TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER: 16-362

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 Department

NUMBER OF UNITS: 3

UNIT IN ERROR: 01 (98 - Animal, 99 - Unknown)

COUNTY: 83

CITY / VILLAGE / TOWNSHIP: Lebanon

CRASH DATE: 10/22/2016

TIME OF CRASH: 1510

DAY OF WEEK: SAT

DEGREES / MINUTES / SECONDS

LATITUDE: 0° ' "

LONGITUDE: 0° ' "

DECIMAL DEGREES

LATITUDE: 39.433362

LONGITUDE: -84.208118

ROADWAY DIVISION: Undivided

DIVIDED LANE DIRECTION OF TRAVEL: N - Northbound, E - Eastbound, S - Southbound, 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:

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

LOCATION ROAD NAME: Main

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): E

REFERENCE ROUTE TYPE [1]:

REFERENCE ROUTE NUMBER:

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

REFERENCE NAME (Road, Milepost, House #): Broadway

REFERENCE ROAD TYPE [2]: ST

REFERENCE POINT USED: 1 (1 - Intersection, 2 - Mile Post, 3 - House Number)

CRASH LOCATION: 02 (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 - Rut, 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):

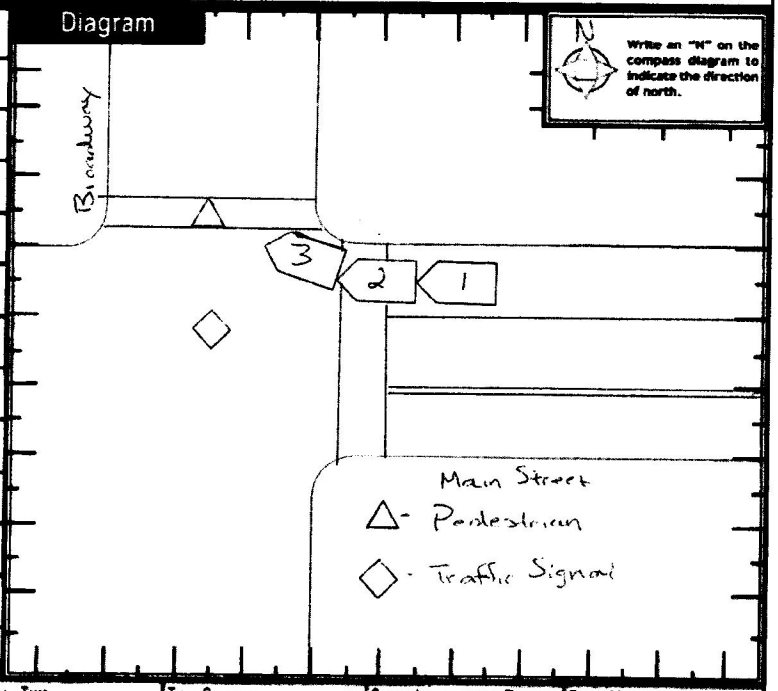
TYPE OF WORK ZONE: (1 - Lane Closure, 2 - Lane Shift/Crossover, 3 - Work on Shoulder or Median, 4 - Intermittent or Moving Work, 5 - Other)

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

Units 1, 2, and 3 were all headed westbound on Main Street approaching the Broadway intersection. The driver of Unit 3 was waiting to make a right hand turn, as there were pedestrians in the crosswalk. Unit 2 was immediately behind Unit 3. The driver of Unit 1 failed to stop, striking Unit 2 from behind, which forced Unit 2 into the rear of Unit 3. The driver of Unit 1 was issued a citation for ACDA pursuant to ORD. 333.03.

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
10/22/2016	1510	1511	1512	1540	30	58

OFFICER'S NAME: Ptl. C. Brock

OFFICER'S BADGE NUMBER: 126

CHECKED BY:

OHIO DEPARTMENT OF PUBLIC SAFETY — UNIT

Report Number: 16-362

Unit Number	Owner Name: Last, First, Middle (☑ Same As Driver)	Owner Phone Number (Incl. Area Code) (☑ Same As Driver)	Damage Scale	Damaged Area
01	Mccormick, Zachary Lee	(937) 554-0551	3	

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

4374 Silverberry Ave. Dayton, OH 45424

LP State	License Plate Number	Vehicle Identification Number	# Occupants
OH	FPC 3009	2GCEC19J281228337	01

Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Color
2008	Chevrolet	Silverado	Red

☑ Proof of Insurance Shown	Insurance Company	Policy Number	Towed By
	Allstate	980 870 034	

Carrier Name, Address, City, State, Zip

Carrier Phone (Include Area Code)

CVO DOT

HM Placard ID No.

HM Class Number

Vehicle Weight GVWR/GCWR: 1 (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 (16+ Passengers); 03 - Bus (Non-Commercial); 04 - Bus (Commercial); 05 - Box (Delivery Truck); 06 - Box (Cargo Van, Enclosed Box); 07 - Cargo Tank; 08 - Flat Bed; 09 - Dump; 10 - Concrete Mixer; 11 - Auto Transporter; 12 - 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) 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 - Unmarked 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

Passenger Vehicles (Less than 9 Passengers): 01 - Sedan/Coupe; 02 - Limo; 03 - Minivan; 04 - Pickup; 05 - Sport Utility Vehicle; 06 - Station Wagon; 07 - Van; 08 - Van Trailer; 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 Tire; 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 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/Pedalcyclist; 26 - Pedestrian/Skater; 27 - Other Non-Motorist

☐ Has HM Placard

Special Function: 01

01 - None; 02 - Taxi; 03 - Receiving Unit (Driver); 04 - Beverage Unit (Driver); 05 - Beverage Unit (Passenger); 06 - Beverage Unit (Driver & Passenger); 07 - Beverage Unit (Other); 08 - Refuse; 09 - Refuse; 10 - Utility; 11 - Highway Maintenance; 12 - Mail; 13 - Police; 14 - Public Utility; 15 - Construction; 16 - Construction Equipment; 17 - Farm Vehicle; 18 - Farm Equipment; 19 - Mobile Crane; 20 - Tow Truck; 21 - Train; 22 - Other Function Not Listed; 99 - Unknown

Most Damaged Area: 02

Impact 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

Action: 3

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

Pre-Crash Actions: 01

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: 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 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 Defects

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 - 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: ☐ Stated ☐ Estimated

Posted Speed: 25

Traffic Control: 04

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 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 — EDUCATION · SERVICE · PROTECTION

OH-1

16-362

Unit Number	Owner Name: Last, First, Middle (☐ Same As Driver)	Owner Phone Number - Inc. Area Code (☐ Same As Driver)	Damage Scale	Damaged Area
02	Richardson, Robert	(513) 435-8389	2	

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

211 S. Waynesville RD Oregonia, OH 45054

LP State	License Plate Number	Vehicle Identification Number	# Occupants
OH	GVF 5233	1GNCS13W3Y2336374	02

Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Color
2000	Chevrolet	Blazer	White

☑ Proof of Insurance Shown	Insurance Company	Policy Number	Towed By
	Esurance	PAOH-006890848	

Carrier Name, Address, City, State, Zip

Carrier Phone - Include Area Code

CVO

HM Placard ID No.

HM Class Number

Vehicle Weight GVWR/GCWR: 1

☐ Hazardous Material 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: 06

Passenger Vehicles (less than 9 passengers): 03 Minivan

Med/Heavy Trucks or Combo Units > 10K lbs:

Bus/Van/Limo (9 or More Including Driver):

Non-Motorist:

☐ 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	2	3	4	5	6
20	20				

First Harmful Event: 1

Most Harmful Event: 1

99 - Unknown

Non-Collision Events:

Collision With Person, Vehicle or Object Not Fixed:

Collision With Fixed Object:

Unit Speed	Posted Speed	Traffic Control	Unit Direction
	25	04	From 3 To 4

☐ Stated ☐ Estimated

Traffic Control: 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 Marking; 13 - Crosswalk Lines; 14 - Walk/Don't Walk; 15 - Other; 16 - Not Reported

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

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OHIO DEPARTMENT OF PUBLIC SAFETY — UNIT

Local Report Number: 16-362

Unit Number	Owner Name: Last, First, Middle (☑ Same As Driver)	Owner Phone Number - Inc. Area Code (☑ Same As Driver)	Damage Scale	Damaged Area
03	Couch, Darrell B.	(513) 850-5614	2	

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

427 E. Main Street Lebanon, OH 45036

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

Damaged Area: Front, Rear

LP State	License Plate Number	Vehicle Identification Number	# Occupants
OH	GUL 4770	1G1ZT62875F298841	01

Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Color
2005	Chevrolet	Malibu	Grey

☑ Proof of Insurance Shown	Insurance Company	Policy Number	Towed By
	Dowrey	1151868 00	

Carrier Name, Address, City, State, Zip

Carrier Phone- Include Area Code

CDL

HM Placard ID No

HM Class Number

☐ Hazardous Material Released

Vehicle Weight GVWR/GCWR: 1 - LBS.

Cargo Body Type: 01 - No Cargo Body Type / Not Applicable; 02 - Bus (16+ Seats, Inc Driver); 03 - Bus (9-15 Seats, Inc Driver); 04 - Bus (Seats Determined by Another Function); 05 - Van; 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 - Unknown or Hit/Skip; **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) Median; 4 - Two-Way, Divided, Positive Median Barrier; 5 - One-Way Trafficway; **1**

☐ Hit/Skip Unit

Non-Motorist Location Prior to Impact: 01 - Inter-section - Marked Crosswalk; 02 - Inter-section - Unmarked Crosswalk; 03 - Intersection - Other; 04 - Middle of Block/Between Intersections; 05 - Traveling Wrong Way; 06 - Bike 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**

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; 99 - Unknown or Hit/Skip

Med/Heavy Trucks or Combo Units > 10K lbs: 13 - Single Unit Truck or Van 2Axle 6 Tires; 14 - Single Unit Truck or Van 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

☐ Has HM Placard

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

Special Function: **01**

01 - None; 02 - Taxi; 03 - Electronic Ride Sharing; 04 - Bus - School (Public or Private); 05 - Bus - Transit or Commuter; 06 - Bus - Charter or Tour; 07 - Bus - Shuttle; 08 - Bus - Other; 09 - Ambulance; 10 - Fire; 11 - Military/Maintenance; 12 - Police; 13 - Public Utility; 14 - Construction; 15 - Federal Government; 16 - State Government; 17 - Local Government; 18 - Farm Equipment; 19 - Motorcycle; 20 - Golf Cart; 21 - Train; 22 - Other Enforcement/Non-Enforcement; 99 - Unknown

Most Damaged Area: **06**

Impact Area: **06**

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

Action: **4**

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

Pre-Crash Actions: **11**

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 - Negotiating a Curve; 13 - Driverless Motor Vehicle In Motion; 14 - Other Motorist Action; 99 - Unknown

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: **01**

Secondary:

99 - Unknown

Motorist: 01 - None; 02 - Failure to Yield; 03 - Ran Red Light; 04 - Ran Stop Sign; 05 - Unsafe Speed; 06 - Improper Turn; 07 - Left of Center; 08 - Followed Too Closely/ACDA; 09 - Improper Lane Change; 10 - Improper Passing; 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 Defects

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 - 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: ☐ Stated ☐ Estimated

Posted Speed: 25

Traffic Control: **04**

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 **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 — MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER: 16-362

MOTORIST

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
01	McCormick, Zachary Lee	07/31/1982	34	M

ADDRESS, CITY, STATE, ZIP: 4374 Silverberry Ave. Dayton, OH 45424

CONTACT PHONE - INCLUDE AREA CODE: (937) 554-0551

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	RV891965	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	069905	☐	1

MOTORIST

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
02	Richardson, Andrew Scott	11/21/1988	27	M

ADDRESS, CITY, STATE, ZIP: 211 S. Waynesville RD Oregonia, OH 45054

CONTACT PHONE - INCLUDE AREA CODE: (513) 435-8389

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	SY238682	4	☐	☐	1	1	1	1	.	1	1

OFFENSE CHARGED (■ LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED	DRIVER DISTRACTED BY
			☐	

Code Lists

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
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
09 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)
10 - REFLECTIVE CLOTHING
11 - LIGHTING
12 - OTHER
99 - UNKNOWN SAFETY EQUIPMENT
Non-Motorist
20 - NONE USED
21 - HELMET USED
22 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)
23 - REFLECTIVE CLOTHING
24 - LIGHTING
25 - 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 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 - PARTIALLY EJECTED
3 - TOTALLY EJECTED
9 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - EXTRICATED BY NON-MECHANICAL MEANS
4 - FREED BY NORMAL OPENING OF VEHICLE
9 - NOT APPLICABLE

OPERATOR LICENSE CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/CYCLE ONLY
6 - NONE (CHAUFFEUR)

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 TESTED
4 - YES - DRUGS SUSPECTED
5 - YES - ALCOHOL AND DRUGS SUSPECTED

ALCOHOL TEST STATUS
1 - NONE GIVEN
2 - TEST REFUSED
3 - TEST GIVEN, CONTAMINATED / INSUFFICIENT
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
4 - TEST REFUSED
3 - TEST GIVEN, CONTAMINATED / INSUFFICIENT
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
4 - ELECTRONIC COMMUNICATION DEVICE
5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, ETC)
6 - OTHER INSIDE THE VEHICLE
7 - OUTSIDE DISTRACTION

MOTORIST

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
02	Cox, Matthew	06/18/1987	29	M

ADDRESS, CITY, STATE, ZIP: 5321 State Route 123 Franklin, OH 45005

CONTACT PHONE - INCLUDE AREA CODE: (937) 829-9728

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

MOTORIST

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
					☐				

OHIO — MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER: 16-362

UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
03	Couch, Darrell B.	06291963	53	M (F - FEMALE, M - MALE)

ADDRESS, CITY, STATE, ZIP: 427 E. Main Street Lebanon, OH 45036

CONTACT PHONE - INCLUDE AREA CODE: (513) 850-5614

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				04	☐	01	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	NO VALID OL	M/C ENDS	CONDITION	ALCOHOL/DRUG SUSPECTED	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST STATUS	DRUG TEST TYPE
OH	RK784990	4	☐	☐	1	1	1	1	.	1	1

OFFENSE CHARGED (☐ LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED	DRIVER DISTRACTED BY
			☐	1

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
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OL CLASS	NO VALID OL	M/C ENDS	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
09 - Reflective Apparel Equipment

Non-Motorist
10 - None Used
11 - Helmet Used
12 - Protective Pads Used (Elbows, Knees, Etc)
13 - Protective Clothing
14 - Lighting
15 - 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 - 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 (Other than "C")
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
				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
					☐				