OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*: M-P2500588

- [x] PHOTOS TAKEN
- [ ] SECONDARY CRASH
- [ ] OH-2
- [x] OH-3
- [ ] OH-1P
- [ ] OTHER
- [x] PRIVATE PROPERTY

LOCAL INFORMATION

REPORTING AGENCY NAME*: Mt Vernon Police Department

NCIC*: 04201

HIT/SKIP (1 - SOLVED, 2 - UNSOLVED): 2

NUMBER OF UNITS: 2

UNIT IN ERROR (98 - ANIMAL, 99 - UNKNOWN): 1

COUNTY*: 42

LOCALITY* (1 - CITY, 2 - VILLAGE, 3 - TOWNSHIP): 1

LOCATION: CITY, VILLAGE, TOWNSHIP*: Mount Vernon

CRASH DATE/TIME*: 02/19/2025 09:15

CRASH SEVERITY: 5
1 - FATAL
2 - SERIOUS INJURY SUSPECTED
3 - MINOR INJURY SUSPECTED
4 - INJURY POSSIBLE
5 - PROPERTY DAMAGE ONLY

LOCATION

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	LOCATION ROAD NAME	ROAD TYPE	LATITUDE
			MOUNT VERNON SHOPPING PLAZA	AV	40.400390

REFERENCE

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE
			855 COSHOCTON AVENUE		-82.458712

REFERENCE POINT: 3 (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE #)

DIRECTION FROM REFERENCE: (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)

DISTANCE FROM REFERENCE:

DISTANCE UNIT OF MEASURE: (1 - MILES, 2 - FEET, 3 - YARDS)

ROUTE TYPE: IR - INTERSTATE ROUTE (TP); US - FEDERAL US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE: AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; OV - OVAL; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

INTERSECTION RELATED

- [ ] WITHIN INTERSECTION OR ON APPROACH
- [ ] WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES:

ROADWAY

- [ ] ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT: 6
1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFIC WAY; 7 - ON RAMP; 8 - OFF RAMP; 9 - CROSSOVER; 10 - DRIVEWAY/ALLEY ACCESS; 11 - RAILWAY GRADE CROSSING; 12 - SHARED USE PATHS OR TRAILS; 13 - BIKE LANE; 14 - TOLL BOOTH; 99 - OTHER/UNKNOWN

MANNER OF CRASH COLLISION/IMPACT: 9
1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT; 2 - REAR-END; 3 - HEAD-ON; 4 - REAR-TO-REAR; 5 - BACKING; 6 - ANGLE; 7 - SIDESWIPE, SAME DIRECTION; 8 - SIDESWIPE, OPPOSITE DIRECTION; 9 - OTHER/UNKNOWN

DIRECTION OF TRAVEL: (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)

MEDIAN TYPE: 1 - DIVIDED FLUSH MEDIAN (< 4 FEET); 2 - DIVIDED FLUSH MEDIAN (>= 4 FEET); 3 - DIVIDED, DEPRESSED MEDIAN; 4 - DIVIDED, RAISE MEDIAN (ANY TYPE); 9 - OTHER/UNKNOWN

- [ ] WORK ZONE RELATED
- [ ] WORKERS PRESENT
- [ ] LAW ENFORCEMENT PRESENT
- [ ] ACTIVE SCHOOL ZONE

WORK ZONE TYPE: 1 - LANE CLOSURE; 2 - LANE SHFT/CROSSOVER; 3 - WORK ON SHOULDER OR MEDIAN; 4 - INTERMITTENT OR MOVING WORK; 5 - OTHER

LOCATION OF CRASH IN WORK ZONE: 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN; 2 - ADVANCE WARNING AREA; 3 - TRANSITION AREA; 4 - ACTIVITY AREA; 5 - TERMINATION AREA

CONTOUR: 1
1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - OTHER/UNKNOWN

CONDITIONS: 1
1 - DRY; 2 - WET; 3 - SNOW; 4 - ICE; 5 - SAND, MUD, DIRT, OIL, GRAVEL; 6 - WATER (STANDING, MOVING); 7 - SLUSH; 9 - OTHER/UNKNOWN

SURFACE: 2
1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 9 - OTHER/UNKNOWN

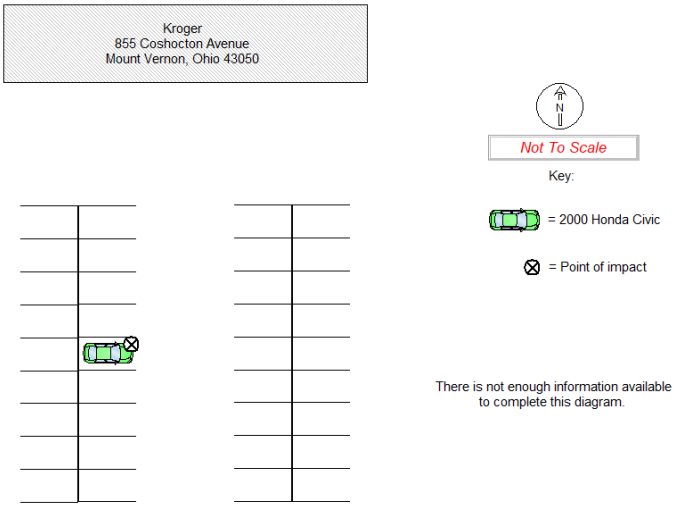
LIGHT CONDITION: 1
1 - DAYLIGHT; 2 - DAWN/DUSK; 3 - DARK - LIGHTED ROADWAY; 4 - DARK - ROADWAY NOT LIGHTED; 5 - DARK - UNKNOWN ROADWAY LIGHTING; 9 - OTHER/UNKNOWN

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 - FREEZING RAIN OR FREEZING DRIZZLE; 99 - OTHER/UNKNOWN

NARRATIVE

Unit 2 indicated that her vehicle was parked, unoccupied, in the Mount Vernon Shopping Plaza parking lot when it was struck. No information was available to identify Unit 1.

DIAGRAM



CRASH REPORTED DATE/TIME	DISPATCH DATE/TIME	ARRIVAL DATE/TIME	SCENE CLEARED DATE/TIME
02/19/2025 10:00	02/19/2025 10:02	02/19/2025 10:09	02/19/2025 10:27

REPORT TAKEN BY
- [x] POLICE AGENCY
- [ ] MOTORIST
- [ ] SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	CHECKED BY OFFICER'S NAME*
0	15	40	Trowbridge, Justin	

OFFICER'S BADGE NUMBER*: 292-23

CHECKED BY OFFICER'S BADGE NUMBER*:

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500588

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
1		

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

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | **COMMERICAL CARRIER PHONE:** INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE

☐ INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #

TOWED BY: COMPANY NAME

☐ **INTERLOCK DEVICE EQUIPPED** ■ **HIT/SKIP UNIT**

 # OCCUPANTS: 1

VEHICLE WEIGHT GVWR/GCWR: ☐ 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — CLASS # — PLACARD ID #

UNIT TYPE: 20
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/ SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

 # OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN **AUTONOMOUS MODE** WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 99
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

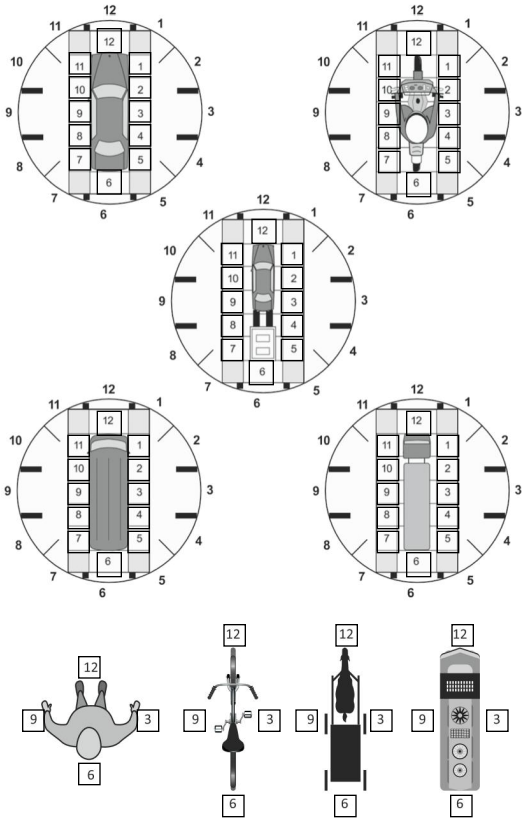
CARGO BODY TYPE: 99
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S)
INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ■ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 99
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 99
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 99
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	21
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 **MOST HARMFUL EVENT**: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

 # OF THROUGH LANES ON ROAD: 2

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

UNIT / NON-MOTORIST DIRECTION: FROM 9 TO 9
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

UNIT SPEED:

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

POSTED SPEED: 15

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500588

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
2	PAULINO, ROBERT J	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER): 224 TERRACE VIEW N, HOWARD, OH 43028

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | COMMERICAL CARRIER PHONE: INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	HTW8505	1HGEJ6679YL056881	2000	Honda

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	NATIONWIDE INSURANCE	9234J218553	Green, Lig	Civic

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

OCCUPANTS:

VEHICLE WEIGHT GVWR/GCWR: 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD; CLASS #; PLACARD ID #

UNIT TYPE: 1

1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/ SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0

0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1

1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

CARGO BODY TYPE: 1

1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:

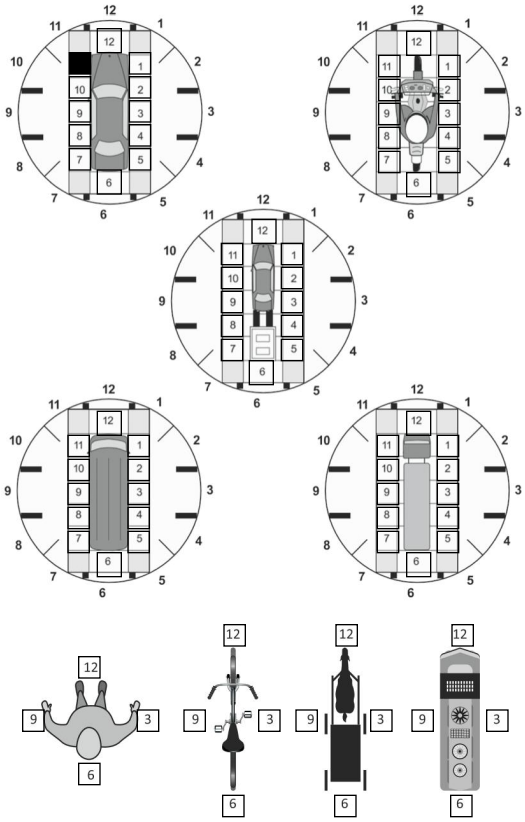
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

DAMAGE SCALE: 2

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

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:

1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

ACTION: 4

1 - NON-CONTACT, 2 - NON-COLLISION, 3 - STRIKING, 4 - STRUCK, 5 - BOTH STRIKING & STRUCK, 9 - OTHER/UNKNOWN

PRE-CRASH ACTIONS: 10

1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 11

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

CONTRIBUTING CIRCUMSTANCES: 1

1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS

1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK

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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

OF THROUGH LANES ON ROAD: 2

RAIL GRADE CROSSING: 1 (1 - NOT INVOLVED, 2 - INVOLVED-ACTIVE CROSSING, 3 - INVOLVED-PASSIVE CROSSING)

UNIT / NON-MOTORIST DIRECTION: FROM 4 TO 3

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

UNIT SPEED: 0

DETECTED SPEED: 1 (1 - STATED/ESTIMATED SPEED, 2 - CALCULATED/EDR, 3 - UNDETERMINED)

POSTED SPEED: 15

OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*: M-P2500588

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	UNKNOWN, UNKNOWN	01/01/2000	25	M

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				99	☐	1	9	4	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
			☐		

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
			9	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	9	1	1	.	1	1	

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
			☐		

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
			☐		

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

INJURIES
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

SAFETY EQUIPMENT
1 - NONE USED
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

SEATING POSITION
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)
2 - FRONT - MIDDLE
3 - FRONT - RIGHT SIDE
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)
5 - SECOND - MIDDLE
6 - SECOND - RIGHT SIDE
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)
8 - THIRD - MIDDLE
9 - THIRD - RIGHT
10 - SLEEPER SECTION OF TRUCK CAB
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)
12 - PASSENGER IN UNENCLOSED CARGO AREA
13 - TRAILING UNIT
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)
15 - NON-MOTORIST
99 - OTHER / UNKNOWN

AIR BAG
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
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

OL CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/C MOPED ONLY
6 - NO VALID OL

OL ENDORSEMENT
H - HAZMAT
M - MOTORCYCLE
P - PASSENGER
N - TANKER
Q - MOTOR SCOOTER
R - THREE-WHEEL MOTORCYCLE
S - SCHOOL BUS
T - DOUBLE & TRIPLE TRAILERS
X - TANKER / HAZMAT

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

OL RESTRICTION(S)
1 - ALCOHOL INTERLOCK DEVICE
2 - CDL INTRASTATE ONLY
3 - CORRECTIVE LENSES
4 - FARM WAIVER
5 - EXCEPT CLASS A BUS
6 - EXCEPT CLASS A & CLASS B BUS
7 - EXCEPT TRACTOR-TRAILER
8 - INTERMEDIATE LICENSE RESTRICTIONS
9 - LEARNER'S PERMIT RESTRICTIONS
10 - LIMITED TO DAYLIGHT ONLY
11 - LIMITED TO EMPLOYMENT
12 - LIMITED - OTHER
13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)
14 - MILITARY VEHICLES ONLY
15 - MOTOR VEHICLES WITHOUT AIR BRAKES
16 - OUTSIDE MIRROR
17 - PROSTHETIC AID
18 - OTHER

DRIVER DISTRACTION
1 - NOT DISTRACTED
2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)
3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE
4 - TALKING ON HAND-HELD COMMUNICATION DEVICE
5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE
6 - PASSENGER
7 - OTHER DISTRACTION INSIDE THE VEHICLE
8 - OTHER DISTRACTION OUTSIDE THE VEHICLE
9 - OTHER / UNKNOWN

CONDITION
1 - APPARENTLY NORMAL
2 - PHYSICAL IMPAIRMENT
3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)
4 - ILLNESS
5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.
6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL
9 - OTHER / UNKNOWN

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 TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - OTHER

DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*: M-P2500592

- [■] PHOTOS TAKEN
- [ ] SECONDARY CRASH
- [ ] OH-2 [ ] OH-3 [ ] OH-1P [ ] OTHER [ ] PRIVATE PROPERTY

LOCAL INFORMATION

REPORTING AGENCY NAME*: Mt Vernon Police Department

NCIC*: 04201

HIT/SKIP (1 - SOLVED, 2 - UNSOLVED): [ ]

NUMBER OF UNITS: 2

UNIT IN ERROR (98 - ANIMAL, 99 - UNKNOWN): [1]

COUNTY*: 42

LOCALITY* (1 - CITY, 2 - VILLAGE, 3 - TOWNSHIP): [1]

LOCATION: CITY, VILLAGE, TOWNSHIP*: Mount Vernon

CRASH DATE/TIME*: 02/19/2025 22:39

CRASH SEVERITY: [5]
1 - FATAL
2 - SERIOUS INJURY SUSPECTED
3 - MINOR INJURY SUSPECTED
4 - INJURY POSSIBLE
5 - PROPERTY DAMAGE ONLY

LOCATION

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	LOCATION ROAD NAME	ROAD TYPE	LATITUDE
		[4]	HIGH	ST	40.393684

REFERENCE

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE
		[2]	MULBERRY	ST	-82.486674

REFERENCE POINT: [1] (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE #)

DIRECTION FROM REFERENCE: [ ] (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)

DISTANCE FROM REFERENCE:

DISTANCE UNIT OF MEASURE: [ ] (1 - MILES, 2 - FEET, 3 - YARDS)

ROUTE TYPE: IR - INTERSTATE ROUTE (TP); US - FEDERAL US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE: AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; OV - OVAL; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

INTERSECTION RELATED
- [■] WITHIN INTERSECTION OR ON APPROACH
- [ ] WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES: [2]

ROADWAY
- [ ] ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT: [1]
1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFIC WAY; 7 - ON RAMP; 8 - OFF RAMP; 9 - CROSSOVER; 10 - DRIVEWAY/ALLEY ACCESS; 11 - RAILWAY GRADE CROSSING; 12 - SHARED USE PATHS OR TRAILS; 13 - BIKE LANE; 14 - TOLL BOOTH; 99 - OTHER/UNKNOWN

MANNER OF CRASH COLLISION/IMPACT: [6]
1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT; 2 - REAR-END; 3 - HEAD-ON; 4 - REAR-TO-REAR; 5 - BACKING; 6 - ANGLE; 7 - SIDESWIPE, SAME DIRECTION; 8 - SIDESWIPE, OPPOSITE DIRECTION; 9 - OTHER/UNKNOWN

DIRECTION OF TRAVEL: [ ] (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)

MEDIAN TYPE: [ ]
1 - DIVIDED FLUSH MEDIAN (< 4 FEET); 2 - DIVIDED FLUSH MEDIAN (>= 4 FEET); 3 - DIVIDED, DEPRESSED MEDIAN; 4 - DIVIDED, RAISE MEDIAN (ANY TYPE); 9 - OTHER/UNKNOWN

- [ ] WORK ZONE RELATED
- [ ] WORKERS PRESENT
- [ ] LAW ENFORCEMENT PRESENT
- [ ] ACTIVE SCHOOL ZONE

WORK ZONE TYPE: [ ]
1 - LANE CLOSURE; 2 - LANE SHFT/CROSSOVER; 3 - WORK ON SHOULDER OR MEDIAN; 4 - INTERMITTENT OR MOVING WORK; 5 - OTHER

LOCATION OF CRASH IN WORK ZONE: [ ]
1 - BEFORE THE 1ST WORK ZONE WARNING SIGN; 2 - ADVANCE WARNING AREA; 3 - TRANSITION AREA; 4 - ACTIVITY AREA; 5 - TERMINATION AREA

CONTOUR: [1]
1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - OTHER/UNKNOWN

CONDITIONS: [1]
1 - DRY; 2 - WET; 3 - SNOW; 4 - ICE; 5 - SAND, MUD, DIRT, OIL, GRAVEL; 6 - WATER (STANDING, MOVING); 7 - SLUSH; 9 - OTHER/UNKNOWN

SURFACE: [2]
1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 9 - OTHER/UNKNOWN

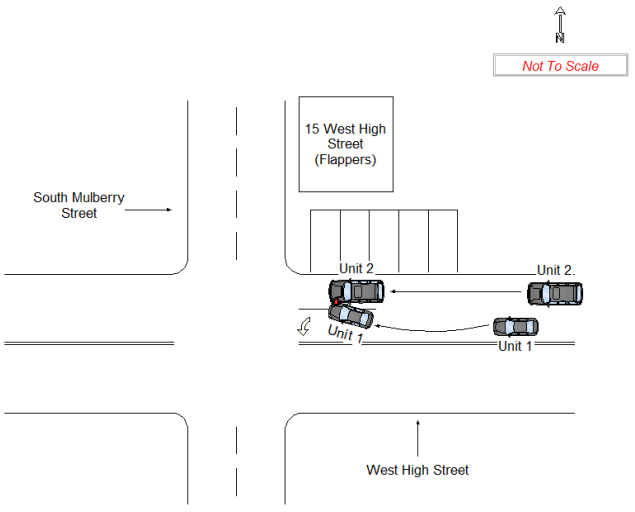
LIGHT CONDITION: [3]
1 - DAYLIGHT; 2 - DAWN/DUSK; 3 - DARK - LIGHTED ROADWAY; 4 - DARK - ROADWAY NOT LIGHTED; 5 - DARK - UNKNOWN ROADWAY LIGHTING; 9 - OTHER/UNKNOWN

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 - FREEZING RAIN OR FREEZING DRIZZLE; 99 - OTHER/UNKNOWN

NARRATIVE

Unit #1 was traveling westbound on West High Street when Unit #1 was in the left turn lane near the intersection of West High Street near South Mulberry Street when Unit #1 went into the right lane striking Unit #2. Unit #2 was traveling westbound on West High Street when Unit #2 was struck Unit #2

DIAGRAM



CRASH REPORTED DATE/TIME	DISPATCH DATE/TIME	ARRIVAL DATE/TIME	SCENE CLEARED DATE/TIME
02/19/2025 22:39	02/19/2025 22:39	02/19/2025 22:41	02/19/2025 23:02

REPORT TAKEN BY
- [■] POLICE AGENCY
- [ ] MOTORIST
- [ ] SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	CHECKED BY OFFICER'S NAME*
0	0	23	Sexton, Cody	

OFFICER'S BADGE NUMBER*: 292-14

CHECKED BY OFFICER'S BADGE NUMBER*:

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500592

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
1	STOKES, KYLIE RAINE	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
5311 BRIDLE CREEK WAY, HILLIARD, OH 43026

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | COMMERICAL CARRIER PHONE: INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	KML4835	3VWRX7AJ7AM142828	2010	Volkswagen

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	ALLSTATE INSURANCE	975422122	Silver	

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

OCCUPANTS: 1

VEHICLE WEIGHT GVWR/GCWR: ☐ 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — CLASS # — PLACARD ID #

UNIT TYPE: 1
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/ SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

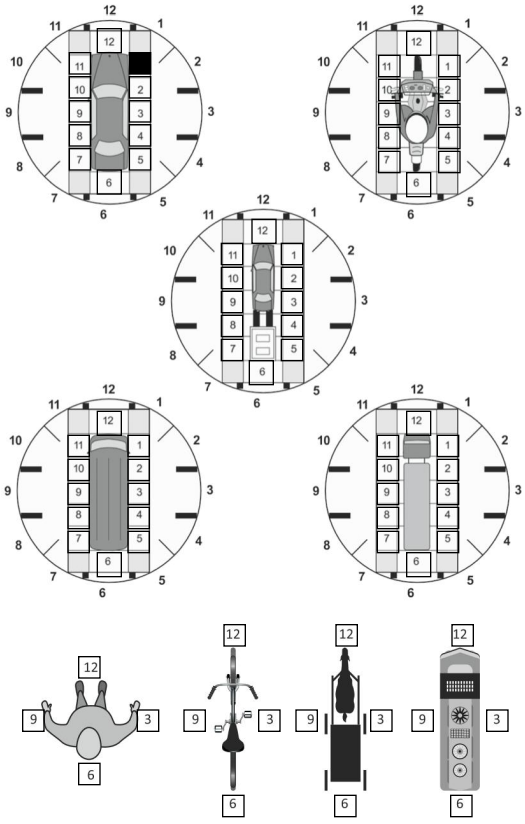
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT: 1
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 99
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 9
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

OF THROUGH LANES ON ROAD: 2

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

UNIT / NON-MOTORIST DIRECTION: FROM 3 TO 4
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

UNIT SPEED:

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

POSTED SPEED: 25

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500592

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
2	THOMPSON, AMBER NICOLE	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
444 WOOSTER RD, MOUNT VERNON, OH 43050

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | **COMMERICAL CARRIER PHONE:** INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	B1031A	KNDRHDLG6P5168786	2023	Kia

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	PROGRESSIVE	983727773	Black	

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

 # OCCUPANTS: 2

VEHICLE WEIGHT GVWR/GCWR: ☐ 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — CLASS # — PLACARD ID #

UNIT TYPE: 3
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

 # OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED?: 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

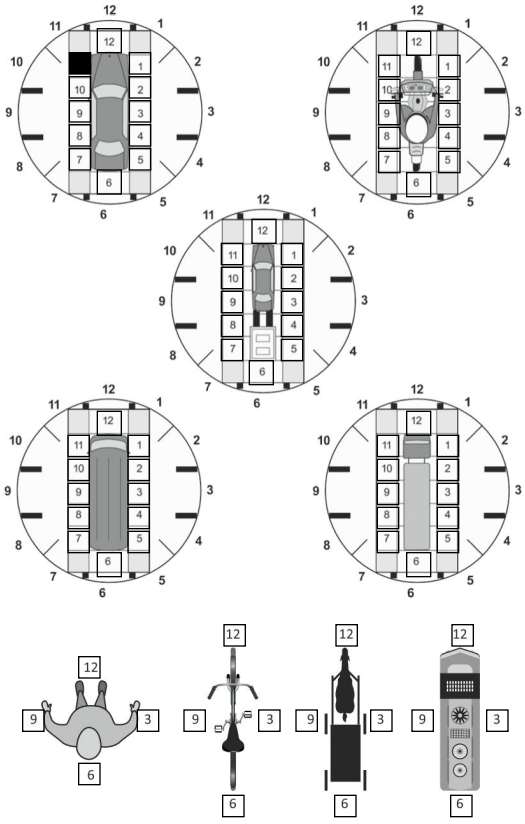
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S)
INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 1
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 11
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 1
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 **MOST HARMFUL EVENT**: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

 # OF THROUGH LANES ON ROAD: 2

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

UNIT / NON-MOTORIST DIRECTION: FROM 3 TO 4
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

UNIT SPEED:

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

POSTED SPEED: 25

OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*: M-P2500592

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	STOKES, KYLIE RAINE	11/22/2001	23	F

ADDRESS: STREET, CITY, STATE, ZIP: 299 GLENRIDGE CIR, HOWARD, OH 43028

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	VP652692	MTV 331.08	■	Drive In Marked/Continous Lines	MVP42012500000739

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
4			1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
2	THOMPSON, AMBER NICOLE	06/25/2000	24	F

ADDRESS: STREET, CITY, STATE, ZIP: 444 WOOSTER RD, MOUNT VERNON, OH 43050

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	UP253700		☐		

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
4			1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
			☐		

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

INJURIES
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

SAFETY EQUIPMENT
1 - NONE USED
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

SEATING POSITION
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)
2 - FRONT - MIDDLE
3 - FRONT - RIGHT SIDE
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)
5 - SECOND - MIDDLE
6 - SECOND - RIGHT SIDE
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)
8 - THIRD - MIDDLE
9 - THIRD - RIGHT
10 - SLEEPER SECTION OF TRUCK CAB
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)
12 - PASSENGER IN UNENCLOSED CARGO AREA
13 - TRAILING UNIT
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)
15 - NON-MOTORIST
99 - OTHER / UNKNOWN

AIR BAG
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
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

OL CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/C MOPED ONLY
6 - NO VALID OL

OL ENDORSEMENT
H - HAZMAT
M - MOTORCYCLE
P - PASSENGER
N - TANKER
Q - MOTOR SCOOTER
R - THREE-WHEEL MOTORCYCLE
S - SCHOOL BUS
T - DOUBLE & TRIPLE TRAILERS
X - TANKER / HAZMAT

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

OL RESTRICTION(S)
1 - ALCOHOL INTERLOCK DEVICE
2 - CDL INTRASTATE ONLY
3 - CORRECTIVE LENSES
4 - FARM WAIVER
5 - EXCEPT CLASS A BUS
6 - EXCEPT CLASS A & CLASS B BUS
7 - EXCEPT TRACTOR-TRAILER
8 - INTERMEDIATE LICENSE RESTRICTIONS
9 - LEARNER'S PERMIT RESTRICTIONS
10 - LIMITED TO DAYLIGHT ONLY
11 - LIMITED TO EMPLOYMENT
12 - LIMITED - OTHER
13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)
14 - MILITARY VEHICLES ONLY
15 - MOTOR VEHICLES WITHOUT AIR BRAKES
16 - OUTSIDE MIRROR
17 - PROSTHETIC AID
18 - OTHER

DRIVER DISTRACTION
1 - NOT DISTRACTED
2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)
3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE
4 - TALKING ON HAND-HELD COMMUNICATION DEVICE
5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE
6 - PASSENGER
7 - OTHER DISTRACTION INSIDE THE VEHICLE
8 - OTHER DISTRACTION OUTSIDE THE VEHICLE
9 - OTHER / UNKNOWN

CONDITION
1 - APPARENTLY NORMAL
2 - PHYSICAL IMPAIRMENT
3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)
4 - ILLNESS
5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.
6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL
9 - OTHER / UNKNOWN

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 TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - OTHER

DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

OHIO DEPARTMENT OF PUBLIC SAFETY — OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER*: M-P2500592

OCCUPANT

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
2	Sparkman, Brittany N	08/23/1987	37	F

ADDRESS: STREET, CITY, STATE, ZIP: 444 WOOSTER RD, MT VERNON, OH 43050

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	3	1	1	1

OCCUPANT

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OCCUPANT

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OCCUPANT

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

INJURY
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

SAFETY EQUIPMENT USED
1 - NONE USED - VEHICLE OCCUPANT
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

SEATING POSITION
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)
2 - FRONT - MIDDLE
3 - FRONT - RIGHT SIDE
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)
5 - SECOND - MIDDLE
6 - SECOND - RIGHT SIDE
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)
8 - THIRD - MIDDLE
9 - THIRD - RIGHT
10 - SLEEPER SECTION OF TRUCK CAB
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)
12 - PASSENGER IN UNENCLOSED CARGO AREA
13 - TRAILING UNIT
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)
15 - NON-MOTORIST
99 - OTHER / UNKNOWN

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
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*: M-P2500595

- [ ] PHOTOS TAKEN
- [ ] SECONDARY CRASH
- [ ] OH-2
- [x] OH-3
- [ ] OH-1P
- [ ] OTHER
- [ ] PRIVATE PROPERTY

LOCAL INFORMATION

REPORTING AGENCY NAME*: Mt Vernon Police Department

NCIC*: 04201

HIT/SKIP (1 - SOLVED, 2 - UNSOLVED): [ ]

NUMBER OF UNITS: 2

UNIT IN ERROR (98 - ANIMAL, 99 - UNKNOWN): [1]

COUNTY*: 42

LOCALITY* (1 - CITY, 2 - VILLAGE, 3 - TOWNSHIP): [1]

LOCATION: CITY, VILLAGE, TOWNSHIP*: Mount Vernon

CRASH DATE/TIME*: 02/20/2025 07:18

CRASH SEVERITY: [5]
1 - FATAL
2 - SERIOUS INJURY SUSPECTED
3 - MINOR INJURY SUSPECTED
4 - INJURY POSSIBLE
5 - PROPERTY DAMAGE ONLY

LOCATION

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	LOCATION ROAD NAME	ROAD TYPE	LATITUDE
		[3]	CHESTNUT	ST	40.394588

REFERENCE

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE
		[1]	MAIN	ST	-82.485143

REFERENCE POINT (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE #): [1]

DIRECTION FROM REFERENCE (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST): [3]

DISTANCE FROM REFERENCE: 65

DISTANCE UNIT OF MEASURE (1 - MILES, 2 - FEET, 3 - YARDS): [2]

ROUTE TYPE: IR - INTERSTATE ROUTE (TP); US - FEDERAL US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE: AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; OV - OVAL; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

INTERSECTION RELATED
- [ ] WITHIN INTERSECTION OR ON APPROACH
- [ ] WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES: [ ]

ROADWAY
- [ ] ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT: [1]
1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFIC WAY; 7 - ON RAMP; 8 - OFF RAMP; 9 - CROSSOVER; 10 - DRIVEWAY/ALLEY ACCESS; 11 - RAILWAY GRADE CROSSING; 12 - SHARED USE PATHS OR TRAILS; 13 - BIKE LANE; 14 - TOLL BOOTH; 99 - OTHER/UNKNOWN

MANNER OF CRASH COLLISION/IMPACT: [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 - OTHER/UNKNOWN

DIRECTION OF TRAVEL: [ ]
1 - NORTH; 2 - SOUTH; 3 - EAST; 4 - WEST

MEDIAN TYPE: [ ]
1 - DIVIDED FLUSH MEDIAN (< 4 FEET); 2 - DIVIDED FLUSH MEDIAN (>= 4 FEET); 3 - DIVIDED, DEPRESSED MEDIAN; 4 - DIVIDED, RAISE MEDIAN (ANY TYPE); 9 - OTHER/UNKNOWN

- [ ] WORK ZONE RELATED
- [ ] WORKERS PRESENT
- [ ] LAW ENFORCEMENT PRESENT
- [ ] ACTIVE SCHOOL ZONE

WORK ZONE TYPE: [ ]
1 - LANE CLOSURE; 2 - LANE SHFT/CROSSOVER; 3 - WORK ON SHOULDER OR MEDIAN; 4 - INTERMITTENT OR MOVING WORK; 5 - OTHER

LOCATION OF CRASH IN WORK ZONE: [ ]
1 - BEFORE THE 1ST WORK ZONE WARNING SIGN; 2 - ADVANCE WARNING AREA; 3 - TRANSITION AREA; 4 - ACTIVITY AREA; 5 - TERMINATION AREA

CONTOUR: [2]
1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - OTHER/UNKNOWN

CONDITIONS: [3]
1 - DRY; 2 - WET; 3 - SNOW; 4 - ICE; 5 - SAND, MUD, DIRT, OIL, GRAVEL; 6 - WATER (STANDING, MOVING); 7 - SLUSH; 9 - OTHER/UNKNOWN

SURFACE: [2]
1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 9 - OTHER/UNKNOWN

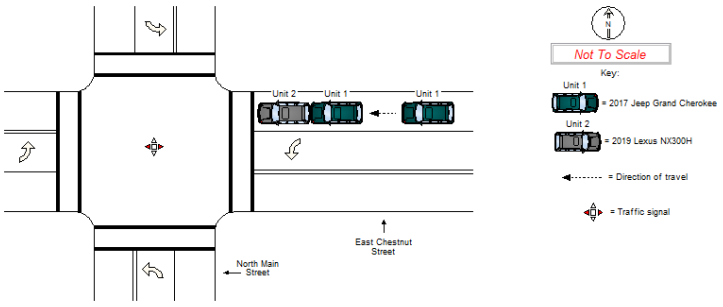
LIGHT CONDITION: [2]
1 - DAYLIGHT; 2 - DAWN/DUSK; 3 - DARK - LIGHTED ROADWAY; 4 - DARK - ROADWAY NOT LIGHTED; 5 - DARK - UNKNOWN ROADWAY LIGHTING; 9 - OTHER/UNKNOWN

WEATHER: [2]
1 - CLEAR; 2 - CLOUDY; 3 - FOG, SMOG, SMOKE; 4 - RAIN; 5 - SLEET, HAIL; 6 - SNOW; 7 - SEVERE CROSSWINDS; 8 - BLOWING SAND, SOIL, DIRT, SNOW; 9 - FREEZING RAIN OR FREEZING DRIZZLE; 99 - OTHER/UNKNOWN

NARRATIVE

Unit 1 and Unit 2 were traveling westbound on East Chestnut Street. Unit 2 stopped for the traffic light at North Main Street. Unit 1 failed to stop and struck Unit 2 in the rear-end.

DIAGRAM



CRASH REPORTED DATE/TIME	DISPATCH DATE/TIME	ARRIVAL DATE/TIME	SCENE CLEARED DATE/TIME
02/20/2025 07:19	02/20/2025 07:23	02/20/2025 07:23	02/20/2025 07:39

REPORT TAKEN BY
- [x] POLICE AGENCY
- [ ] MOTORIST
- [ ] SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	CHECKED BY OFFICER'S NAME*
0	20	36	Trowbridge, Justin	

OFFICER'S BADGE NUMBER*: 292-23

CHECKED BY OFFICER'S BADGE NUMBER*:

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500595

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
1	PAPADOPOL, NARCIS ARTUR	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
622 RIDGEWOOD DR, COSHOCTON, OH 43812

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | COMMERICAL CARRIER PHONE: INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	GOU1599	1C4RJFBT1FC127068	2015	Jeep

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	WAYNE MUTUAL INSURANCE CO	PAP0296219	Green, Dar	Grand Cherok

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

OCCUPANTS: 1

VEHICLE WEIGHT GVWR/GCWR: ☐ 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — CLASS # — PLACARD ID #

UNIT TYPE: 3
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

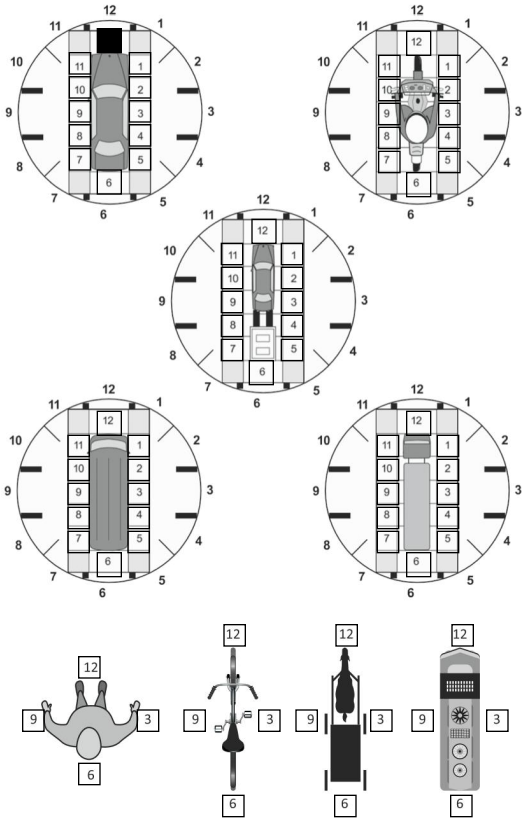
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT: 12
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 1
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 8
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

OF THROUGH LANES ON ROAD: 2

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

UNIT / NON-MOTORIST DIRECTION: FROM 3 TO 4
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

UNIT SPEED: 20

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

POSTED SPEED: 25

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500595

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
2	POLLAK, KENDALL N	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER): 6935 KINDLER DR, NEW ALBANY, OH 43054

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | COMMERICAL CARRIER PHONE: INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	JAU9148	JTJBJRBZ4K2106283	2019	Lexus

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	PROGRESSIVE INSURANCE	963306589	Gray	NX300

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

OCCUPANTS: 1

VEHICLE WEIGHT GVWR/GCWR: ☐ 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD; CLASS #; PLACARD ID #

UNIT TYPE: 3
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

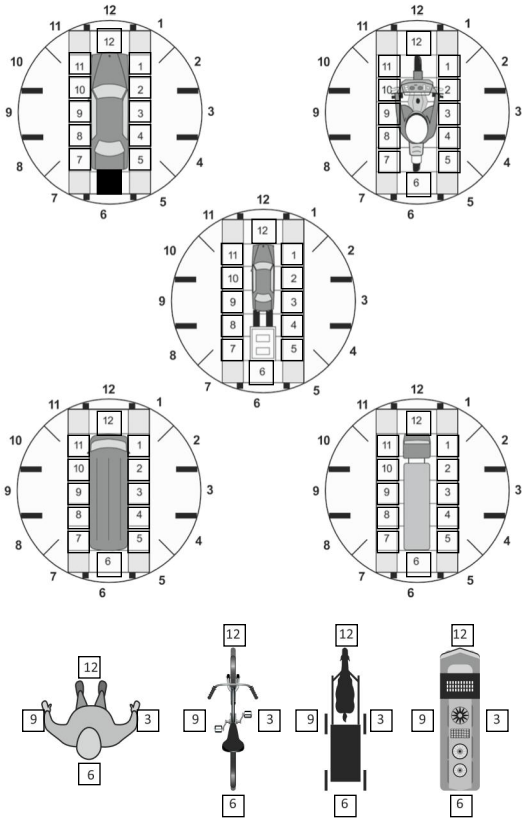
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 11
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 6
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 1
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

OF THROUGH LANES ON ROAD: 2

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

UNIT / NON-MOTORIST DIRECTION: FROM 3 TO 4
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

UNIT SPEED: 0

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

POSTED SPEED: 25

OHIO DEPARTMENT OF PUBLIC SAFETY

MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*: M-P2500595

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	PAPADOPOL, NARCIS ARTUR	10/29/1967	57	M

ADDRESS: STREET, CITY, STATE, ZIP: 622 RIDGEWOOD DR, COSHOCTON, OH 43812

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	4	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	TD589258	MTV 331.34	■	Failure To Control/Weaving Course	MVP42012500000583

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
4			1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
2	PORTER, KENDALL NICOLE	08/09/1995	29	F

ADDRESS: STREET, CITY, STATE, ZIP: 6935 KINDLER DR, NEW ALBANY, OH 43054

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	4	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	TY556668		☐		

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
4			1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
			☐		

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

INJURIES
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

SAFETY EQUIPMENT
1 - NONE USED
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

SEATING POSITION
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)
2 - FRONT - MIDDLE
3 - FRONT - RIGHT SIDE
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)
5 - SECOND - MIDDLE
6 - SECOND - RIGHT SIDE
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)
8 - THIRD - MIDDLE
9 - THIRD - RIGHT
10 - SLEEPER SECTION OF TRUCK CAB
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)
12 - PASSENGER IN UNENCLOSED CARGO AREA
13 - TRAILING UNIT
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)
15 - NON-MOTORIST
99 - OTHER / UNKNOWN

AIR BAG
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
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

OL CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/C MOPED ONLY
6 - NO VALID OL

OL ENDORSEMENT
H - HAZMAT
M - MOTORCYCLE
P - PASSENGER
N - TANKER
Q - MOTOR SCOOTER
R - THREE-WHEEL MOTORCYCLE
S - SCHOOL BUS
T - DOUBLE & TRIPLE TRAILERS
X - TANKER / HAZMAT

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

OL RESTRICTION(S)
1 - ALCOHOL INTERLOCK DEVICE
2 - CDL INTRASTATE ONLY
3 - CORRECTIVE LENSES
4 - FARM WAIVER
5 - EXCEPT CLASS A BUS
6 - EXCEPT CLASS A & CLASS B BUS
7 - EXCEPT TRACTOR-TRAILER
8 - INTERMEDIATE LICENSE RESTRICTIONS
9 - LEARNER'S PERMIT RESTRICTIONS
10 - LIMITED TO DAYLIGHT ONLY
11 - LIMITED TO EMPLOYMENT
12 - LIMITED - OTHER
13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)
14 - MILITARY VEHICLES ONLY
15 - MOTOR VEHICLES WITHOUT AIR BRAKES
16 - OUTSIDE MIRROR
17 - PROSTHETIC AID
18 - OTHER

DRIVER DISTRACTION
1 - NOT DISTRACTED
2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)
3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE
4 - TALKING ON HAND-HELD COMMUNICATION DEVICE
5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE
6 - PASSENGER
7 - OTHER DISTRACTION INSIDE THE VEHICLE
8 - OTHER DISTRACTION OUTSIDE THE VEHICLE
9 - OTHER / UNKNOWN

CONDITION
1 - APPARENTLY NORMAL
2 - PHYSICAL IMPAIRMENT
3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)
4 - ILLNESS
5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.
6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL
9 - OTHER / UNKNOWN

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 TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - OTHER

DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*: M-P2500599

- [ ] PHOTOS TAKEN
- [ ] SECONDARY CRASH
- [ ] OH-2
- [x] OH-3
- [ ] OH-1P
- [ ] OTHER
- [ ] PRIVATE PROPERTY

LOCAL INFORMATION

REPORTING AGENCY NAME*: Mt Vernon Police Department

NCIC*: 04201

HIT/SKIP (1 - SOLVED, 2 - UNSOLVED): [ ]

NUMBER OF UNITS: 1

UNIT IN ERROR (98 - ANIMAL, 99 - UNKNOWN): [1]

COUNTY*: 42

LOCALITY* (1 - CITY, 2 - VILLAGE, 3 - TOWNSHIP): [1]

LOCATION: CITY, VILLAGE, TOWNSHIP*: Mount Vernon

CRASH DATE/TIME*: 02/20/2025 09:46

CRASH SEVERITY: [5]
1 - FATAL
2 - SERIOUS INJURY SUSPECTED
3 - MINOR INJURY SUSPECTED
4 - INJURY POSSIBLE
5 - PROPERTY DAMAGE ONLY

LOCATION

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	LOCATION ROAD NAME	ROAD TYPE	LATITUDE
		[2]	CATHERINE	ST	40.391190

REFERENCE

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE
		[ ]	OAK	ST	-82.474116

REFERENCE POINT: [1] (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE #)

DIRECTION FROM REFERENCE: [ ] (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)

DISTANCE FROM REFERENCE:

DISTANCE UNIT OF MEASURE: [ ] (1 - MILES, 2 - FEET, 3 - YARDS)

ROUTE TYPE: IR - INTERSTATE ROUTE (TP); US - FEDERAL US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE: AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; OV - OVAL; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

INTERSECTION RELATED

- [ ] WITHIN INTERSECTION OR ON APPROACH
- [ ] WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES: [ ]

ROADWAY

- [ ] ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT: [1]
1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFIC WAY; 7 - ON RAMP; 8 - OFF RAMP; 9 - CROSSOVER; 10 - DRIVEWAY/ALLEY ACCESS; 11 - RAILWAY GRADE CROSSING; 12 - SHARED USE PATHS OR TRAILS; 13 - BIKE LANE; 14 - TOLL BOOTH; 99 - OTHER/UNKNOWN

MANNER OF CRASH COLLISION/IMPACT: [1]
1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT; 2 - REAR-END; 3 - HEAD-ON; 4 - REAR-TO-REAR; 5 - BACKING; 6 - ANGLE; 7 - SIDESWIPE, SAME DIRECTION; 8 - SIDESWIPE, OPPOSITE DIRECTION; 9 - OTHER/UNKNOWN

DIRECTION OF TRAVEL: [ ] (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)

MEDIAN TYPE: [ ]
1 - DIVIDED FLUSH MEDIAN (< 4 FEET); 2 - DIVIDED FLUSH MEDIAN (>= 4 FEET); 3 - DIVIDED, DEPRESSED MEDIAN; 4 - DIVIDED, RAISE MEDIAN (ANY TYPE); 9 - OTHER/UNKNOWN

- [ ] WORK ZONE RELATED
- [ ] WORKERS PRESENT
- [ ] LAW ENFORCEMENT PRESENT
- [ ] ACTIVE SCHOOL ZONE

WORK ZONE TYPE: [ ]
1 - LANE CLOSURE; 2 - LANE SHFT/CROSSOVER; 3 - WORK ON SHOULDER OR MEDIAN; 4 - INTERMITTENT OR MOVING WORK; 5 - OTHER

LOCATION OF CRASH IN WORK ZONE: [ ]
1 - BEFORE THE 1ST WORK ZONE WARNING SIGN; 2 - ADVANCE WARNING AREA; 3 - TRANSITION AREA; 4 - ACTIVITY AREA; 5 - TERMINATION AREA

CONTOUR: [1]
1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - OTHER/UNKNOWN

CONDITIONS: [3]
1 - DRY; 2 - WET; 3 - SNOW; 4 - ICE; 5 - SAND, MUD, DIRT, OIL, GRAVEL; 6 - WATER (STANDING, MOVING); 7 - SLUSH; 9 - OTHER/UNKNOWN

SURFACE: [3]
1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 9 - OTHER/UNKNOWN

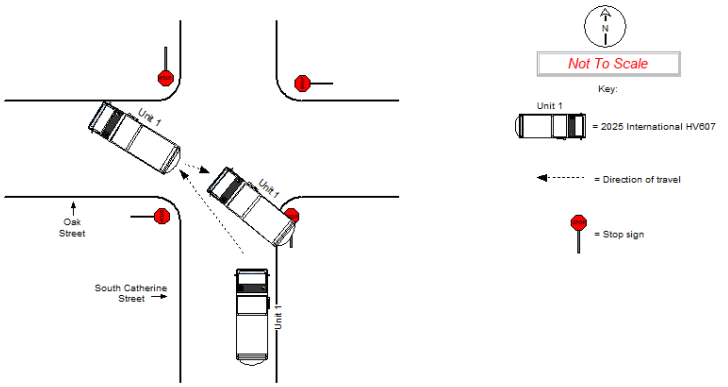
LIGHT CONDITION: [1]
1 - DAYLIGHT; 2 - DAWN/DUSK; 3 - DARK - LIGHTED ROADWAY; 4 - DARK - ROADWAY NOT LIGHTED; 5 - DARK - UNKNOWN ROADWAY LIGHTING; 9 - OTHER/UNKNOWN

WEATHER: [2]
1 - CLEAR; 2 - CLOUDY; 3 - FOG, SMOG, SMOKE; 4 - RAIN; 5 - SLEET, HAIL; 6 - SNOW; 7 - SEVERE CROSSWINDS; 8 - BLOWING SAND, SOIL, DIRT, SNOW; 9 - FREEZING RAIN OR FREEZING DRIZZLE; 99 - OTHER/UNKNOWN

NARRATIVE

Unit 1 was traveling northbound on South Catherine Street. Unit 1 turned westbound onto Oak Street. Unit 1 then backed southeast bound to maneuverer the turn. Unit 1 backed over the stop sign on the southeast corner of the intersection.

DIAGRAM



CRASH REPORTED DATE/TIME	DISPATCH DATE/TIME	ARRIVAL DATE/TIME	SCENE CLEARED DATE/TIME
02/20/2025 09:48	02/20/2025 09:49	02/20/2025 09:53	02/20/2025 10:20

REPORT TAKEN BY
- [x] POLICE AGENCY
- [ ] MOTORIST
- [ ] SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	CHECKED BY OFFICER'S NAME*
0	20	51	Trowbridge, Justin	

OFFICER'S BADGE NUMBER*: 292-23

CHECKED BY OFFICER'S BADGE NUMBER*:

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500599

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
1	RUMPKE TRANSPORTATION CO LLC	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
3990 GENERATION DR, CINCINNATI, OH 45251

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP
RUMPKE TRANSPORTATION CO LLC, 3990 GENERATION DR, CINCINNATI, OH 45251

COMMERICAL CARRIER PHONE: INCLUDE AREA CODE
(740) 393-2057

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	PLT5758	3HAEJTAR4SL734224	2025	International

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	NATIONAL UNION FIRE INS.	4805391	White	HV607

TYPE OF USE: ■ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #: 330912

TOWED BY: COMPANY NAME

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

OCCUPANTS: 1

VEHICLE WEIGHT GVWR/GCWR: 2
1 - <= 10K LBS.
2 - 10,001 - 26K LBS.
3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — CLASS # — PLACARD ID #

UNIT TYPE: 14
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 99
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

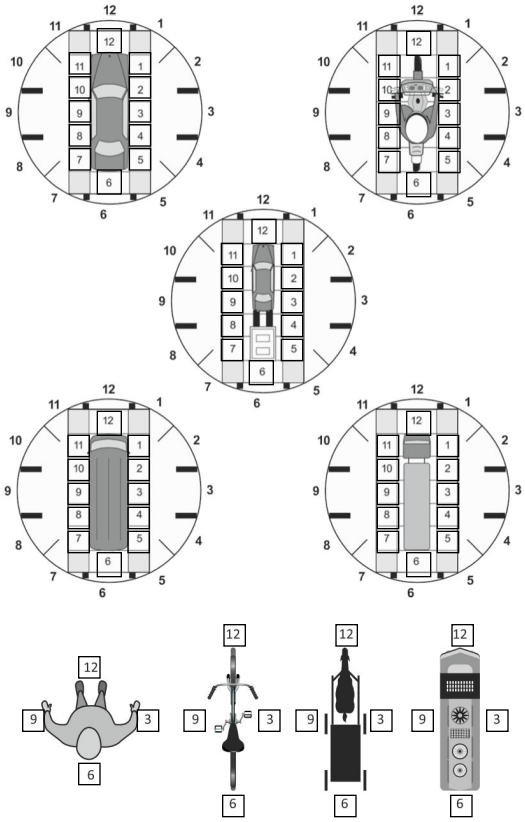
CARGO BODY TYPE: 14
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



■ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14]
☐ - TOP [13] ☐ - ALL AREAS [15]
☐ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 2
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 6
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 12
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

OF THROUGH LANES ON ROAD: 2

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

UNIT / NON-MOTORIST DIRECTION: FROM 2 TO 4
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

SEQUENCE OF EVENTS

1	41
2	
3	
4	
5	
6	

EVENTS: 1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK: 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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

UNIT SPEED: 4

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

POSTED SPEED: 25

OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*: M-P2500599

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	STULL, JONCE EDWARD	07/29/1978	46	M

ADDRESS: STREET, CITY, STATE, ZIP: 112 E 3RD ST, PERRYSVILLE, OH 44864

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	4	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	RN820165	MTV 331.13	■	Starting And Backing Vehicles	MVP42012500000585

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
1			1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
			☐		

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
			☐		

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

INJURIES
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

SAFETY EQUIPMENT
1 - NONE USED
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

SEATING POSITION
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)
2 - FRONT - MIDDLE
3 - FRONT - RIGHT SIDE
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)
5 - SECOND - MIDDLE
6 - SECOND - RIGHT SIDE
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)
8 - THIRD - MIDDLE
9 - THIRD - RIGHT
10 - SLEEPER SECTION OF TRUCK CAB
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)
12 - PASSENGER IN UNENCLOSED CARGO AREA
13 - TRAILING UNIT
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)
15 - NON-MOTORIST
99 - OTHER / UNKNOWN

AIR BAG
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
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

OL CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/C MOPED ONLY
6 - NO VALID OL

OL ENDORSEMENT
H - HAZMAT
M - MOTORCYCLE
P - PASSENGER
N - TANKER
Q - MOTOR SCOOTER
R - THREE-WHEEL MOTORCYCLE
S - SCHOOL BUS
T - DOUBLE & TRIPLE TRAILERS
X - TANKER / HAZMAT

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

OL RESTRICTION(S)
1 - ALCOHOL INTERLOCK DEVICE
2 - CDL INTRASTATE ONLY
3 - CORRECTIVE LENSES
4 - FARM WAIVER
5 - EXCEPT CLASS A BUS
6 - EXCEPT CLASS A & CLASS B BUS
7 - EXCEPT TRACTOR-TRAILER
8 - INTERMEDIATE LICENSE RESTRICTIONS
9 - LEARNER'S PERMIT RESTRICTIONS
10 - LIMITED TO DAYLIGHT ONLY
11 - LIMITED TO EMPLOYMENT
12 - LIMITED - OTHER
13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)
14 - MILITARY VEHICLES ONLY
15 - MOTOR VEHICLES WITHOUT AIR BRAKES
16 - OUTSIDE MIRROR
17 - PROSTHETIC AID
18 - OTHER

DRIVER DISTRACTION
1 - NOT DISTRACTED
2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)
3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE
4 - TALKING ON HAND-HELD COMMUNICATION DEVICE
5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE
6 - PASSENGER
7 - OTHER DISTRACTION INSIDE THE VEHICLE
8 - OTHER DISTRACTION OUTSIDE THE VEHICLE
9 - OTHER / UNKNOWN

CONDITION
1 - APPARENTLY NORMAL
2 - PHYSICAL IMPAIRMENT
3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)
4 - ILLNESS
5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.
6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL
9 - OTHER / UNKNOWN

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 TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - OTHER

DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

OHIO DEPARTMENT OF PUBLIC SAFETY

OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER*: M-P2500599

OCCUPANT

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

ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OCCUPANT

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

ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE

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OCCUPANT

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

ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

INJURY
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4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

SAFETY EQUIPMENT USED
1 - NONE USED - VEHICLE OCCUPANT
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
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3 - TOTALLY EJECTED
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
GALLAGHER, CODY MASON	03/24/2001	23	M

ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE
110 SOUTH CATHERINE STREET, MOUNT VERNON, OH 43050	

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE

OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*: M-P2500604

- [ ] PHOTOS TAKEN
- [ ] SECONDARY CRASH
- [ ] OH-2
- [ ] OH-3
- [ ] OH-1P
- [ ] OTHER
- [ ] PRIVATE PROPERTY

LOCAL INFORMATION

REPORTING AGENCY NAME*: Mt Vernon Police Department

NCIC*: 04201

HIT/SKIP (1 - SOLVED, 2 - UNSOLVED): [ ]

NUMBER OF UNITS: 2

UNIT IN ERROR (98 - ANIMAL, 99 - UNKNOWN): [1]

COUNTY*: 42

LOCALITY* (1 - CITY, 2 - VILLAGE, 3 - TOWNSHIP): [1]

LOCATION: CITY, VILLAGE, TOWNSHIP*: Mount Vernon

CRASH DATE/TIME*: 02/20/2025 14:32

CRASH SEVERITY: [5]
1 - FATAL
2 - SERIOUS INJURY SUSPECTED
3 - MINOR INJURY SUSPECTED
4 - INJURY POSSIBLE
5 - PROPERTY DAMAGE ONLY

LOCATION

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	LOCATION ROAD NAME	ROAD TYPE	LATITUDE
		[ ]	COSHOCTON	AV	40.401449

REFERENCE

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE
		[ ]	WOODLAKE	TL	-82.450324

REFERENCE POINT (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE #): [1]

DIRECTION FROM REFERENCE (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST): [3]

DISTANCE FROM REFERENCE: 175

DISTANCE UNIT OF MEASURE (1 - MILES, 2 - FEET, 3 - YARDS): [2]

ROUTE TYPE: IR - INTERSTATE ROUTE (TP); US - FEDERAL US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE: AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; OV - OVAL; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

INTERSECTION RELATED
- [ ] WITHIN INTERSECTION OR ON APPROACH
- [ ] WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES: [ ]

ROADWAY
- [ ] ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT: [1]
1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFIC WAY; 7 - ON RAMP; 8 - OFF RAMP; 9 - CROSSOVER; 10 - DRIVEWAY/ALLEY ACCESS; 11 - RAILWAY GRADE CROSSING; 12 - SHARED USE PATHS OR TRAILS; 13 - BIKE LANE; 14 - TOLL BOOTH; 99 - OTHER/UNKNOWN

MANNER OF CRASH COLLISION/IMPACT: [6]
1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT; 2 - REAR-END; 3 - HEAD-ON; 4 - REAR-TO-REAR; 5 - BACKING; 6 - ANGLE; 7 - SIDESWIPE, SAME DIRECTION; 8 - SIDESWIPE, OPPOSITE DIRECTION; 9 - OTHER/UNKNOWN

DIRECTION OF TRAVEL (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST): [ ]

MEDIAN TYPE: [ ]
1 - DIVIDED FLUSH MEDIAN (< 4 FEET); 2 - DIVIDED FLUSH MEDIAN (>= 4 FEET); 3 - DIVIDED, DEPRESSED MEDIAN; 4 - DIVIDED, RAISE MEDIAN (ANY TYPE); 9 - OTHER/UNKNOWN

- [ ] WORK ZONE RELATED
- [ ] WORKERS PRESENT
- [ ] LAW ENFORCEMENT PRESENT
- [ ] ACTIVE SCHOOL ZONE

WORK ZONE TYPE: [ ]
1 - LANE CLOSURE; 2 - LANE SHFT/CROSSOVER; 3 - WORK ON SHOULDER OR MEDIAN; 4 - INTERMITTENT OR MOVING WORK; 5 - OTHER

LOCATION OF CRASH IN WORK ZONE: [ ]
1 - BEFORE THE 1ST WORK ZONE WARNING SIGN; 2 - ADVANCE WARNING AREA; 3 - TRANSITION AREA; 4 - ACTIVITY AREA; 5 - TERMINATION AREA

CONTOUR: [1]
1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - OTHER/UNKNOWN

CONDITIONS: [2]
1 - DRY; 2 - WET; 3 - SNOW; 4 - ICE; 5 - SAND, MUD, DIRT, OIL, GRAVEL; 6 - WATER (STANDING, MOVING); 7 - SLUSH; 9 - OTHER/UNKNOWN

SURFACE: [2]
1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 9 - OTHER/UNKNOWN

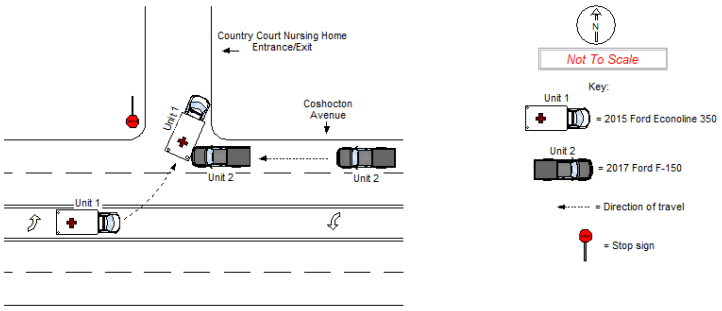
LIGHT CONDITION: [1]
1 - DAYLIGHT; 2 - DAWN/DUSK; 3 - DARK - LIGHTED ROADWAY; 4 - DARK - ROADWAY NOT LIGHTED; 5 - DARK - UNKNOWN ROADWAY LIGHTING; 9 - OTHER/UNKNOWN

WEATHER: [2]
1 - CLEAR; 2 - CLOUDY; 3 - FOG, SMOG, SMOKE; 4 - RAIN; 5 - SLEET, HAIL; 6 - SNOW; 7 - SEVERE CROSSWINDS; 8 - BLOWING SAND, SOIL, DIRT, SNOW; 9 - FREEZING RAIN OR FREEZING DRIZZLE; 99 - OTHER/UNKNOWN

NARRATIVE

Unit 1 was traveling eastbound on Coshocton Avenue in the center turn lane. Unit 2 was traveling westbound on Coshocton Avenue in the outside lane. Unit 1 attempted to turn northbound into the Country Court Nursing Home entrance. Unit 1 failed to see Unit 2 and turned in front of them. Unit 1 was struck in the right mid rear by Unit 2.

DIAGRAM



CRASH REPORTED DATE/TIME	DISPATCH DATE/TIME	ARRIVAL DATE/TIME	SCENE CLEARED DATE/TIME
02/20/2025 14:34	02/20/2025 14:34	02/20/2025 14:37	02/20/2025 15:09

REPORT TAKEN BY
- [ ] POLICE AGENCY
- [ ] MOTORIST
- [ ] SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	CHECKED BY OFFICER'S NAME*
0	25	60	Trowbridge, Justin	

OFFICER'S BADGE NUMBER*: 292-23

CHECKED BY OFFICER'S BADGE NUMBER*:

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*
M-P2500604

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
1	DONALD MARTENS SONS AMB SRV	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
10830 BROOKPARK RD, BROOKLYN, OH 44130

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP — **COMMERICAL CARRIER PHONE:** INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	113ZVV	1FDWE3FSXFDA33140	2015	Ford

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	ARCH INSURANCE COMPANY	MAPK08410102	White	Econoline E3

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ **INTERLOCK DEVICE EQUIPPED** ☐ **HIT/SKIP UNIT**

 # OCCUPANTS: 4

VEHICLE WEIGHT GVWR/GCWR: ☐ 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — **CLASS #** — **PLACARD ID #**

UNIT TYPE: 20
1 - PASSENGER CAR; 2 - PASSENGER VAN (MINIVAN); 3 - SPORT UTILITY VEHICLE; 4 - PICK UP; 5 - CARGO VAN; 7 - MOTORCYCLE 2-WHEELED; 8 - MOTORCYCLE 3-WHEELED; 9 - AUTOCYCLE; 10 - MOPED OR MOTORIZED BICYCLE; 11 - ALL TERRAIN VEHICLE (ATV/UTV); 12 - GOLF CART; 13 - SNOWMOBILE; 14 - SINGLE UNIT TRUCK; 15 - SEMI-TRACTOR; 16 - FARM EQUIPMENT; 17 - MOTORHOME; 18 - LIMO (LIVERY VEHICLE); 19 - BUS (16+ PASSENGERS); 20 - OTHER VEHICLE; 21 - HEAVY EQUIPMENT; 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE; 23 - PEDESTRIAN/ SKATER; 24 - WHEELCHAIR (ANY TYPE); 25 - OTHER NON-MOTORIST; 26 - BICYCLE; 27 - TRAIN; 99 - UNKNOWN OR HIT/SKIP

 # OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION; 1 - DRIVER ASSISTANCE; 2 - PARTIAL AUTOMATION; 3 - CONDITIONAL AUTOMATION; 4 - HIGH AUTOMATION; 5 - FULL AUTOMATION; 9 - UNKNOWN

SPECIAL FUNCTION: 10
1 - NONE; 2 - TAXI; 3 - ELECTRONIC RIDE SHARING; 4 - SCHOOL TRANSPORT; 5 - BUS - TRANSIT /COMMUTER; 6 - BUS - CHARTER/TOUR; 7 - BUS - INTERCITY; 8 - BUS - SHUTTLE; 9 - BUS - OTHER; 10 - AMBULANCE; 11 - FIRE; 12 - MILITARY; 13 - POLICE; 14 - PUBLIC UTILITY; 15 - CONSTRUCTION EQUIPMENT; 16 - FARM; 17 - MOWING; 18 - SNOW REMOVAL; 19 - TOWING; 20 - SAFETY SERVICE PATROL; 21 - MAIL CARRIER; 99 - OTHER/UNKNOWN

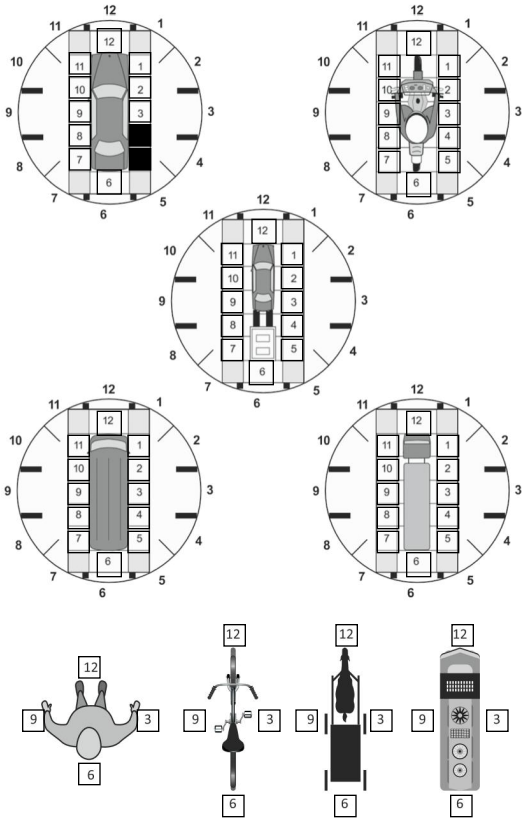
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE; 2 - BUS; 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE; 4 - LOGGING; 5 - INTERMODAL CONTAINER CHASSIS; 6 - CARGO VAN/ ENCLOSED BOX; 7 - GRAIN/CHIPS/GRAVEL; 8 - POLE; 9 - CARGO TANK; 10 - FLAT BED; 11 - DUMP; 12 - CONCRETE MIXER; 13 - AUTO TRANSPORTER; 14 - GARBAGE/REFUSE; 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS; 2 - HEAD LAMPS; 3 - TAIL LAMPS; 4 - BRAKES; 5 - STEERING; 6 - TIRE BLOWOUT; 7 - WORN OR SLICK TIRES; 8 - TRAILER EQUIPMENT DEFECTIVE; 9 - MOTOR TROUBLE; 10 - DISABLED FROM PRIOR ACCIDENT; 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S)
INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14]
☐ - TOP [13] ☐ - ALL AREAS [15]
☐ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK; 2 - INTERSECTION - UNMARKED CROSSWALK; 3 - INTERSECTION - OTHER; 4 - MIDBLOCK - MARKED CROSSWALK; 5 - TRAVEL LANE - OTHER LOCATION; 6 - BICYCLE LANE; 7 - SHOULDER/ ROADSIDE; 8 - SIDEWALK; 9 - MEDIAN/CROSSING ISLAND; 10 - DRIVEWAY ACCESS; 11 - SHARED USE PATHS OR TRAILS; 12 - FIRST RESPONDER AT INCIDENT SCENE; 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 6
1 - STRAIGHT AHEAD; 2 - BACKING; 3 - CHANGING LANES; 4 - OVERTAKING/ PASSING; 5 - MAKING RIGHT TURN; 6 - MAKING LEFT TURN; 7 - MAKING U-TURN; 8 - ENTERING TRAFFIC LANE; 9 - LEAVING TRAFFIC LANE; 10 - PARKED; 11 - SLOWING OR STOPPED IN TRAFFIC; 12 - DRIVERLESS; 13 - NEGOTIATING A CURVE; 14 - ENTERING OR CROSSING SPECIFIED LOCATION; 15 - WALKING, RUNNING, JOGGING, PLAYING; 16 - WORKING; 17 - PUSHING VEHICLE; 18 - APPROACHING OR LEAVING VEHICLE; 19 - STANDING; 20 - OTHER NON-MOTORIST; 21 - STANDING OUTSIDE DISABLED VEHICLE; 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 4
0 - NO DAMAGE; 1-12 - REFER TO UNIT DIAGRAM; 13 - TOP; 14 - UNDERCARRIAGE; 15 - VEHICLE NOT AT SCENE; 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 2
1 - NONE; 2 - FAILURE TO YIELD; 3 - RAN RED LIGHT; 4 - RAN STOP SIGN; 5 - UNSAFE SPEED; 6 - IMPROPER TURN; 7 - LEFT OF CENTER; 8 - FOLLOWING TOO CLOSE/ACDA; 9 - IMPROPER LANE CHANGE; 10 - IMPROPER PASSING; 11 - DROVE OFF ROAD; 12 - IMPROPER BACKING; 13 - IMPROPER START FROM A PARKED POSITION; 14 - STOPPED OR PARKED ILLEGALLY; 15 - SWERVING TO AVOID; 16 - WRONG WAY; 17 - VISION OBSTRUCTION; 18 - OPERATING DEFECTIVE EQUIPMENT; 19 - LOAD SHIFTING/ FALLING/SPILLING; 20 - IMPROPER CROSSING; 21 - LYING IN ROADWAY; 22 - NOT DISCERNIBLE; 23 - OPENING DOOR INTO ROADWAY; 99 - OTHER IMPROPER ACTION

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY; 2 - TWO-WAY)

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

 # OF THROUGH LANES ON ROAD: 4

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

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER; 2 - FIRE/EXPLOSION; 3 - IMMERSION; 4 - JACKKNIFE; 5 - CARGO/EQUIPMENT LOSS OR SHIFT; 6 - EQUIPMENT FAILURE; 7 - SEPARATION OF UNITS; 8 - RAN OFF ROAD RIGHT; 9 - RAN OFF ROAD LEFT; 10 - CROSS MEDIAN; 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL; 12 - DOWNHILL RUNAWAY; 13 - OTHER NON-COLLISION; 14 - PEDESTRIAN; 15 - PEDALCYCLE; 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 A MOTOR VEHICLE; 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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; 52 - BUILDING; 53 - TUNNEL; 54 - OTHER FIXED OBJECT; 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 **MOST HARMFUL EVENT:** 1

UNIT / NON-MOTORIST DIRECTION: FROM 4 TO 1
1 - NORTH; 2 - SOUTH; 3 - EAST; 4 - WEST; 5 - NORTHEAST; 6 - NORTHWEST; 7 - SOUTHEAST; 8 - SOUTHWEST; 9 - OTHER/UNKNOWN

UNIT SPEED: 10

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

POSTED SPEED: 35

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500604

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
2	RAINS, WES D	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER): 10722 BLUE RD, MT VERNON, OH 43050

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | COMMERICAL CARRIER PHONE: INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	HCC3319	1FTEW1EF3HFA23000	2017	Ford

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	STATE FARM INSURANCE	2426561SFP35	Gray	F-150

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

OCCUPANTS: 2

VEHICLE WEIGHT GVWR/GCWR: [ ] 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD | CLASS # | PLACARD ID #

UNIT TYPE: 4
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/ SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

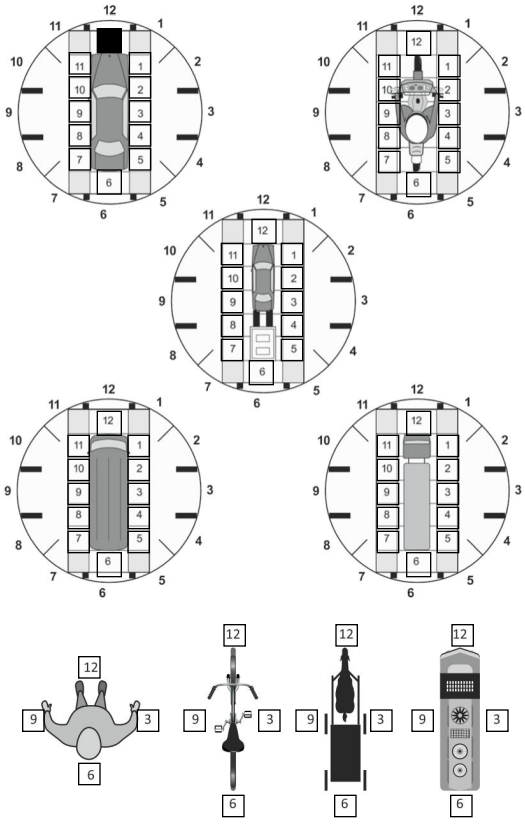
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS: [ ]
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT: [ ]
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 1
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 12
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 1
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

OF THROUGH LANES ON ROAD: 4

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

UNIT / NON-MOTORIST DIRECTION: FROM 3 TO 4
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

UNIT SPEED: 20

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

POSTED SPEED: 35

OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*: M-P2500604

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	HUMPHRIES, QUINTIN LEONARD	11/12/2001	23	M

ADDRESS: STREET, CITY, STATE, ZIP: 16335 CENTERBURG RD, CENTERBURG, OH 43011

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	4	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	UV687386	MTV 331.17	■	Right Of Way When Turning Left	MVP42012500000586

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
4			1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
2	RAINS, WES D	10/31/1971	53	M

ADDRESS: STREET, CITY, STATE, ZIP: 10722 BLUE RD, MT VERNON, OH 43050

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	4	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	RL077724		☐		

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
			1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
			☐		

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

INJURIES
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

SAFETY EQUIPMENT
1 - NONE USED
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

SEATING POSITION
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)
2 - FRONT - MIDDLE
3 - FRONT - RIGHT SIDE
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)
5 - SECOND - MIDDLE
6 - SECOND - RIGHT SIDE
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)
8 - THIRD - MIDDLE
9 - THIRD - RIGHT
10 - SLEEPER SECTION OF TRUCK CAB
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)
12 - PASSENGER IN UNENCLOSED CARGO AREA
13 - TRAILING UNIT
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)
15 - NON-MOTORIST
99 - OTHER / UNKNOWN

AIR BAG
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
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

OL CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/C MOPED ONLY
6 - NO VALID OL

OL ENDORSEMENT
H - HAZMAT
M - MOTORCYCLE
P - PASSENGER
N - TANKER
Q - MOTOR SCOOTER
R - THREE-WHEEL MOTORCYCLE
S - SCHOOL BUS
T - DOUBLE & TRIPLE TRAILERS
X - TANKER / HAZMAT

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

OL RESTRICTION(S)
1 - ALCOHOL INTERLOCK DEVICE
2 - CDL INTRASTATE ONLY
3 - CORRECTIVE LENSES
4 - FARM WAIVER
5 - EXCEPT CLASS A BUS
6 - EXCEPT CLASS A & CLASS B BUS
7 - EXCEPT TRACTOR-TRAILER
8 - INTERMEDIATE LICENSE RESTRICTIONS
9 - LEARNER'S PERMIT RESTRICTIONS
10 - LIMITED TO DAYLIGHT ONLY
11 - LIMITED TO EMPLOYMENT
12 - LIMITED - OTHER
13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)
14 - MILITARY VEHICLES ONLY
15 - MOTOR VEHICLES WITHOUT AIR BRAKES
16 - OUTSIDE MIRROR
17 - PROSTHETIC AID
18 - OTHER

DRIVER DISTRACTION
1 - NOT DISTRACTED
2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)
3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE
4 - TALKING ON HAND-HELD COMMUNICATION DEVICE
5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE
6 - PASSENGER
7 - OTHER DISTRACTION INSIDE THE VEHICLE
8 - OTHER DISTRACTION OUTSIDE THE VEHICLE
9 - OTHER / UNKNOWN

CONDITION
1 - APPARENTLY NORMAL
2 - PHYSICAL IMPAIRMENT
3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)
4 - ILLNESS
5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.
6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL
9 - OTHER / UNKNOWN

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 TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - OTHER

DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

OCCUPANT / WITNESS ADDENDUM

OHIO DEPARTMENT OF PUBLIC SAFETY

LOCAL REPORT NUMBER*: M-P2500604

OCCUPANT

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
2	RAINS, DAWN VERONICA	07/12/1975	49	F

ADDRESS: STREET, CITY, STATE, ZIP: 10722 BLUE RD, MOUNT VERNON, OH 43050

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	3	1	4	1

OCCUPANT

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	BOLTON, JOHN E	06/08/1956	68	M

ADDRESS: STREET, CITY, STATE, ZIP: 976 BEECH ST STE 3, MT VERNON, OH 43050

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				99	☐	11	5	4	1

OCCUPANT

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	OWNBY, WAYNE RAYMOND	09/28/1988	36	M

ADDRESS: STREET, CITY, STATE, ZIP: 194 THE MALL, BEREA, OH 44017

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				3	☐	11	5	4	1

OCCUPANT

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	PETERS, VICTORIA NICOLE	02/28/2000	24	F

ADDRESS: STREET, CITY, STATE, ZIP: 1551 REMSEN RD, MEDINA, OH 44256

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	3	1	4	1

INJURY
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

SAFETY EQUIPMENT USED
1 - NONE USED - VEHICLE OCCUPANT
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

SEATING POSITION
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)
2 - FRONT - MIDDLE
3 - FRONT - RIGHT SIDE
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)
5 - SECOND - MIDDLE
6 - SECOND - RIGHT SIDE
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)
8 - THIRD - MIDDLE
9 - THIRD - RIGHT
10 - SLEEPER SECTION OF TRUCK CAB
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)
12 - PASSENGER IN UNENCLOSED CARGO AREA
13 - TRAILING UNIT
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)
15 - NON-MOTORIST
99 - OTHER / UNKNOWN

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
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*: M-P2500608

- [■] PHOTOS TAKEN
- [ ] SECONDARY CRASH
- [ ] OH-2 [ ] OH-3 [ ] OH-1P [ ] OTHER
- [■] PRIVATE PROPERTY

LOCAL INFORMATION

REPORTING AGENCY NAME*: Mt Vernon Police Department

NCIC*: 04201

HIT/SKIP (1 - SOLVED, 2 - UNSOLVED): [ ]

NUMBER OF UNITS: 2

UNIT IN ERROR (98 - ANIMAL, 99 - UNKNOWN): [1]

COUNTY*: 42

LOCALITY* (1 - CITY, 2 - VILLAGE, 3 - TOWNSHIP): [1]

LOCATION: CITY, VILLAGE, TOWNSHIP*: Mount Vernon

CRASH DATE/TIME*: 02/20/2025 16:39

CRASH SEVERITY: [5]
1 - FATAL
2 - SERIOUS INJURY SUSPECTED
3 - MINOR INJURY SUSPECTED
4 - INJURY POSSIBLE
5 - PROPERTY DAMAGE ONLY

LOCATION

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	LOCATION ROAD NAME	ROAD TYPE	LATITUDE
		[ ]	HIAWATHA VILLAGE	ST	40.403080

REFERENCE

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE
		[ ]	1000 BEECH STREET		-82.463512

REFERENCE POINT (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE #): [3]

DIRECTION FROM REFERENCE (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST): [ ]

DISTANCE FROM REFERENCE:

DISTANCE UNIT OF MEASURE (1 - MILES, 2 - FEET, 3 - YARDS): [ ]

ROUTE TYPE: IR - INTERSTATE ROUTE (TP); US - FEDERAL US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE: AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; OV - OVAL; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

INTERSECTION RELATED
- [ ] WITHIN INTERSECTION OR ON APPROACH
- [ ] WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES: [ ]

ROADWAY
- [ ] ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT: [6]
1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFIC WAY; 7 - ON RAMP; 8 - OFF RAMP; 9 - CROSSOVER; 10 - DRIVEWAY/ALLEY ACCESS; 11 - RAILWAY GRADE CROSSING; 12 - SHARED USE PATHS OR TRAILS; 13 - BIKE LANE; 14 - TOLL BOOTH; 99 - OTHER/UNKNOWN

MANNER OF CRASH COLLISION/IMPACT: [5]
1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT; 2 - REAR-END; 3 - HEAD-ON; 4 - REAR-TO-REAR; 5 - BACKING; 6 - ANGLE; 7 - SIDESWIPE, SAME DIRECTION; 8 - SIDESWIPE, OPPOSITE DIRECTION; 9 - OTHER/UNKNOWN

DIRECTION OF TRAVEL (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST): [ ]

MEDIAN TYPE: [ ]
1 - DIVIDED FLUSH MEDIAN (< 4 FEET); 2 - DIVIDED FLUSH MEDIAN (>= 4 FEET); 3 - DIVIDED, DEPRESSED MEDIAN; 4 - DIVIDED, RAISE MEDIAN (ANY TYPE); 9 - OTHER/UNKNOWN

- [ ] WORK ZONE RELATED
- [ ] WORKERS PRESENT
- [ ] LAW ENFORCEMENT PRESENT
- [ ] ACTIVE SCHOOL ZONE

WORK ZONE TYPE: [ ]
1 - LANE CLOSURE; 2 - LANE SHFT/CROSSOVER; 3 - WORK ON SHOULDER OR MEDIAN; 4 - INTERMITTENT OR MOVING WORK; 5 - OTHER

LOCATION OF CRASH IN WORK ZONE: [ ]
1 - BEFORE THE 1ST WORK ZONE WARNING SIGN; 2 - ADVANCE WARNING AREA; 3 - TRANSITION AREA; 4 - ACTIVITY AREA; 5 - TERMINATION AREA

CONTOUR: [1]
1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - OTHER/UNKNOWN

CONDITIONS: [1]
1 - DRY; 2 - WET; 3 - SNOW; 4 - ICE; 5 - SAND, MUD, DIRT, OIL, GRAVEL; 6 - WATER (STANDING, MOVING); 7 - SLUSH; 9 - OTHER/UNKNOWN

SURFACE: [2]
1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 9 - OTHER/UNKNOWN

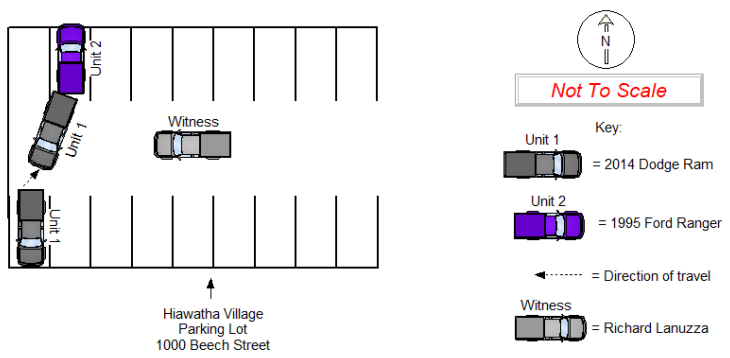
LIGHT CONDITION: [1]
1 - DAYLIGHT; 2 - DAWN/DUSK; 3 - DARK - LIGHTED ROADWAY; 4 - DARK - ROADWAY NOT LIGHTED; 5 - DARK - UNKNOWN ROADWAY LIGHTING; 9 - OTHER/UNKNOWN

WEATHER: [2]
1 - CLEAR; 2 - CLOUDY; 3 - FOG, SMOG, SMOKE; 4 - RAIN; 5 - SLEET, HAIL; 6 - SNOW; 7 - SEVERE CROSSWINDS; 8 - BLOWING SAND, SOIL, DIRT, SNOW; 9 - FREEZING RAIN OR FREEZING DRIZZLE; 99 - OTHER/UNKNOWN

NARRATIVE

Unit 1 was stopped southbound in a parking space in the Hiawatha Village parking lot. Unit 2 was parked northbound in a parking space in the Hiawatha Village parking lot. Unit 1 backed northbound, striking Unit 2 in the left rear corner.

DIAGRAM



CRASH REPORTED DATE/TIME	DISPATCH DATE/TIME	ARRIVAL DATE/TIME	SCENE CLEARED DATE/TIME
02/20/2025 16:39	02/20/2025 16:40	02/20/2025 16:45	02/20/2025 17:17

REPORT TAKEN BY
- [■] POLICE AGENCY
- [ ] MOTORIST
- [ ] SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	CHECKED BY OFFICER'S NAME*
0	60	97	Trowbridge, Justin	Butler, Jessica

OFFICER'S BADGE NUMBER*: 292-23

CHECKED BY OFFICER'S BADGE NUMBER*: 292-21

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500608

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
1	HUBBELL, DAWN MARIA	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
66 ZENT AVE, FREDERICKTOWN, OH 43019

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | COMMERICAL CARRIER PHONE: INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
TN	536BMWL	1C6RR6GT6ES264701	2014	Ram

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	ERIE INSURANCE COMPANY	Q122715765	Gray	1500-10

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

OCCUPANTS: 1

VEHICLE WEIGHT GVWR/GCWR: ☐ 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD | CLASS # | PLACARD ID #

UNIT TYPE: 4
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/ SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

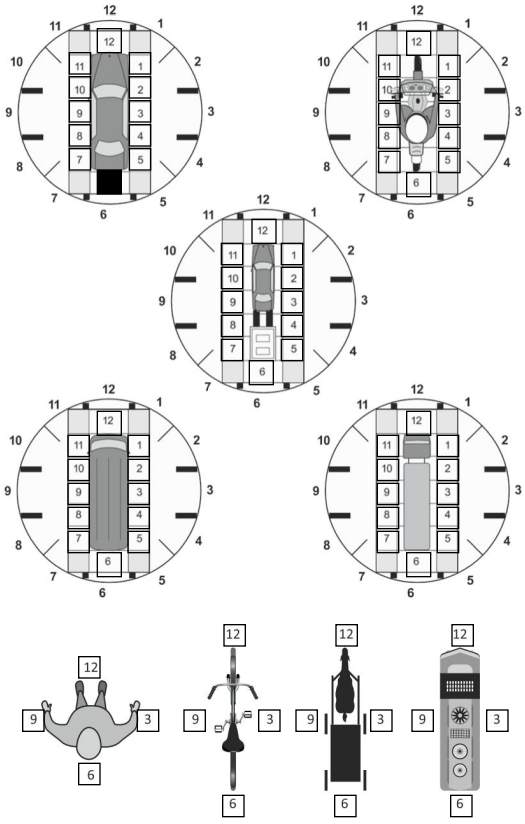
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT: 6
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 2
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 12
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	21
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

OF THROUGH LANES ON ROAD: 2

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

UNIT / NON-MOTORIST DIRECTION: FROM 2 TO 1
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

UNIT SPEED:

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

POSTED SPEED: 15

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*
M-P2500608

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
2	BALLENGEE, SANDRA L	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER)
982 BEECH ST APT 3, MOUNT VERNON, OH 43050

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP — **COMMERICAL CARRIER PHONE:** INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	JHC5359	1FTCR14U0STA58665	1995	Ford

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	SONNENBERG MUTUAL INSURANCE	SSV34026558052	Purple	

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ **INTERLOCK DEVICE EQUIPPED** ☐ **HIT/SKIP UNIT**

 # OCCUPANTS:

VEHICLE WEIGHT GVWR/GCWR: 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — **CLASS #** — **PLACARD ID #**

UNIT TYPE: 4
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/ SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

 # OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

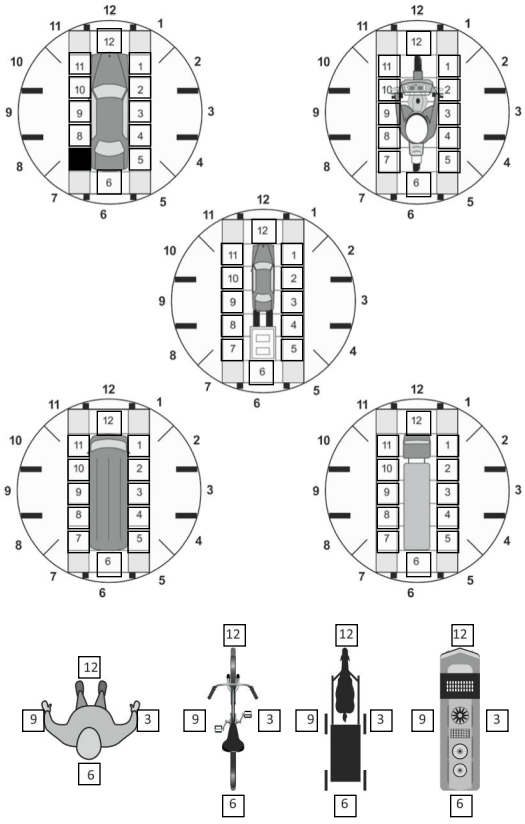
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 10
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 7
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 1
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 **MOST HARMFUL EVENT:** 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

 # OF THROUGH LANES ON ROAD: 2

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

UNIT / NON-MOTORIST DIRECTION: FROM 2 TO 1
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

UNIT SPEED: 0

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

POSTED SPEED: 15

OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*: M-P2500608

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	HUBBELL, DAWN MARIA	05/17/1964	60	F

ADDRESS: STREET, CITY, STATE, ZIP: 66 ZENT AVE, FREDERICKTOWN, OH 43019

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				99	☐	1	1	4	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	RN295777	MTV 331.34	■	Failure To Control/Weaving Course	MVP42012500000320

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
4			1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	6	5	3	.	5	3	

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

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			☐		

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
			☐		

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

INJURIES
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

SAFETY EQUIPMENT
1 - NONE USED
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

SEATING POSITION
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)
2 - FRONT - MIDDLE
3 - FRONT - RIGHT SIDE
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)
5 - SECOND - MIDDLE
6 - SECOND - RIGHT SIDE
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)
8 - THIRD - MIDDLE
9 - THIRD - RIGHT
10 - SLEEPER SECTION OF TRUCK CAB
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)
12 - PASSENGER IN UNENCLOSED CARGO AREA
13 - TRAILING UNIT
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)
15 - NON-MOTORIST
99 - OTHER / UNKNOWN

AIR BAG
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
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

OL CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/C MOPED ONLY
6 - NO VALID OL

OL ENDORSEMENT
H - HAZMAT
M - MOTORCYCLE
P - PASSENGER
N - TANKER
Q - MOTOR SCOOTER
R - THREE-WHEEL MOTORCYCLE
S - SCHOOL BUS
T - DOUBLE & TRIPLE TRAILERS
X - TANKER / HAZMAT

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

OL RESTRICTION(S)
1 - ALCOHOL INTERLOCK DEVICE
2 - CDL INTRASTATE ONLY
3 - CORRECTIVE LENSES
4 - FARM WAIVER
5 - EXCEPT CLASS A BUS
6 - EXCEPT CLASS A & CLASS B BUS
7 - EXCEPT TRACTOR-TRAILER
8 - INTERMEDIATE LICENSE RESTRICTIONS
9 - LEARNER'S PERMIT RESTRICTIONS
10 - LIMITED TO DAYLIGHT ONLY
11 - LIMITED TO EMPLOYMENT
12 - LIMITED - OTHER
13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)
14 - MILITARY VEHICLES ONLY
15 - MOTOR VEHICLES WITHOUT AIR BRAKES
16 - OUTSIDE MIRROR
17 - PROSTHETIC AID
18 - OTHER

DRIVER DISTRACTION
1 - NOT DISTRACTED
2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)
3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE
4 - TALKING ON HAND-HELD COMMUNICATION DEVICE
5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE
6 - PASSENGER
7 - OTHER DISTRACTION INSIDE THE VEHICLE
8 - OTHER DISTRACTION OUTSIDE THE VEHICLE
9 - OTHER / UNKNOWN

CONDITION
1 - APPARENTLY NORMAL
2 - PHYSICAL IMPAIRMENT
3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)
4 - ILLNESS
5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.
6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL
9 - OTHER / UNKNOWN

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 TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - OTHER

DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

OHIO DEPARTMENT OF PUBLIC SAFETY

OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER*: M-P2500608

OCCUPANT

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

ADDRESS: STREET, CITY, STATE, ZIP

CONTACT PHONE - INCLUDE AREA CODE

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED

OCCUPANT

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OCCUPANT

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OCCUPANT

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INJURED TAKEN BY
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2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

SAFETY EQUIPMENT USED
1 - NONE USED - VEHICLE OCCUPANT
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
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4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
LANUZZA, RICHARD JAMES	07/25/1974	50	M

ADDRESS: STREET, CITY, STATE, ZIP: 4 DELAWARE DR, FREDERICKTOWN, OH 43019

CONTACT PHONE - INCLUDE AREA CODE

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP

CONTACT PHONE - INCLUDE AREA CODE

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP

CONTACT PHONE - INCLUDE AREA CODE

OHIO DEPARTMENT OF PUBLIC SAFETY — TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*: M-P2500610

- [x] PHOTOS TAKEN
- [ ] SECONDARY CRASH
- [ ] OH-2 [ ] OH-3 [ ] OH-1P [ ] OTHER [ ] PRIVATE PROPERTY

LOCAL INFORMATION

REPORTING AGENCY NAME*: Mt Vernon Police Department

NCIC*: 04201

HIT/SKIP (1 - SOLVED, 2 - UNSOLVED): 1

NUMBER OF UNITS: 1

UNIT IN ERROR (98 - ANIMAL, 99 - UNKNOWN): 1

COUNTY*: 42

LOCALITY* (1 - CITY, 2 - VILLAGE, 3 - TOWNSHIP): 1

LOCATION: CITY, VILLAGE, TOWNSHIP*: Mount Vernon

CRASH DATE/TIME*: 02/20/2025 19:00

CRASH SEVERITY (1 - FATAL, 2 - SERIOUS INJURY SUSPECTED, 3 - MINOR INJURY SUSPECTED, 4 - INJURY POSSIBLE, 5 - PROPERTY DAMAGE ONLY): 5

LOCATION

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	LOCATION ROAD NAME	ROAD TYPE	LATITUDE
			Sychar Road	RD	40.404335

REFERENCE

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE
			Beech Street	ST	-82.469671

REFERENCE POINT (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE #): 1

DIRECTION FROM REFERENCE (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST):

DISTANCE FROM REFERENCE:

DISTANCE UNIT OF MEASURE (1 - MILES, 2 - FEET, 3 - YARDS):

ROUTE TYPE: IR - INTERSTATE ROUTE (TP); US - FEDERAL US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE: AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; OV - OVAL; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

INTERSECTION RELATED

- [ ] WITHIN INTERSECTION OR ON APPROACH
- [ ] WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES:

ROADWAY

- [ ] ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT: 4

1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFIC WAY; 7 - ON RAMP; 8 - OFF RAMP; 9 - CROSSOVER; 10 - DRIVEWAY/ALLEY ACCESS; 11 - RAILWAY GRADE CROSSING; 12 - SHARED USE PATHS OR TRAILS; 13 - BIKE LANE; 14 - TOLL BOOTH; 99 - OTHER/UNKNOWN

MANNER OF CRASH COLLISION/IMPACT: 1

1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT; 2 - REAR-END; 3 - HEAD-ON; 4 - REAR-TO-REAR; 5 - BACKING; 6 - ANGLE; 7 - SIDESWIPE, SAME DIRECTION; 8 - SIDESWIPE, OPPOSITE DIRECTION; 9 - OTHER/UNKNOWN

DIRECTION OF TRAVEL (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST):

MEDIAN TYPE: 1 - DIVIDED FLUSH MEDIAN (< 4 FEET); 2 - DIVIDED FLUSH MEDIAN (>= 4 FEET); 3 - DIVIDED, DEPRESSED MEDIAN; 4 - DIVIDED, RAISE MEDIAN (ANY TYPE); 9 - OTHER/UNKNOWN

- [ ] WORK ZONE RELATED
- [ ] WORKERS PRESENT
- [ ] LAW ENFORCEMENT PRESENT
- [ ] ACTIVE SCHOOL ZONE

WORK ZONE TYPE: 1 - LANE CLOSURE; 2 - LANE SHFT/CROSSOVER; 3 - WORK ON SHOULDER OR MEDIAN; 4 - INTERMITTENT OR MOVING WORK; 5 - OTHER

LOCATION OF CRASH IN WORK ZONE: 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN; 2 - ADVANCE WARNING AREA; 3 - TRANSITION AREA; 4 - ACTIVITY AREA; 5 - TERMINATION AREA

CONTOUR: 1

1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - OTHER/UNKNOWN

CONDITIONS: 2

1 - DRY; 2 - WET; 3 - SNOW; 4 - ICE; 5 - SAND, MUD, DIRT, OIL, GRAVEL; 6 - WATER (STANDING, MOVING); 7 - SLUSH; 9 - OTHER/UNKNOWN

SURFACE: 2

1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 9 - OTHER/UNKNOWN

LIGHT CONDITION: 3

1 - DAYLIGHT; 2 - DAWN/DUSK; 3 - DARK - LIGHTED ROADWAY; 4 - DARK - ROADWAY NOT LIGHTED; 5 - DARK - UNKNOWN ROADWAY LIGHTING; 9 - OTHER/UNKNOWN

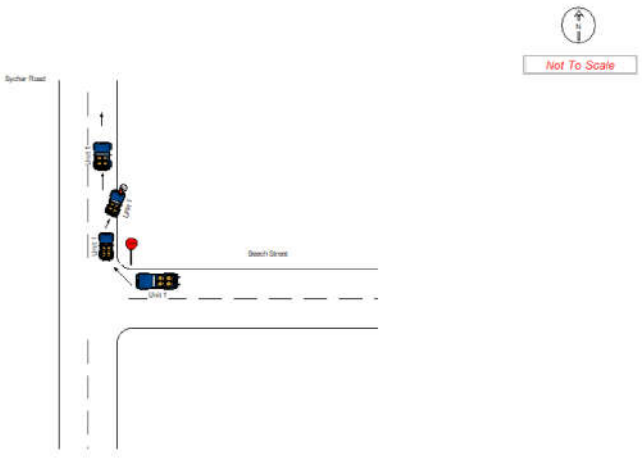
WEATHER: 6

1 - CLEAR; 2 - CLOUDY; 3 - FOG, SMOG, SMOKE; 4 - RAIN; 5 - SLEET, HAIL; 6 - SNOW; 7 - SEVERE CROSSWINDS; 8 - BLOWING SAND, SOIL, DIRT, SNOW; 9 - FREEZING RAIN OR FREEZING DRIZZLE; 99 - OTHER/UNKNOWN

NARRATIVE

Unit 1 was traveling westbound on Beech Street. Unit 1 turned right onto Sychar Road traveling northbound striking a telephone pole on Sychar Road.

DIAGRAM



CRASH REPORTED DATE/TIME	DISPATCH DATE/TIME	ARRIVAL DATE/TIME	SCENE CLEARED DATE/TIME
02/20/2025 19:00	02/20/2025 19:00	02/20/2025 19:15	02/20/2025 19:28

REPORT TAKEN BY

- [x] POLICE AGENCY
- [ ] MOTORIST
- [ ] SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	CHECKED BY OFFICER'S NAME*
0	0	28	Brookover, Hunter	

OFFICER'S BADGE NUMBER*: 292-3

CHECKED BY OFFICER'S BADGE NUMBER*:

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500610

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (☐ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ☐ SAME AS DRIVER
1	HESSEL, CHARLES WILLIAM	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (☐ SAME AS DRIVER): 18 N MULBERRY ST, FREDERICKTOWN, OH 43019

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | **COMMERICAL CARRIER PHONE:** INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	JSQ6041	1C6HJTAG3ML515888	2021	Jeep

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	USAA	GIC 057678015 7101	Blue	

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ **INTERLOCK DEVICE EQUIPPED** ■ **HIT/SKIP UNIT**

 # OCCUPANTS: 2

VEHICLE WEIGHT GVWR/GCWR: ☐ (1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.)

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD | CLASS # | PLACARD ID #

UNIT TYPE: 1
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

 # OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED?: 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

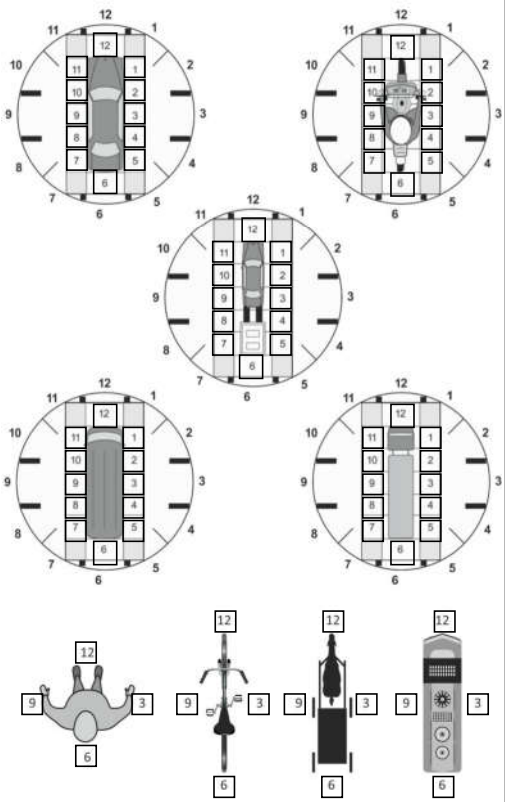
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14]
☐ - TOP [13] ☐ - ALL AREAS [15]
■ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT: ☐
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 1
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 1
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 11
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

 # OF THROUGH LANES ON ROAD: 2

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

UNIT / NON-MOTORIST DIRECTION: FROM 2 TO 1
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

SEQUENCE OF EVENTS

1	8
2	41
3	
4	
5	
6	

EVENTS

1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK

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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 **MOST HARMFUL EVENT**: 2

UNIT SPEED: 4

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

POSTED SPEED: 25

OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*: M-P2500610

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	BRIGGS, HANNAH MARIA	01/24/2007	18	F

ADDRESS: STREET, CITY, STATE, ZIP: 18 N MULBERRY ST, FREDERICKTOWN, OH 43019

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	VW976536	MTV 331.34	■	Failure To Control/Weaving Course	M-25-0610

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
4			1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

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OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

MOTORIST / NON-MOTORIST

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER

OL CLASS	ENDORSEMENT (SELECT UP TO 2)	RESTRICTION (SELECT UP TO 3)	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT (SELECT UP TO 4)
				☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG				.			

INJURIES
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

SAFETY EQUIPMENT
1 - NONE USED
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

SEATING POSITION
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)
2 - FRONT - MIDDLE
3 - FRONT - RIGHT SIDE
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)
5 - SECOND - MIDDLE
6 - SECOND - RIGHT SIDE
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)
8 - THIRD - MIDDLE
9 - THIRD - RIGHT
10 - SLEEPER SECTION OF TRUCK CAB
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)
12 - PASSENGER IN UNENCLOSED CARGO AREA
13 - TRAILING UNIT
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)
15 - NON-MOTORIST
99 - OTHER / UNKNOWN

AIR BAG
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
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

OL CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/C MOPED ONLY
6 - NO VALID OL

OL ENDORSEMENT
H - HAZMAT
M - MOTORCYCLE
P - PASSENGER
N - TANKER
Q - MOTOR SCOOTER
R - THREE-WHEEL MOTORCYCLE
S - SCHOOL BUS
T - DOUBLE & TRIPLE TRAILERS
X - TANKER / HAZMAT

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

OL RESTRICTION(S)
1 - ALCOHOL INTERLOCK DEVICE
2 - CDL INTRASTATE ONLY
3 - CORRECTIVE LENSES
4 - FARM WAIVER
5 - EXCEPT CLASS A BUS
6 - EXCEPT CLASS A & CLASS B BUS
7 - EXCEPT TRACTOR-TRAILER
8 - INTERMEDIATE LICENSE RESTRICTIONS
9 - LEARNER'S PERMIT RESTRICTIONS
10 - LIMITED TO DAYLIGHT ONLY
11 - LIMITED TO EMPLOYMENT
12 - LIMITED - OTHER
13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)
14 - MILITARY VEHICLES ONLY
15 - MOTOR VEHICLES WITHOUT AIR BRAKES
16 - OUTSIDE MIRROR
17 - PROSTHETIC AID
18 - OTHER

DRIVER DISTRACTION
1 - NOT DISTRACTED
2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)
3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE
4 - TALKING ON HAND-HELD COMMUNICATION DEVICE
5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE
6 - PASSENGER
7 - OTHER DISTRACTION INSIDE THE VEHICLE
8 - OTHER DISTRACTION OUTSIDE THE VEHICLE
9 - OTHER / UNKNOWN

CONDITION
1 - APPARENTLY NORMAL
2 - PHYSICAL IMPAIRMENT
3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)
4 - ILLNESS
5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.
6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL
9 - OTHER / UNKNOWN

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 TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - OTHER

DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

OHIO DEPARTMENT OF PUBLIC SAFETY — OCCUPANT / WITNESS ADDENDUM

LOCAL REPORT NUMBER*: M-P2500610

OCCUPANT

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	HESSEL, CHARLES WILLIAM	02/18/1971	54	M

ADDRESS: STREET, CITY, STATE, ZIP: 18 N MULBERRY ST, FREDERICKTOWN, OH 43019

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	3	1	1	1

OCCUPANT

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

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					☐				

OCCUPANT

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INJURY
1 - FATAL
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5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

SAFETY EQUIPMENT USED
1 - NONE USED - VEHICLE OCCUPANT
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
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3 - TOTALLY EJECTED
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

OHIO DEPARTMENT OF PUBLIC SAFETY

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

LOCAL REPORT NUMBER*: M-P2500631

- [x] PHOTOS TAKEN
- [ ] SECONDARY CRASH
- [ ] OH-2
- [x] OH-3
- [ ] OH-1P
- [ ] OTHER
- [ ] PRIVATE PROPERTY

LOCAL INFORMATION

REPORTING AGENCY NAME*: Mt Vernon Police Department

NCIC*: 04201

HIT/SKIP (1 - SOLVED, 2 - UNSOLVED):

NUMBER OF UNITS: 3

UNIT IN ERROR (98 - ANIMAL, 99 - UNKNOWN): 1

COUNTY*: 42

LOCALITY* (1 - CITY, 2 - VILLAGE, 3 - TOWNSHIP): 1

LOCATION: CITY, VILLAGE, TOWNSHIP*: Mount Vernon

CRASH DATE/TIME*: 02/22/2025 14:45

CRASH SEVERITY: 5
1 - FATAL
2 - SERIOUS INJURY SUSPECTED
3 - MINOR INJURY SUSPECTED
4 - INJURY POSSIBLE
5 - PROPERTY DAMAGE ONLY

LOCATION

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	LOCATION ROAD NAME	ROAD TYPE	LATITUDE
			COSHOCTON AVENUE	AV	40.399246

REFERENCE

ROUTE TYPE	ROUTE NUMBER	PREFIX (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST)	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE
			VERNEDALE DRIVE	DR	-82.459584

REFERENCE POINT (1 - INTERSECTION, 2 - MILE POST, 3 - HOUSE #): 1

DIRECTION FROM REFERENCE (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST):

DISTANCE FROM REFERENCE:

DISTANCE UNIT OF MEASURE (1 - MILES, 2 - FEET, 3 - YARDS):

ROUTE TYPE: IR - INTERSTATE ROUTE (TP); US - FEDERAL US ROUTE; SR - STATE ROUTE; CR - NUMBERED COUNTY ROUTE; TR - NUMBERED TOWNSHIP ROUTE

ROAD TYPE: AL - ALLEY; AV - AVENUE; BL - BOULEVARD; CR - CIRCLE; CT - COURT; DR - DRIVE; HE - HEIGHTS; HW - HIGHWAY; LA - LANE; MP - MILEPOST; OV - OVAL; PK - PARKWAY; PI - PIKE; PL - PLACE; RD - ROAD; SQ - SQUARE; ST - STREET; TE - TERRACE; TL - TRAIL; WA - WAY

INTERSECTION RELATED

- [x] WITHIN INTERSECTION OR ON APPROACH
- [ ] WITHIN INTERCHANGE AREA

NUMBER OF APPROACHES: 4

ROADWAY

- [ ] ROADWAY DIVIDED

LOCATION OF FIRST HARMFUL EVENT: 1

1 - ON ROADWAY; 2 - ON SHOULDER; 3 - IN MEDIAN; 4 - ON ROADSIDE; 5 - ON GORE; 6 - OUTSIDE TRAFFIC WAY; 7 - ON RAMP; 8 - OFF RAMP; 9 - CROSSOVER; 10 - DRIVEWAY/ALLEY ACCESS; 11 - RAILWAY GRADE CROSSING; 12 - SHARED USE PATHS OR TRAILS; 13 - BIKE LANE; 14 - TOLL BOOTH; 99 - OTHER/UNKNOWN

MANNER OF CRASH COLLISION/IMPACT: 6

1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT; 2 - REAR-END; 3 - HEAD-ON; 4 - REAR-TO-REAR; 5 - BACKING; 6 - ANGLE; 7 - SIDESWIPE, SAME DIRECTION; 8 - SIDESWIPE, OPPOSITE DIRECTION; 9 - OTHER/UNKNOWN

DIRECTION OF TRAVEL (1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST):

MEDIAN TYPE: 1 - DIVIDED FLUSH MEDIAN (< 4 FEET); 2 - DIVIDED FLUSH MEDIAN (>= 4 FEET); 3 - DIVIDED, DEPRESSED MEDIAN; 4 - DIVIDED, RAISE MEDIAN (ANY TYPE); 9 - OTHER/UNKNOWN

- [ ] WORK ZONE RELATED
- [ ] WORKERS PRESENT
- [ ] LAW ENFORCEMENT PRESENT
- [ ] ACTIVE SCHOOL ZONE

WORK ZONE TYPE: 1 - LANE CLOSURE; 2 - LANE SHFT/CROSSOVER; 3 - WORK ON SHOULDER OR MEDIAN; 4 - INTERMITTENT OR MOVING WORK; 5 - OTHER

LOCATION OF CRASH IN WORK ZONE: 1 - BEFORE THE 1ST WORK ZONE WARNING SIGN; 2 - ADVANCE WARNING AREA; 3 - TRANSITION AREA; 4 - ACTIVITY AREA; 5 - TERMINATION AREA

CONTOUR: 1

1 - STRAIGHT LEVEL; 2 - STRAIGHT GRADE; 3 - CURVE LEVEL; 4 - CURVE GRADE; 9 - OTHER/UNKNOWN

CONDITIONS: 1

1 - DRY; 2 - WET; 3 - SNOW; 4 - ICE; 5 - SAND, MUD, DIRT, OIL, GRAVEL; 6 - WATER (STANDING, MOVING); 7 - SLUSH; 9 - OTHER/UNKNOWN

SURFACE: 2

1 - CONCRETE; 2 - BLACKTOP, BITUMINOUS, ASPHALT; 3 - BRICK/BLOCK; 4 - SLAG, GRAVEL, STONE; 5 - DIRT; 9 - OTHER/UNKNOWN

LIGHT CONDITION: 1

1 - DAYLIGHT; 2 - DAWN/DUSK; 3 - DARK - LIGHTED ROADWAY; 4 - DARK - ROADWAY NOT LIGHTED; 5 - DARK - UNKNOWN ROADWAY LIGHTING; 9 - OTHER/UNKNOWN

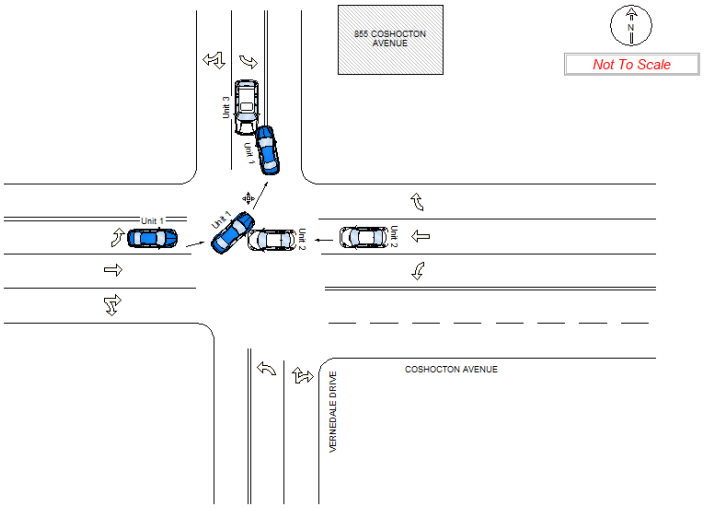
WEATHER: 2

1 - CLEAR; 2 - CLOUDY; 3 - FOG, SMOG, SMOKE; 4 - RAIN; 5 - SLEET, HAIL; 6 - SNOW; 7 - SEVERE CROSSWINDS; 8 - BLOWING SAND, SOIL, DIRT, SNOW; 9 - FREEZING RAIN OR FREEZING DRIZZLE; 99 - OTHER/UNKNOWN

NARRATIVE

Unit 1 was traveling east bound on Coshocton Avenue at Vernedale Drive. Unit 1 attempted to make a left turn at the intersection, and struck unit 2 that was traveling straight west bound on Coshocton Avenue. Unit 3 was stationary exiting private property when it was struck by unit 1 from the force of the original impact.

DIAGRAM



CRASH REPORTED DATE/TIME	DISPATCH DATE/TIME	ARRIVAL DATE/TIME	SCENE CLEARED DATE/TIME
02/22/2025 14:45	02/22/2025 14:46	02/22/2025 14:50	02/22/2025 15:42

REPORT TAKEN BY

- [x] POLICE AGENCY
- [ ] MOTORIST
- [ ] SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)

TOTAL TIME ROADWAY CLOSED	OTHER INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	CHECKED BY OFFICER'S NAME*
0	0	56	Sims, Paige	

OFFICER'S BADGE NUMBER*: 292-26

CHECKED BY OFFICER'S BADGE NUMBER*:

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500631

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (■ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ■ SAME AS DRIVER
1	DELARWELLE, FAITH LORAIN ALIZE	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (■ SAME AS DRIVER)
603 W BURGESS ST, MOUNT VERNON, OH 43020

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | COMMERICAL CARRIER PHONE: INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	JLT7172	19XFC1F30HE011415	2017	Honda

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	PROGRESSIVE	973617977	Blue, Dark	Civic

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME: MORRIS TOWING

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

OCCUPANTS: 2

VEHICLE WEIGHT GVWR/GCWR: ☐ 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD | CLASS # | PLACARD ID #

UNIT TYPE: 1
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/ SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

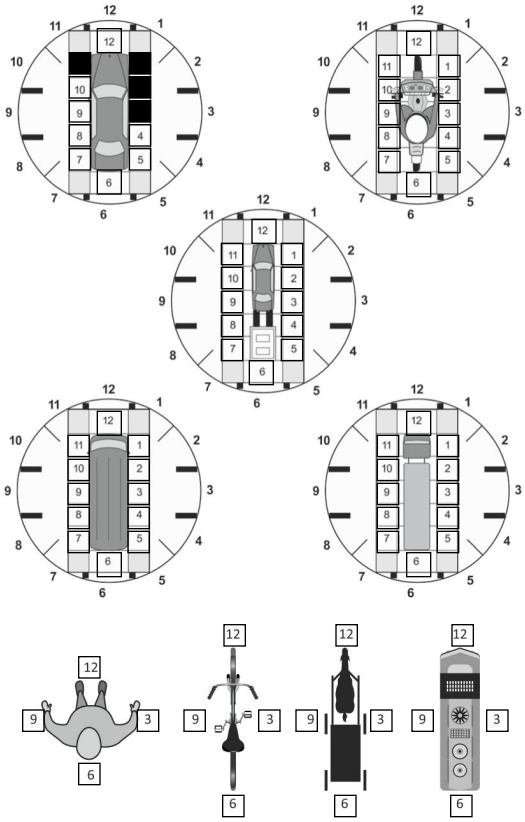
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 6
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 3
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 2
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS: 1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK: 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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

OF THROUGH LANES ON ROAD: 4

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

UNIT / NON-MOTORIST DIRECTION: FROM 4 TO 1
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

UNIT SPEED: 0

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

POSTED SPEED:

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500631

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (■ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ■ SAME AS DRIVER
2	KINSEY, TARA ELIZABETH	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (■ SAME AS DRIVER): 9344 FAIRVIEW RD, MOUNT VERNON, OH 43050

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | COMMERICAL CARRIER PHONE: INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	KNN1673	WMWLV7C04P2T17651	2023	Mini Cooper

■ INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
	SONNENBERG MUTUAL INSURANCE	SSV3402180873-5	White	

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

OCCUPANTS: 2

VEHICLE WEIGHT GVWR/GCWR: ☐ 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — CLASS # — PLACARD ID #

UNIT TYPE: 1
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/ SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED? 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

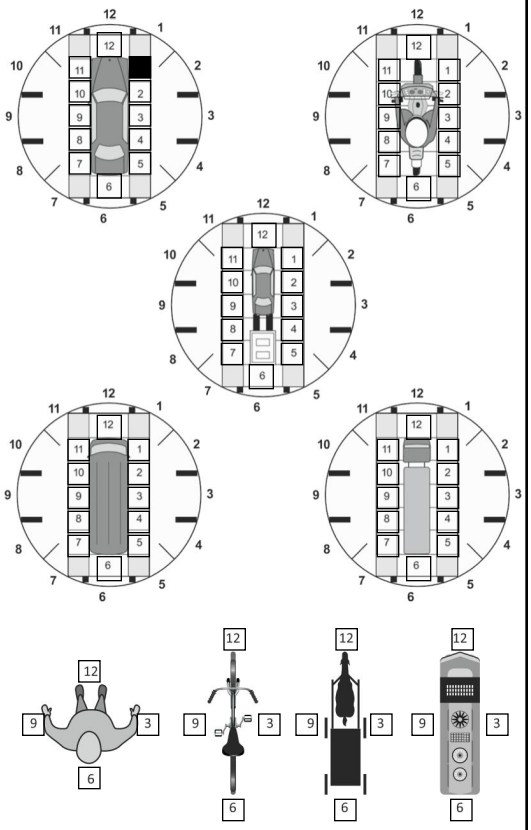
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

INITIAL POINT OF CONTACT: 1
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 1
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 1
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 MOST HARMFUL EVENT: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

OF THROUGH LANES ON ROAD: 4

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

UNIT / NON-MOTORIST DIRECTION: FROM 3 TO 4
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

UNIT SPEED: 0

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

POSTED SPEED:

OHIO DEPARTMENT OF PUBLIC SAFETY

UNIT

LOCAL REPORT NUMBER*: M-P2500631

OWNER

UNIT #	OWNER NAME: LAST, FIRST, MIDDLE (■ SAME AS DRIVER)	OWNER PHONE: INCLUDE AREA CODE ■ SAME AS DRIVER
3	MARLOT, MICHAEL D	

OWNER ADDRESS: STREET, CITY, STATE, ZIP (■ SAME AS DRIVER)
2557 TOWNSHIP ROAD 181, FREDERICKTOWN, OH 43019

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP | **COMMERICAL CARRIER PHONE:** INCLUDE AREA CODE

VEHICLE

LP STATE	LICENSE PLATE #	VEHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE
OH	FRC9415	KM8J23A40HU544693	2017	Hyundai

INSURANCE VERIFIED	INSURANCE COMPANY	INSURANCE POLICY #	COLOR	VEHICLE MODEL
■	GRANGE INSURANCE	1368973	White	Tucson

TYPE OF USE: ☐ COMMERCIAL ☐ GOVERNMENT ☐ IN EMERGENCY RESPONSE

US DOT #:

TOWED BY: COMPANY NAME

☐ INTERLOCK DEVICE EQUIPPED ☐ HIT/SKIP UNIT

 # OCCUPANTS: 2

VEHICLE WEIGHT GVWR/GCWR: ☐ 1 - <= 10K LBS. 2 - 10,001 - 26K LBS. 3 - >= 26K LBS.

HAZARDOUS MATERIAL: ☐ MATERIAL RELEASED ☐ PLACARD — CLASS # — PLACARD ID #

UNIT TYPE: 3
1 - PASSENGER CAR, 2 - PASSENGER VAN (MINIVAN), 3 - SPORT UTILITY VEHICLE, 4 - PICK UP, 5 - CARGO VAN, 7 - MOTORCYCLE 2-WHEELED, 8 - MOTORCYCLE 3-WHEELED, 9 - AUTOCYCLE, 10 - MOPED OR MOTORIZED BICYCLE, 11 - ALL TERRAIN VEHICLE (ATV/UTV), 12 - GOLF CART, 13 - SNOWMOBILE, 14 - SINGLE UNIT TRUCK, 15 - SEMI-TRACTOR, 16 - FARM EQUIPMENT, 17 - MOTORHOME, 18 - LIMO (LIVERY VEHICLE), 19 - BUS (16+ PASSENGERS), 20 - OTHER VEHICLE, 21 - HEAVY EQUIPMENT, 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE, 23 - PEDESTRIAN/SKATER, 24 - WHEELCHAIR (ANY TYPE), 25 - OTHER NON-MOTORIST, 26 - BICYCLE, 27 - TRAIN, 99 - UNKNOWN OR HIT/SKIP

 # OF TRAILING UNITS: 0

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURED?: 2 (1 - YES 2 - NO 9 - OTHER/UNKNOWN)

AUTONOMOUS MODE LEVEL: 0
0 - NO AUTOMATION, 1 - DRIVER ASSISTANCE, 2 - PARTIAL AUTOMATION, 3 - CONDITIONAL AUTOMATION, 4 - HIGH AUTOMATION, 5 - FULL AUTOMATION, 9 - UNKNOWN

SPECIAL FUNCTION: 1
1 - NONE, 2 - TAXI, 3 - ELECTRONIC RIDE SHARING, 4 - SCHOOL TRANSPORT, 5 - BUS - TRANSIT /COMMUTER, 6 - BUS - CHARTER/TOUR, 7 - BUS - INTERCITY, 8 - BUS - SHUTTLE, 9 - BUS - OTHER, 10 - AMBULANCE, 11 - FIRE, 12 - MILITARY, 13 - POLICE, 14 - PUBLIC UTILITY, 15 - CONSTRUCTION EQUIPMENT, 16 - FARM, 17 - MOWING, 18 - SNOW REMOVAL, 19 - TOWING, 20 - SAFETY SERVICE PATROL, 21 - MAIL CARRIER, 99 - OTHER/UNKNOWN

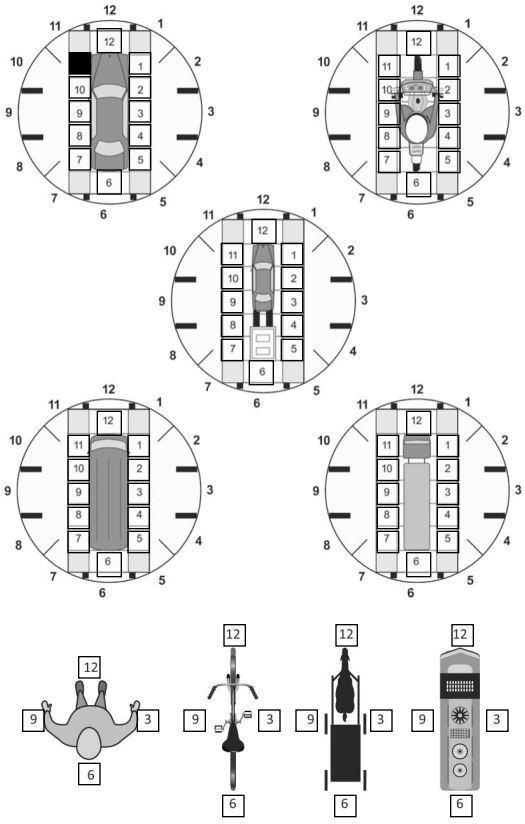
CARGO BODY TYPE: 1
1 - NO CARGO BODY TYPE / NOT APPLICABLE, 2 - BUS, 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE, 4 - LOGGING, 5 - INTERMODAL CONTAINER CHASSIS, 6 - CARGO VAN/ ENCLOSED BOX, 7 - GRAIN/CHIPS/GRAVEL, 8 - POLE, 9 - CARGO TANK, 10 - FLAT BED, 11 - DUMP, 12 - CONCRETE MIXER, 13 - AUTO TRANSPORTER, 14 - GARBAGE/REFUSE, 99 - OTHER/UNKNOWN

VEHICLE DEFECTS:
1 - TURN SIGNALS, 2 - HEAD LAMPS, 3 - TAIL LAMPS, 4 - BRAKES, 5 - STEERING, 6 - TIRE BLOWOUT, 7 - WORN OR SLICK TIRES, 8 - TRAILER EQUIPMENT DEFECTIVE, 9 - MOTOR TROUBLE, 10 - DISABLED FROM PRIOR ACCIDENT, 99 - OTHER/UNKNOWN

DAMAGE

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

DAMAGED AREA(S) — INDICATE ALL THAT APPLY



☐ - NO DAMAGE [0] ☐ - UNDERCARRIAGE [14] ☐ - TOP [13] ☐ - ALL AREAS [15] ☐ - UNIT NOT AT SCENE [16]

EVENT(S)

NON-MOTORIST LOCATION AT IMPACT:
1 - INTERSECTION - MARKED CROSSWALK, 2 - INTERSECTION - UNMARKED CROSSWALK, 3 - INTERSECTION - OTHER, 4 - MIDBLOCK - MARKED CROSSWALK, 5 - TRAVEL LANE - OTHER LOCATION, 6 - BICYCLE LANE, 7 - SHOULDER/ ROADSIDE, 8 - SIDEWALK, 9 - MEDIAN/CROSSING ISLAND, 10 - DRIVEWAY ACCESS, 11 - SHARED USE PATHS OR TRAILS, 12 - FIRST RESPONDER AT INCIDENT SCENE, 99 - OTHER/UNKNOWN

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

PRE-CRASH ACTIONS: 1
1 - STRAIGHT AHEAD, 2 - BACKING, 3 - CHANGING LANES, 4 - OVERTAKING/ PASSING, 5 - MAKING RIGHT TURN, 6 - MAKING LEFT TURN, 7 - MAKING U-TURN, 8 - ENTERING TRAFFIC LANE, 9 - LEAVING TRAFFIC LANE, 10 - PARKED, 11 - SLOWING OR STOPPED IN TRAFFIC, 12 - DRIVERLESS, 13 - NEGOTIATING A CURVE, 14 - ENTERING OR CROSSING SPECIFIED LOCATION, 15 - WALKING, RUNNING, JOGGING, PLAYING, 16 - WORKING, 17 - PUSHING VEHICLE, 18 - APPROACHING OR LEAVING VEHICLE, 19 - STANDING, 20 - OTHER NON-MOTORIST, 21 - STANDING OUTSIDE DISABLED VEHICLE, 99 - OTHER/UNKNOWN

INITIAL POINT OF CONTACT: 11
0 - NO DAMAGE, 1-12 - REFER TO UNIT DIAGRAM, 13 - TOP, 14 - UNDERCARRIAGE, 15 - VEHICLE NOT AT SCENE, 99 - UNKNOWN

CONTRIBUTING CIRCUMSTANCES: 1
1 - NONE, 2 - FAILURE TO YIELD, 3 - RAN RED LIGHT, 4 - RAN STOP SIGN, 5 - UNSAFE SPEED, 6 - IMPROPER TURN, 7 - LEFT OF CENTER, 8 - FOLLOWING TOO CLOSE/ACDA, 9 - IMPROPER LANE CHANGE, 10 - IMPROPER PASSING, 11 - DROVE OFF ROAD, 12 - IMPROPER BACKING, 13 - IMPROPER START FROM A PARKED POSITION, 14 - STOPPED OR PARKED ILLEGALLY, 15 - SWERVING TO AVOID, 16 - WRONG WAY, 17 - VISION OBSTRUCTION, 18 - OPERATING DEFECTIVE EQUIPMENT, 19 - LOAD SHIFTING/ FALLING/SPILLING, 20 - IMPROPER CROSSING, 21 - LYING IN ROADWAY, 22 - NOT DISCERNIBLE, 23 - OPENING DOOR INTO ROADWAY, 99 - OTHER IMPROPER ACTION

SEQUENCE OF EVENTS

1	20
2	
3	
4	
5	
6	

EVENTS
1 - OVERTURN/ ROLLOVER, 2 - FIRE/EXPLOSION, 3 - IMMERSION, 4 - JACKKNIFE, 5 - CARGO/EQUIPMENT LOSS OR SHIFT, 6 - EQUIPMENT FAILURE, 7 - SEPARATION OF UNITS, 8 - RAN OFF ROAD RIGHT, 9 - RAN OFF ROAD LEFT, 10 - CROSS MEDIAN, 11 - CROSS CENTERLINE OPPOSITE DIRECTION OF TRAVEL, 12 - DOWNHILL RUNAWAY, 13 - OTHER NON-COLLISION, 14 - PEDESTRIAN, 15 - PEDALCYCLE, 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 A MOTOR VEHICLE, 24 - OTHER MOVABLE OBJECT

COLLISION WITH FIXED OBJECT - STRUCK
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, 52 - BUILDING, 53 - TUNNEL, 54 - OTHER FIXED OBJECT, 99 - OTHER/UNKNOWN

FIRST HARMFUL EVENT: 1 **MOST HARMFUL EVENT**: 1

TRAFFIC

TRAFFICWAY FLOW: 2 (1 - ONE-WAY, 2 - TWO-WAY)

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

 # OF THROUGH LANES ON ROAD: 4

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

UNIT / NON-MOTORIST DIRECTION: FROM 1 TO 2
1 - NORTH, 2 - SOUTH, 3 - EAST, 4 - WEST, 5 - NORTHEAST, 6 - NORTHWEST, 7 - SOUTHEAST, 8 - SOUTHWEST, 9 - OTHER/UNKNOWN

UNIT SPEED: 0

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

POSTED SPEED:

OHIO DEPARTMENT OF PUBLIC SAFETY — MOTORIST / NON-MOTORIST

LOCAL REPORT NUMBER*: M-P2500631

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	DELARWELLE, FAITH LORAIN ALIZE	06/15/2001	23	F

ADDRESS: STREET, CITY, STATE, ZIP: 603 W BURGESS ST, MOUNT VERNON, OH 43050

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	VA046134	MTV 331.17	☐	Right Of Way When Turning Left	S

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
4	☐ ☐	☐ ☐ ☐	1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	☐ ☐ ☐ ☐

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
2	KINSEY, TARA ELIZABETH	11/29/1970	54	F

ADDRESS: STREET, CITY, STATE, ZIP: 9344 FAIRVIEW RD, MOUNT VERNON, OH 43050

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	RG285683		☐		

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
4	☐ ☐	☐ ☐ ☐	1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	☐ ☐ ☐ ☐

MOTORIST / NON-MOTORIST

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
3	MAROLT, MICHAEL D	03/31/1969	55	M

ADDRESS: STREET, CITY, STATE, ZIP: 2557 TOWNSHIP ROAD 181, FREDERICKTOWN, OH 43019

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	1	1	1	1

OL STATE	OPERATOR LICENSE NUMBER	OFFENSE CHARGED	LOCAL CODE	OFFENSE DESCRIPTION	CITATION NUMBER
OH	RQ700361		☐		

OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTED	CONDITION	ALCOHOL TEST STATUS	ALCOHOL TEST TYPE	ALCOHOL TEST VALUE	DRUG TEST(S) STATUS	DRUG TEST(S) TYPE	DRUG TEST(S) RESULT SELECT UP TO 4
4	☐ ☐	☐ ☐ ☐	1	☐ ALCOHOL ☐ MARIJUANA ☐ OTHER DRUG	1	1	1	.	1	1	☐ ☐ ☐ ☐

INJURIES
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
3 - SUSPECTED MINOR INJURY
4 - POSSIBLE INJURY
5 - NO APPARENT INJURY

INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

SAFETY EQUIPMENT
1 - NONE USED
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
7 - BOOSTER SEAT
8 - HELMET USED
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)
10 - REFLECTIVE CLOTHING
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY
99 - OTHER / UNKNOWN

SEATING POSITION
1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)
2 - FRONT - MIDDLE
3 - FRONT - RIGHT SIDE
4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)
5 - SECOND - MIDDLE
6 - SECOND - RIGHT SIDE
7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)
8 - THIRD - MIDDLE
9 - THIRD - RIGHT
10 - SLEEPER SECTION OF TRUCK CAB
11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)
12 - PASSENGER IN UNENCLOSED CARGO AREA
13 - TRAILING UNIT
14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)
15 - NON-MOTORIST
99 - OTHER / UNKNOWN

AIR BAG
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
4 - NOT APPLICABLE

TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

OL CLASS
1 - CLASS A
2 - CLASS B
3 - CLASS C
4 - REGULAR CLASS (OHIO = D)
5 - M/C MOPED ONLY
6 - NO VALID OL

OL ENDORSEMENT
H - HAZMAT
M - MOTORCYCLE
P - PASSENGER
N - TANKER
Q - MOTOR SCOOTER
R - THREE-WHEEL MOTORCYCLE
S - SCHOOL BUS
T - DOUBLE & TRIPLE TRAILERS
X - TANKER / HAZMAT

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

OL RESTRICTION(S)
1 - ALCOHOL INTERLOCK DEVICE
2 - CDL INTRASTATE ONLY
3 - CORRECTIVE LENSES
4 - FARM WAIVER
5 - EXCEPT CLASS A BUS
6 - EXCEPT CLASS A & CLASS B BUS
7 - EXCEPT TRACTOR-TRAILER
8 - INTERMEDIATE LICENSE RESTRICTIONS
9 - LEARNER'S PERMIT RESTRICTIONS
10 - LIMITED TO DAYLIGHT ONLY
11 - LIMITED TO EMPLOYMENT
12 - LIMITED - OTHER
13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)
14 - MILITARY VEHICLES ONLY
15 - MOTOR VEHICLES WITHOUT AIR BRAKES
16 - OUTSIDE MIRROR
17 - PROSTHETIC AID
18 - OTHER

DRIVER DISTRACTION
1 - NOT DISTRACTED
2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)
3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE
4 - TALKING ON HAND-HELD COMMUNICATION DEVICE
5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE
6 - PASSENGER
7 - OTHER DISTRACTION INSIDE THE VEHICLE
8 - OTHER DISTRACTION OUTSIDE THE VEHICLE
9 - OTHER / UNKNOWN

CONDITION
1 - APPARENTLY NORMAL
2 - PHYSICAL IMPAIRMENT
3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)
4 - ILLNESS
5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.
6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS / ALCOHOL
9 - OTHER / UNKNOWN

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 TYPE
1 - NONE
2 - BLOOD
3 - URINE
4 - OTHER

DRUG TEST RESULT(S)
1 - AMPHETAMINES
2 - BARBITURATES
3 - BENZODIAZEPINES
4 - CANNABINOIDS
5 - COCAINE
6 - OPIATES / OPIOIDS
7 - OTHER
8 - NEGATIVE RESULTS

OCCUPANT / WITNESS ADDENDUM

OHIO DEPARTMENT OF PUBLIC SAFETY

LOCAL REPORT NUMBER*: M-P2500631

OCCUPANT

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
1	PARKER, DWAINE G	02/05/1960	65	M

ADDRESS: STREET, CITY, STATE, ZIP: 603 W BURGESS ST, MT VERNON, OH 43050

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	3	1	1	1

OCCUPANT

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
2	KINSEY, MARILYN SUE	05/22/1943	81	F

ADDRESS: STREET, CITY, STATE, ZIP: 6485 E HARBOR RD LOT 29, MARBLEHEAD, OH 43440

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	3	1	1	1

OCCUPANT

UNIT #	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER
3	MAROLT, TARA MARIE	11/16/1994	30	F

ADDRESS: STREET, CITY, STATE, ZIP: 2557 TOWNSHIP ROAD 181, FREDERICKTOWN, OH 43019

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
5				4	☐	3	1	1	1

OCCUPANT

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

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
					☐				

INJURY
1 - FATAL
2 - SUSPECTED SERIOUS INJURY
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INJURED TAKEN BY
1 - NOT TRANSPORTED / TREATED AT SCENE
2 - EMS
3 - POLICE
9 - OTHER / UNKNOWN

GENDER
F - FEMALE
M - MALE
U - OTHER / UNKNOWN

SAFETY EQUIPMENT USED
1 - NONE USED - VEHICLE OCCUPANT
2 - SHOULDER BELT ONLY USED
3 - LAP BELT ONLY USED
4 - SHOULDER & LAP BELT USED
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING
6 - CHILD RESTRAINT SYSTEM - REAR FACING
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TRAPPED
1 - NOT TRAPPED
2 - EXTRICATED BY MECHANICAL MEANS
3 - FREED BY NON-MECHANICAL MEANS

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE:

WITNESS

NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER

ADDRESS: STREET, CITY, STATE, ZIP:

CONTACT PHONE - INCLUDE AREA CODE: