R. Flashers; 09 - R.R. Gates; 10 - Control Other Than Listed; 11 - Person (Flagger, Officer); 12 - Pavement Markings; 13 - Yield Sign; 14 - Warning Sign; 15 - Other; 16 - Not Reported

Unit Direction: From 3 To 4

1 - North; 2 - South; 3 - East; 4 - West; 5 - Northeast; 6 - Northwest; 7 - Southeast; 8 - Southwest; 9 - Unknown

OHIO DEPARTMENT OF PUBLIC SAFETY — UNIT

Local Report Number: 16-1969

Unit Number	Owner Name: Last, First, Middle (☑ Same As Driver)	Owner Phone Number - Inc. Area Code (☑ Same As Driver)	Damage Scale	Damaged Area
02	White, Jeffery W	(513) 544-0926	3	

Owner Address: City, State, Zip (☑ Same As Driver)
262 Sycamore Ln. #131 S. Lebanon, OH 45065

LP State	License Plate Number	Vehicle Identification Number	# Occupants
OH	EVT6772	3FAHP0HA7BR145024	02

Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Color
2011	Ford	Fusion	Maroon

Proof of Insurance Shown	Insurance Company	Policy Number	Towed By
☑	State Farm	4377683B0335B	

Carrier Name, Address, City, State, Zip

Carrier Phone - Include Area Code

USDOT

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 - 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

Cargo Body Type: 01

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

Trafficway Description: 1

☐ Hit / Skip Unit

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

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

☐ In Emergency Response

Unit Type: 03 (99 - Unknown or Hit/Skip)

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

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

Buses/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; 26 - Pedestrian/Skater; 27 - Other Non-Motorist

☐ Has HM Placard

Special Function: 01 - None; 02 - Taxi; 03 - Rental Truck (Over 10K lbs); 04 - School Transportation; 05 - Bus - Transit; 06 - Bus - Charter; 07 - Bus - Shuttle; 08 - Bus - Other; 09 - Ambulance; 10 - Fire; 11 - Highway/Maintenance; 12 - Military; 13 - Mail Carrier; 14 - Large Equipment; 15 - Utility; 16 - Police; 17 - Farm Vehicle; 18 - Farm Equipment; 19 - Motorhome; 20 - Golf Cart; 21 - Train; 22 - Other/Unknown

Special Function: 01

Most Damaged Area: 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; 13 - Top/Roof; 14 - Other; 99 - Unknown

Most Damaged Area: 06

Impact Area: 06

Action: 1 Non-Contact; 2 Non-Collision; 3 Strike; 4 Struck; 5 Struck-Struck; 9 Unknown

Action: 4

Pre-Crash Action

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 Stopping in Traffic; 12 - Entering; 13 - Negotiating a Curve; 14 - Other Motorist Action; 99 - Unknown

Pre-Crash Action: 01

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

Contributing Circumstances

Primary: 01

Secondary:

99 - Unknown

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

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

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

Sequence of Events

1	2	3	4	5	6
20					

First Harmful Event: 1

Most Harmful Event: 1

99 - Unknown

Non-Collision Events: 01 - Overturn/Rollover; 02 - Fire/Explosion; 03 - Immersion; 04 - Jackknife; 05 - Carried Vehicle or Equipment; 06 - Separation of Units; 07 - Ran Off Road Right; 08 - Ran Off Road Left; 09 - Cross Median; 10 - Cross Center Line/Opposite Direction of Travel; 11 - Downhill Runaway; 12 - Other Non-Collision

Collision with Person, Vehicle or Object Not Fixed: 14 - Pedestrian; 15 - Pedalcyclist; 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 Moveable Object

Collision with Fixed Object: 25 - Impact Attenuator or Crash Cushion; 26 - Bridge Overhead Structure; 27 - Bridge Pier or Support; 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 Pole or Luminaire 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: 01

☑ Stated

☐ Estimated

Posted Speed: 35

Traffic Control: 01 - No Controls; 02 - R4-1 Sign; 03 - R1-1 Sign; 04 - Traffic Signal; 05 - Traffic Flashers; 06 - School Zone; 07 - R2-1 Speed Limit Sign; 08 - R3-5 Red Arrow Sign; 09 - S1-1 Lane Markings; 10 - Railroad Crossbuck; 11 - Railroad Flashers; 12 - Railroad Gates; 13 - Railroad Sign; 14 - Warning Sign; 15 - Other; 16 - No Controls

Traffic Control: 01

Unit Direction: From 3 To 4

1 - North; 2 - East; 3 - South; 4 - West; 5 - Northeast; 6 - Southeast; 7 - Southwest; 8 - Northwest; 9 - Unknown

OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST / OCCUPANT

16-196

MOTORIST/NON-MOTORIST

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
01	Vanover, Zachary J	03/23/1981	35	M

Address: City, State, Zip: 25 Monroe Rd. Lebanon, OH 45036

Contact Phone: Include Area Code: (937) 475-3117

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 Endorsement	Condition	Alcohol/Drug Suspected	Alcohol Test Status	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type
OH	RV211962	4			1	1	1	1	.	1	1

Offense Charged (Local Code)	Offense Description	Citation Number	Hands Free Device Used	Driver Distracted By
333.03	ACDA	69410		1

MOTORIST/NON-MOTORIST

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
02	White, Jeffery W	04/24/1957	59	M

Address: City, State, Zip: 262 Sycamore Ln #131 S. Lebanon, OH 45065

Contact Phone: Include Area Code: (513) 544-0926

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 Endorsement	Condition	Alcohol/Drug Suspected	Alcohol Test Status	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type
OH	RJ471113	4			1	1	1	1	.	1	1

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

Injuries
1 No Injuries / 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
99 Unknown Safety Equipment
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

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 Passenger)
08 Third - Middle
09 Third - Right Side
10 Sleeping Section of Cab (Truck)
11 Passenger - Other Enclosed Cargo Area (Non-Trailing Unit, Such as a Bus, Pickup with Cap)
12 Passenger in Unenclosed Cargo Area
13 Trailing Unit
14 Riding in Vehicle Designed to Accommodate More Than 10 Occupants
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 = D)
5 M/C/Moped Only

Conviction
1 Appropriate Citation
2 Physical Impairment
3 Emotional (Depressed, Angry, Disturbed)
4 Illness
5 Alcohol Related Factor Suspected
6 Drug Related Factor Suspected
7 Alcohol and Drug Related

Alcohol/Drug Suspected
1 None
2 Alcohol Suspected
3 Yes, HBD Not Tested
4 Yes, Refused Submission
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 Not Distracted / Reported
2 Phone
3 Texting / Smartphone
4 Electronic Communication Device
5 Other Electronic Device (Navigation Device, Radio, DVD)
6 Other Distraction (Not Listed)
7 External Distraction

OCCUPANT

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender
02	White, Lori A	08/29/1961	54	F

Address: City, State, Zip: 262 Sycamore Ln #131 S. Lebanon, OH 45065

Contact Phone: Include Area Code: (513) 544-0926

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		03	1	1	1

PEDESTRIAN

Unit Number	Name: Last, First, Middle	Date of Birth	Age	Gender

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