OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

LOCAL INFORMATION

LOCAL REPORT NUMBER: 16-351

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 Police

NUMBER OF UNITS: 3

UNIT IN ERROR: 01 (98 - ANIMAL, 99 - UNKNOWN)

COUNTY: 83

CITY / VILLAGE / TOWNSHIP: CITY — Lebanon

CRASH DATE: 10/10/2016

TIME OF CRASH: 1845

DAY OF WEEK: MON

DEGREES / MINUTES / SECONDS — LATITUDE / LONGITUDE

DECIMAL DEGREES — LATITUDE: 39.457199 LONGITUDE: -84.204208

ROADWAY DIVISION: UNDIVIDED

DIVIDED LANE DIRECTION OF TRAVEL: (N - NORTHBOUND, E - EASTBOUND, S - SOUTHBOUND, W - WESTBOUND)

NUMBER OF THROUGH 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:

LOCATION ROUTE NUMBER:

LOCATION N,S,E,W:

LOCATION ROAD NAME: Miller

LOCATION ROAD TYPE: 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: 10 (MILES)

DIR FROM REF: W (N,S,E,W)

REFERENCE ROUTE TYPE: SR

REFERENCE ROUTE NUMBER: 48

REF PREFIX (N,S,E,W):

REFERENCE NAME (ROAD NAME, MILEPOST, HOUSE #):

REFERENCE ROAD TYPE:

REFERENCE POINT USED: 1 (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: 1 (1 - ON ROADWAY, 2 - ON SHOULDER, 3 - IN MEDIAN, 4 - ON ROADSIDE, 5 - ON GORE, 6 - OUTSIDE TRAFFICWAY, 9 - UNKNOWN)

ROAD CONTOUR: 1 (1 - STRAIGHT LEVEL, 2 - STRAIGHT GRADE, 3 - CURVE LEVEL, 4 - CURVE GRADE, 9 - UNKNOWN)

ROAD CONDITIONS — PRIMARY: 01 SECONDARY: (01 - DRY, 02 - WET, 03 - SNOW, 04 - ICE, 05 - SAND, MUD, DIRT, OIL, GRAVEL, 06 - WATER (STANDING, MOVING), 07 - SLUSH, 08 - DEBRIS*, 09 - ROCK, RUTS, HOLES, BUMPS, UNEVEN PAVEMENT*, 10 - OTHER, 99 - UNKNOWN) * SECONDARY CONDITION ONLY

MANNER OF CRASH COLLISION/IMPACT: 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)

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: 1 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):

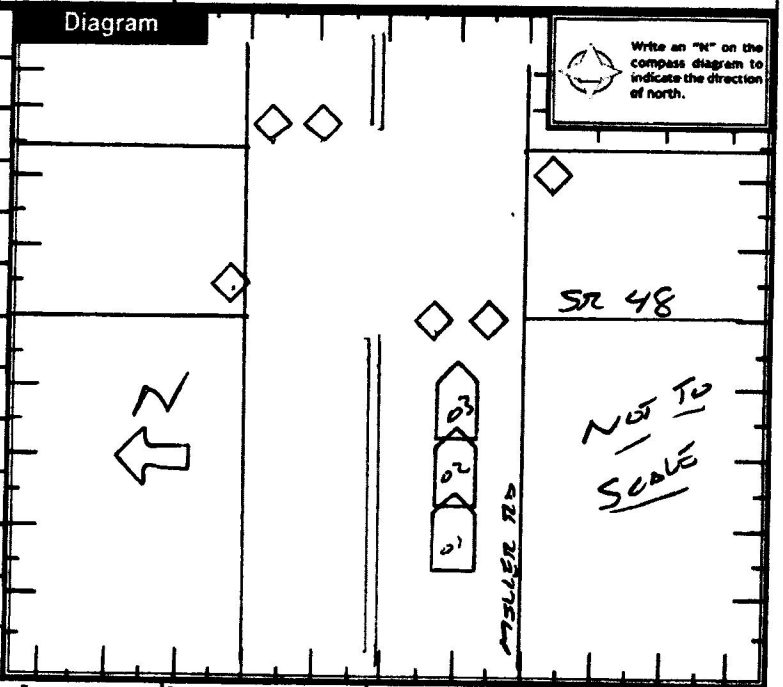
TYPE OF WORK ZONE: (1 - LANE CLOSURE, 2 - LANE SHIFT/CROSSOVER, 3 - WORK ON SHOULDER OR MEDIAN, 4 - INTERMITTENT OR MOVING WORK, 5 - OTHER)

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 03 was stationary for the red light on Miller Rd at SR 48. Unit 02 was stopped behind Unit 03. Unit 01, traveling east on Miller Rd., failed to stop and struck the rear of Unit 02. The impact pushed Unit 02 into the back of Unit 03.

Diagram



REPORT TAKEN BY: ☑ POLICE AGENCY ☐ MOTORIST ☐ SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

DATE CRASH REPORTED: 10/10/2016

TIME CRASH REPORTED: 1845

DISPATCH TIME: 1845

ARRIVAL TIME: 1845

TIME CLEARED: 1917

OTHER INVESTIGATION TIME:

TOTAL MINUTES: 32

OFFICER'S NAME: Sgt. Weithofer

OFFICER'S BADGE NUMBER: 104

CHECKED BY:

PAGE OF

MOTORIST / NON-MOTORIST / OCCUPANT

16-351

Unit Number	Name (Last, First, Mid)	Date of Birth	Age	Gender
01	Strickland II, Freddy A	10211969	46	M (F - Female, M - Male)

Address (City, State, Zip)	Contact Phone (Include Area Code)
149 Holland Ave. Lebanon, OH 45036	(937) 850-7105

Injury	Injured Taken By	EMS Agency	Medical Facility Injured Taken	Safety Equipment Used	Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
1	1	N/A	N/A	04	☐	01	4	1	1

Oil Class	Operator's Lic. Number	Oil Class	Lic. Type	Lic. Type	Alcohol Test Status	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type
OH	RS5293470	4	☑	☐	1	1	1	1	1

Operator's Lic. Number	Operator's Lic. Type	Operator's Name	Hands Free Device Used	Driver Distracted By
333.03	ACDA	069606	☐	1

Unit Number	Name (Last, First, Middle)	Date of Birth	Age	Gender
02	Plzak, Katherine L	12161998	17	F (F - Female, M - Male)

Address (City, State, Zip)	Contact Phone (Include Area Code)
1587 Tollgate Court Lebanon, OH 45036	(513) 703-9990

Injury	Injured Taken By	EMS Agency	Medical Facility Injured Taken	Safety Equipment Used	Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
1	1	N/A	N/A	04	☐	01	1	1	1

Oil Class	Operator's Lic. Number	Oil Class	Lic. Type	Lic. Type	Alcohol Test Status	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type
OH	UJ233327	4	☐	☐	1	1	1	1	1

Operator's Lic. Number	Operator's Lic. Type	Operator's Name	Hands Free Device	Driver Distracted By
N/A			☐	1

Seating Position

Air Bag Usage

Alcohol/Drug Requested

Alcohol Test Status

Drug Test Status

Drug Test Type

Unit Number | Name (Last, First, Middle) | Date of Birth | Age | Gender (F - Female, M - Male)

Address (City, State, Zip) | Contact Phone (Include Area Code)

Injury | Injured Taken By | EMS Agency | Medical Facility Injured Taken | Safety Equipment Used | Motorcycle Helmet | Seating Position | Air Bag Usage | Ejection | Trapped

Unit Number | Name (Last, First, Middle) | Date of Birth | Age | Gender (F - Female, M - Male)

Address (City, State, Zip) | Contact Phone (Include Area Code)

Injury | Injured Taken By | EMS Agency | Medical Facility Injured Taken | Safety Equipment Used | Motorcycle Helmet | Seating Position | Air Bag Usage | Ejection | Trapped

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MOTORIST / NON-MOTORIST / OCCUPANT

16-351

Unit Number	Name Last, First, Middle	Date of Birth	Age	Gender
03	France, Gregory S	01111964	52	M (F - Female, M - Male)

Address, City, State, Zip	Contact Phone (include area code)
2406 Columbine Court Lebanon, OH 45036	Unknown

Injury	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
1	1	N/A	N/A	04		01	1	1	1

OL State	Operator License Number	OL Type	OL Valid	OL Endorsed	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type
OH	RM402673			1	1	1	1	1

Other Owner Name (Leave Code)	Owner Address	Owner Phone	Hands Free Device Used	Driver Distracted By
N/A	N/A			1

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

Address, City, State, Zip	Contact Phone (include area code)

Injury	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped

OL State	Operator License Number	OL Type	OL Valid	OL Endorsed	Alcohol Test Type	Alcohol Test Value	Drug Test Status	Drug Test Type

Other Owner Name (Leave Code)	Owner Address	Owner Phone	Hands Free Device Used	Driver Distracted By

Injury	Injured Taken By	Safety Equipment	Non-Motorist

Seating Position	Air Bag Usage

Ejection	Trapped	Contacted	Alcohol/Drug Suspected

Alcohol Test Status	Alcohol Test Type	Drug Test Status	Drug Test Type	Driver Distracted By

Unit Number	Name Last, First, Middle	Date of Birth	Age	Gender
03	France, Jennifer A	12101963	52	F (F - Female, M - Male)

Address, City, State, Zip	Contact Phone (include area code)
2406 Columbine Court Lebanon, OH 45036	Unknown

Injury	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped
1	1	N/A	N/A	04		03	1	1	1

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

Address, City, State, Zip	Contact Phone (include area code)

Injury	Injured Taken By	EMS Agency	Medical Facility Injured Taken To	Safety Equipment	DOT Compliant Motorcycle Helmet	Seating Position	Air Bag Usage	Ejection	Trapped

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OHIO DEPARTMENT OF PUBLIC SAFETY — UNIT

LOCAL REPORT NUMBER: 16-351

UNIT NUMBER	OWNER NAME: LAST, FIRST, MI (SAME AS DRIVER)	OWNER PHONE INCLUDE AREA CODE (SAME AS DRIVER)	DAMAGE SCALE	DAMAGE AREA
01	Payne-Strickland, Antoinette		4	

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

LP STATE	LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	# OCCUPANTS
OH	D154431	1G6KS54Y94U126522	01

VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	VEHICLE COLOR
2004	Cadillac	SLS	Red

☑ PROOF OF INSURANCE	INSURANCE COMPANY	POLICY NUMBER	TOWED BY
	Liberty Mutual	A0S-288-133816-7562	Lebanon Towing

CARRIER NAME, ADDRESS, CITY, STATE, ZIP | CARRIER PHONE- INCLUDE AREA CODE

USDOT | VEHICLE WEIGHT GVWR/GCWR | CARGO BODY TYPE: 01 | TRAFFICWAY DESCRIPTION: 1

HM CLASS NUMBER | ☐ HAZARDOUS MATERIAL RELEASED | ☐ HIT/SKIP UNIT

NON-MOTORIST LOCATION PRIOR TO IMPACT | TYPE OF USE: 1 | ☐ IN EMERGENCY RESPONSE | MOTOR CARRIER: 04 | ☐ HAS HM PLACARD

BUS VALUE | NON-MOTORIST: 25 - ANIMAL WITH RIDER; 26 - PEDESTRIAN/SKATER; 27 - OTHER NON-MOTORIST

SPECIAL FUNCTION: 01 | MOST DAMAGED AREA: 02 | IMPACT AREA: 02 | ACTION: 3

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

PRE-CRASH ACTIONS: 01

MOTORIST: 02 - ACCELERATING; 03 - CHANGING TRAVEL LANES; 04 - MAKING LEFT TURN; 06 - MAKING RIGHT TURN; 08 - PARKED; 09 - PASSING OR OVERTAKING; 10 - STOPPED IN TRAFFIC; 11 - SLOWING OR STOPPING

NON-MOTORIST: 21 - OTHER NON-MOTORIST ACTION

CONTRIBUTING CIRCUMSTANCES

PRIMARY	SECONDARY
09	

MOTORIST: 09 - MOTOR TROUBLE; 10 - DISABLED FROM PRIOR ACCIDENT; 11 - IMPROPER LANE CHANGE / PASSING/OFF ROAD; 12 - IMPROPER PASSING; 13 - DRIVING TOO FAST FOR CONDITIONS; 14 - IMPROPER TURN; 15 - DROVE OFF ROAD RIGHT; 16 - WRONG SIDE/WRONG WAY; 17 - FALLING ASLEEP; 18 - FOLLOWING TOO CLOSELY/ACDA; 19 - ILLEGAL U-TURN; 20 - IMPROPER BACKING; 21 - OPERATING DEFECTIVE EQUIPMENT; 22 - NONE; 23 - IMPAIRED-ALCOHOL; 24 - IMPAIRED-DRUGS; 25 - IMPAIRED-ALCOHOL AND DRUGS; 26 - FELL ASLEEP; 27 - EMOTIONAL; 28 - ILLNESS; 29 - IMPROPER TURN ON RED; 30 - WRONG SIDE OF ONE WAY ROAD; 31 - IMPROPER START FROM PARKED POSITION; 32 - STOPPED OR PARKED ILLEGALLY

NON-MOTORIST: 22 - NONE; 23 - IMPROPER CROSSING; 24 - DARTING; 25 - LYING AND/OR ILLEGALLY IN ROADWAY; 26 - FAILURE TO YIELD; 27 - NOT VISIBLE; 28 - INATTENTIVE; 29 - FAILURE TO OBEY TRAFFIC SIGNS/SIGNALS/OFFICER; 30 - WRONG SIDE; 31 - IMPROPER START FROM PARKED POSITION; 32 - STOPPED OR PARKED ILLEGALLY

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	2	3	4	5	6
20					

FIRST HARMFUL EVENT: 1 | MOST HARMFUL EVENT: 1

NON-MOTORIST: 06 - EQUESTRIAN; 07 - SERVICE ANIMAL; 08 - RAN OFF ROAD RIGHT; 09 - RAN OFF ROAD LEFT; 10 - CROSS CENTER LINE / OPPOSITE DIRECTION OF TRAVEL; 11 - DOWNHILL RUNAWAY; 12 - OTHER NON-MOTORIST

COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED: 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; 19 - ANIMAL - OTHER; 20 - MOTOR VEHICLE IN TRANSPORT

COLLISION WITH FIXED OBJECT: 25 - IMPACT ATTENUATOR; 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; 37 - TRAFFIC SIGN POST; 38 - OVERHEAD SIGN POST; 39 - LIGHT POLE; 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	POSTED SPEED	TRAFFIC CONTROL	UNIT DIRECTION
30 ☐ DETECTED ☑ ESTIMATED	35	04	FROM 4 TO 3

TRAFFIC CONTROL: 01 - NO CONTROLS; 02 - S STOP SIGN; 03 - YIELD SIGN; 04 - TRAFFIC SIGNAL; 05 - TRAFFIC FLASHER; 06 - S SCHOOL; 07 - RAILROAD CROSSBUCKS; 08 - RAILROAD FLASHERS; 09 - RAILROAD GATES; 10 - RAILROAD CROSSING PROTECTION; 11 - PERSON; 12 - PAVEMENT MARKINGS; 13 - OTHER; 14 - NOT REPORTED; 15 - UNKNOWN; 16 - NO TRAFFIC CONTROL

UNIT DIRECTION: 1 - NORTH; 2 - SOUTH; 3 - EAST; 4 - WEST; 5 - NORTHEAST; 6 - NORTHWEST; 7 - SOUTHEAST; 8 - SOUTHWEST

OHIO DEPARTMENT OF PUBLIC SAFETY — UNIT

LOCAL REPORT NUMBER: 16-351

UNIT NUMBER	OWNER NAME: LAST, FIRST, MIDDLE (☑ SAME AS DRIVER)	OWNER PHONE NUMBER (☑ SAME AS DRIVER)	DAMAGE SCALE	DAMAGE AREA
02	Plzak, Thomas		3	FRONT

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

TP STATE	LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	# OCCUPANTS
OH	FDB3062	1HGCM66 5X7A023699	01

VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	VEHICLE COLOR
2007	Honda	Accord	Maroon

☑ PROOF OF INSURANCE	INSURANCE COMPANY	POLICY NUMBER	TOWED BY
	Grange	PA34050566	N/A

CARRIER NAME, ADDRESS, CITY, STATE, ZIP — CARRIER PHONE- INCLUDE AREA CODE

USDOT

VEHICLE WEIGHT GVWR/GCWR

HM CLASS NUMBER

HM CARGO RELEASED

CARGO BODY TYPE: 01

TRAFFICWAY DESCRIPTION: 1

HIT/SKIP UNIT

NON-MOTORIST LOCATION PRIOR TO IMPACT

TYPE OF USE: 1

IN EMERGENCY RESPONSE

UNIT TYPE: 04

HAS HM PLACARD

SPECIAL FUNCTION: 01

MOST DAMAGED AREA: 06

IMPACT AREA: 06

ACTION: 5

PRE-CRASH ACTIONS: 11

MOTORIST

NON-MOTORIST

CONTRIBUTING CIRCUMSTANCES

PRIMARY: 01

SECONDARY:

MOTORIST

NON-MOTORIST

VEHICLE DEFECTS

SEQUENCE OF EVENTS

1: 20
2: 20
3:
4:
5:
6:

FIRST HARMFUL EVENT: 1

MOST HARMFUL EVENT: 1

NON-MOTORIST EVENTS

COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED

COLLISION WITH FIXED OBJECT

UNIT SPEED	POSTED SPEED	TRAFFIC CONTROL	UNIT DIRECTION
0 ☑ STATED ☐ ESTIMATED	35	04	FROM 4 TO 3

1 - N, 2 - NE, 3 - E, 4 - SE, 5 - S, 6 - SW, 7 - W, 8 - NW, 9 - UNKNOWN

OHIO DEPARTMENT OF PUBLIC SAFETY
EDUCATION • SERVICE • PROTECTION

UNIT

Local Report Number: 16-351

Unit Number: 03

Owner Name (Last, First, Middle): ☑ Same As Driver

Owner Phone Number: ☑ Same As Driver

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

Damage Scale: 2
1 - None
2
3 - Functional
4 - Disabling
9 - Unknown

Damaged Area: Front 02, 09, 03, 08, 10, 04, 07, 05, Rear

LP State: OH

License Plate Number: DKB7648

Vehicle Identification Number: 1FAHP2EW7BG174445

Occupants: 02

Vehicle Year: 2011

Vehicle Make: Ford

Vehicle Model: Taurus

Vehicle Color: Maroon

☑ Proof Insurance Shown

Insurance Company: Grange Mutual

Policy Number: FA6344393

Towed By: N/A

Carrier Name, Address, City, State, Zip:

Carrier Phone - Include Area Code:

HM Placard ID No.:

HM Class Number:

Vehicle Weight GVWR/GCWR:

☐ Hazardous Material Released

Cargo Type: 01

Trafficway Description: 1

☐ Hit/Skip Unit

Non-Motorist Location Prior to Impact:
02 - [illegible]
03 - [illegible]
04 - [illegible]
05 - [illegible]
06 - [illegible]
07 - [illegible]
08 - [illegible]
09 - [illegible]
10 - [illegible]
11 - [illegible]
12 - Non Trafficway Area
99 - Unknown

Type of Use: 1

☐ In Emergency Response

Unit Type: 04

Bus Value/Type of Motor Bus Driver:
21 - [illegible]
22 - [illegible]

Non-Motorist:
23 - Animal with Rider
24 - Animal with Buggy, Wagon, Sleigh
25 - Bicycle/Pedacycle
26 - Pedestrian/Skater
27 - Other Non-Motorist

☐ Has HM Placard

Special Function: 01

Most Damaged Area: 06

Impact Area: 06

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

Pre-Crash Actions: 11

Motorist:
01 - Stopped
02 - Sapling
03 - Changing Lanes
04 - Overtaking/Passing
05 - Making Right Turn
06 - Making Left Turn
08 - [illegible]
09 - [illegible]
10 - [illegible]
11 - [illegible]
12 - [illegible]

Non-Motorist:
21 - Other Non-Motorist Action

99 - Unknown

Contributing Circumstances:

Primary: 01

Secondary:

Motorist:
01 - None
02 - [illegible]
03 - Ran Red Light
04 - Ran Stop Sign
05 - Exceeded Speed Limit
06 - Uncafe Speed
07 - Improper Turn
08 - Left of Center
09 - [illegible]
10 - Improper Lane Change (Passing/Off Road)
11 - [illegible]
12 - [illegible]
13 - [illegible]
14 - [illegible]
15 - [illegible]
16 - [illegible]
17 - [illegible]
18 - [illegible]
19 - [illegible]
20 - [illegible]
21 - Other Motorist Action

Non-Motorist:
22 - None
23 - Improper Crossing
24 - Darting
25 - [illegible]
26 - [illegible]
27 - [illegible]
28 - [illegible]
29 - [illegible]
30 - Wrong Side
31 - [illegible]

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 20 2 3 4 5 6

First Harmful Event: 1

Most Harmful Event: 1

99 - Unknown

Non-Collision Events:
01 - [illegible]
02 - [illegible]
03 - [illegible]
04 - [illegible]
05 - Cargo Equipment
06 - [illegible]
07 - Separation of Units
08 - Ran Off Road Right
09 - Ran Off Road Left
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 - [illegible]
16 - [illegible]
17 - [illegible]
18 - Animal - Other
19 - Animal - Other
20 - Motor Vehicle in Transport
21 - Parked Motor Vehicle
22 - Work Zone Maintenance Equipment
23 - [illegible]
24 - Other Motor Vehicle

Collision with Fixed Object:
25 - [illegible]
26 - [illegible]
27 - [illegible]
28 - [illegible]
29 - [illegible]
30 - Guardrail Face
31 - Guardrail End
32 - Portable Barrier
33 - [illegible]
34 - [illegible]
35 - [illegible]
36 - Median Crossing Barrier
37 - Traffic Sign Post
38 - [illegible]
39 - Light/Luminaire Support
40 - Utility Pole
41 - [illegible]
42 - [illegible]
43 - [illegible]
44 - Ditch
45 - [illegible]
46 - Fence
47 - Mailbox
48 - Tree
49 - Fire Hydrant
50 - Work Zone Maintenance Equipment
51 - Wall, Building, Tunnel
52 - Other Fixed Object

Unit Speed: 0

☑ Stated
☐ Estimated

Posted Speed: 35

Traffic Control: 04
01 - [illegible]
02 - [illegible]
03 - [illegible]
04 - Traffic Signal
05 - Traffic Flashers
06 - [illegible]
07 - [illegible]
08 - [illegible]
09 - [illegible]
10 - [illegible]
11 - [illegible]
12 - Pavement Markings
13 - [illegible]
14 - [illegible]
15 - [illegible]
16 - [illegible]

Unit Direction: From 4 To 3
1 - N
2 - S
3 - East
4 - West
5 - Northeast
6 - Northwest
7 - Southeast
8 - Southwest
9 - Unknown

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SY8304 OHTE (Rev. 01/12)