OF PUBLIC SAFETY TRAFFIC CRASH REPORT **DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER*					
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION								2 0 2 3 3 2 0 3					
SECONDARY CRASH		OTHER	REPORTING AGENC		JTC 0 1	HIT/SKIP 1 - Solved 2 - Unsolved	NI IMRED AE I INITS	10) 1 98 - ANIMAL 1 99 - UNKNOWN	N			
COUNTY* LOC	ALITY*	LOCATION: CITY VI	_	LD HEIGH	ITS LETT	CRASH DA			CRASH SEVERITY				
1 1 8 1 1	1 - CITY LOCATION, CIT, WILLIAGE, LOWISSING P.							3 0 9 2 7		1 - FATAL 2 - SERIOUS INJURY			
ROUTE TYPE	AND THE SAME AND T						I ATITITE DECIM	ii DECDEEC	S 3	SUSPECTED 3 - MINOR INJURY			
3 - FAST				E. 115		4 1 1 4 2	4	SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE					
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH REFE					E ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DECIMAL DEGREES			ONLY			
REFERENCE	3-EAST 4-WEST 5160						8 1 1 6 0	3 6 0 3					
REFERENCE PO			ROLLTE TYPE RSTATE ROUTE (TP)		ROAD TYPE AL - ALLEY HW - HIGHWAY	RD - ROAD	INTERSECTION RELATED WITHIN INTERSECTION OR ON APPROACH						
3 - HOUSE #	3 - SOUTH 3 - EAST 4 - WEST	US - FED SR - STA	ERAL US ROUTE TE ROUTE		AV - AVENUE LA - LANE BL - BOULEVARD MP - MILEPOST CR - CIRCLE OV - OVAL	SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL WA - WAY	☐ WITHIN INTERCHANGE AREA			NUMBER OF APPROACHES			
DISTANCE	DISTANCE		IBERED COUNTY ROU IBERED TOWNSHIP ITE		CT - COURT PK - PARKWAY DR - DRIVE PI - PIKE HE - HEIGHTS PL - PLACE		WITHIN INTERCHANGE AREA ROADWAY						
1 0	2 - Feet 3 - Yards						☐ ROADWAY DIVID	ED					
	I OCATION EIDST HADMEH ROADWAY 9 - CROSSO			M	ANNER OF CRASH COLLISION/IMPACT		DIRECTION OF TRAVEL	MEDIAN TYPE					
2 - ON S	SHOULDER 10 - DRIVEW	AY / ALLEY	1	1 - NOT COLLISION BETWEEN TWO MOTOR	4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE		1 - NORTH 2 - SOUTH	(<4 FEI	DED FLUSH MEDIAN EET)				
5 - ON 0 6 - OUT	GORE CROSSI	NG USE PATHS		VEHICLES IN TRANSPORT 2 - REAR-END	7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION	ı	3 - EAST 4 - WEST	EDIAN SED MEDIAN					
7 - ON F 8 - OFF	RAMP 13 - BIKE LA	NE DOTH		3 - HEAD-ON	9 - OTHER / UNKNOWN			(ANY T	4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER / UNKNOWN				
☐ WORK ZONE RELAT	_ 1	WORK ZO			LOCATION OF CRASH IN WORK Z 1 - BEFORE THE 1ST WORK Z		CONTOUR	CONDITIONS	\top	SURFACE			
WORKERS PRESENT LAW ENFORCEMEN PRESENT		- LANE SHIFT/CROS - WORK ON SHOULD OR MEDIAN			WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA			_ 3		_ 1			
☐ ACTIVE SCHOOL ZO	5	- INTERMITTENT OR - OTHER	MOVING WORK		4 - ACTIVITY AREA 5 - TERMINATION AREA		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET 3 - SNOW		1 - CONCRETE 2 - BLACKTOP, BITUMINOUS,			
	IGHT CONDITION	Ĭ			WEATHER		3 - CURVE LEVEL 4 - CURVE GRADE 9 - OTHER	4 - ICE 5 - SAND, MUD, DIRT, OIL, GRAVEL		ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL,			
1 - DAYLIGHT 2 - DAWNIDUSK 2 - DAWNIDUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - LIGHTED ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER / UNKNOWN								STONE 5 - DIRT 9 - OTHER					
								/UNKNOWN					
9 - OTHER /	UNKNOWN												
LINIT 1 WAS A PRIVATE SNOW PLOW PEMOVING										Indicate the no direction with an "N" on the	orth		
	M THE DRIVE							· · · · · · · · · · · · · · · · · · ·	4	compass diagra	am.		
			7100 E. 1	10.01.		ř							
A O LINUT 4 V						W— 0 — E							
	VAS LEAVING.				ХА	5		1		Į.			
UTILITY POLE (NO POLE #) IN FRONT OF THE													
RESIDENCE AND LEFT THE SCENE.													
091E 115													
RESIDENT AT THE ABOVE ADDRESS DID NOT KNOW													
THE DRIVER AND STATED THAT SHE MET HIM AT ACE													
HARDWARE AND HE OFFERED HIS PLOW SERVICES													
POLE HAS BEEN REMOVED. CRASH REPORTED DATE/TIME DISPATCH DATE/TIME ARRIVAL DATE/TIME SCENE CLEARED DATE/TIME REPORT TAKEN BY													
1 1 2 8 2 0 2 3 0 9 2 7 1 1 2 8 2 0 2 3 0 9 3 2 1 1 2 8 2 0 2 3 1 1 1 0 0 1 1 2 8 2 0 2 3 1 1 1 0 0							-	POLICE AGENCY MOTORIST					
TOTAL TIME ROADWAY OTHER INVESTIGATION TOTAL OFFICER'S NAME* CLOSED TIME OFFICER'S NAME* P. Stockhausen Minutes Minutes P. Stockhausen								╬	SUPPLEMENT				
9,0,	OFFICER'S BADGE NUMBER' CHECKED BY OFFICER'S BADGE N						NUMBER*	1	(CORRECTION or ADDITION to see Excelling REPORT SERT TO COPE	N			
			Ŭ	UZ	<u> </u>	1	L 1 4		1				

	OH OF MAPET	DEPARTMENT PUBLIC SAFETY UNIT		LOCAL REPORT NUMBER 2 0 2 3 3 2 0 3							
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE	E (□ San	ne As Driver)	OWNER PHONE: INCLUDE AREA CODE	(Same As Driver)	DAMAGE				
~	0 1	SS: STREET, CITY, STATE, ZIP	· · · · · · · · · · · · · · · · · · ·				1 - NONE	DAMAGE SCALE 3 - FUNCTIONAL DAMAGE			
OWNE	OMER ADDRE	SO. STREET, STIT, STATE, 24	(Same As D	river)			9 - UNKNOWN 9 - UNKNOWN				
	COMMERCIAL CA	RRIER: NAME, ADDRESS, CITY, STATE, ZIP			COMMERCIAL CARRIER PHONE: INCL	LUDE AREA CODE					
	LP STATE	LICENSE PLATE #	Į v	EHICLE IDENTIFICATION #	VEHICLE YEAR	VEHICLE MAKE	DAMAGED AREA(S) INDICATE ALL THAT APPLY				
	ш	Linearing company		INSURANCE POLICY#			11 12	11 12 1			
	INSURANCE COMPANY VERIFIED			INSURANCE PULICY #	VEHICLE COLOR BLK	VEHICLE MODEL	10 12	2 10 11 1 2			
	■ COMMERC	TYPE OF USE	IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COMPANY NAME		9 9 3)3 9 9 9 7 3			
	INTERLO	INTERLOCK # OCCUPANTS VEHICLE WEIG			HAZARDO MATERIAL RELEASED	OUS MATERIAL	7 5 7	7 5 4			
	DEVICE EQUIPPE	■ HIT/SKIP UNIT	_0_1	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	PLACARD PLACARD	CLASS# PLACARD ID #	7 6 5	11 12 7 6 5			
		1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED			18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE	23 - PEDESTRIAN/SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON- MOTORIST	10_	11 1 2			
	0 4	3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE	14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYCLE 27 - TRAIN	9	9 3 3			
	UNIT TYPE	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE 99 - UNKNOWN OR HIT/SKIP			7 6 5			
VEHICLE		# OF TRAILING UNITS						6 5 11 12 1			
		WAS VEHICLE OPERATING IN AUTONO	DMOUS MODE 0	0 - NO AUTOMATION	3 - CONDITIONAL	9 - UNKNOWN	10 11 1	10 1 2			
	_ 2 _	WHEN CRASH OCCURED? 1-YES 2-NO 9-OTHER/UNKNO	AUTONOMOUS	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION		9 8 4	3 9 9 3			
		1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16 - FARM	21 - MAIL CARRIER	8 7 6 5	8 7 5			
	1 8	4 - SCHOOL TRANSPORT 9 - RUS - OTHER		12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL	99 - OTHER /UNKNOWN	6 5	, ,			
	FUNCTION	3 - BUS-TRANSIT/COMMUTER	TO - ANIBULANCE	15 - CONSTRUCTION EQUIFMENT	20 - SAPETT SERVICE PATROL		12	12 12 12			
		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	8 - POLE 9 - CARGO TANK 10 - FLAT BED	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE	R MR.				
	CARGO BODY TYPE	'		7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99 - OTHER / UNKNOWN	,609.				
	VEHICLE	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	6	6 6 6			
	DEFECTS	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER AT INCIDENT SCENE	- NO DAMAGE [0]	UNDERCARRIAGE [14]			
	NON-MOTORIST LOCATION AT	CROSSWALK 2 - INTERSECTION -	4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE-OTHER LOCATION	7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN	☐ - TOP [13]	- ALL AREAS [15] F NOT AT SCENE [16]			
	IMPACT	UNMARKED CROSSWALK		7 - MAKING U-TURN	AKING U-TURN 13 - NEGOTIATING A CURVE 18 - APPROACHING			TIAL POINT OF CONTACT			
	_	2 - NON-COLLISION 3 - STRIKING 0 2	2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST					
		4 - STRUCK PRE-CRASH 5 - BOTH STRIKING ACTION	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC	15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	1 5 0 - NO DAMAGE 1-12 - REFER TO	TO UNIT 15 - VEHICLE NOT AT SCENE			
		& STRUCK 6 - MAKING LEFT TURN 12 9 - OTHER / UNKNOWN 12		12 - DRIVERLESS	17 - PUSHING VEHICLE		DIAGRAM 13 - TOP	99 - UNKNOWN			
		1 - NONE	7 - LEFT OF CENTER	42 IMPROPER OTARY 52011	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY		TRAFFIC			
		2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE/ACDA	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNABLE 23 - OPENING DOOR INTO	TRAFFICWAY FLOW	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN			
	11.1.	4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	9 - IMPROPER LANE CHANGING 10 - IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID 16 - WRONG WAY	19 - LOAD SHIFTING/ FALLING/SPILLING 20 - IMPROPER CROSSING	ROADWAY 99 - OTHER IMPROPER	1 - ONE-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
	CONTRIBUTING	0-IMPROPER TORN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING			ACTION	# OF THROUGH LANES	3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING			
(6	CIRCOMSTANCES						ON ROAD	1 - NOT INVOLVED			
EVENT(\$	SEQUENCE OF	EVENTS		EVENTS			_1_	2 - INVOLVED - ACTIVE CROSSING 3 - INVOLVED - PASSIVE CROSSING			
	4 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF	11 - CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE 17 - ANIMAL - FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		T (VA) MATARIAT RIS			
		3 - IMMERSION 4 - JACKKNIFE	UNITS 8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN	23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNI	IT / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST			
	2	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TRANSPORT 21 - PARKED MOTOR VEHICLE	ANYTHING SET IN MOTION BY A MOTOR VEHICLE		2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST			
	3, , ,					24 - OTHER MOVABLE OBJECT	FROM TO	3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST			
		25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	COLLISION WITH FIXED OBJECT 37 - TRAFFIC SIGN POST	43 - CURB	50 -WORKZONE MAINTENANCE		9 - OTHER / UNKNOWN			
	4, , ,	/ CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	44 - DITCH 45 - EMBANKMENT 46 - FENCE	EQUIPMENT 51 - WALL 52 - BUILDING	UNIT SPEED	DETECTED SPEED			
	5	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX 48 - TREE	53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN		3 1-STATED/ESTIMATED SPEED			
		29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	42 - CULVERT	49 - FIRE HYDRANT	55 - OTHER / DIRECTIFIE		2 - CALCULATED / EDR 3 - UNDETERMINED			
	6						POSTED SPEED	3 - GINDE LEKTWIINED			
	1 1 .		1								
HS	Y8304 OH1U 1/19 [FIRST HARMFUL EVENT [760-0820]	M	OST HARMFUL EVENT				PAGE OF			

OHIO DEPARTMENT OF PUBLIC SAFETY	LOCAL REPORT NUMBER									
~	MOTORIST / NO					2 0	2 3	3 2 0		
M UNIT# NAME: LAST, FIRS	T, MIDDLE	DATE OF BIRTH AGE GENDER								
R ADDRESS: STREET, CITY, STATE, ZIP I S	CONTACT PHONE - INCLUDE AREA CODE									
T INJURIES INJURED EN	MS AGENCY (NAME)	AL FACILITY (NAME, CITY)	SAFETY EQUII					G USAGE EJ	JECTION TRAPPED	
O L STATE OPERATOR LICI	ENSE NIIMRED	OFFENSE CH	HARGED	LOCAL O	FFENSE DESCRIPTION	DOT-COMPLIANT MC HELMET		CITATIO	ON NUMBER	
M D T	ENGE NUMBER	OFFERSE OF	1ANGED	CODE	FFENSE DESCRIPTION			CHAIR	JN NOMBER	
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTE		CONDITION	ALCOHOL TES TYPE	VALUE	STATUS	DRUG TEST Type	I(S) RESULT SELECT UP TO 4
M UNIT# NAME: LAST, FIRS	T MIDDLE		OTHER DRUG	L			DATE OF BIRTH		L	GENDER
O HAME BOST, FING	T, MOULE									L. L.
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE				
	MS AGENCY (NAME)	INJURED TAKEN TO: MEDICA	AL FACILITY (NAME, CITY)	SAFETY EQUI USED	PMENT	DOT-COMPLIANT	SEATING POSITIO	N AIR BAG	G USAGE EJI	ECTION TRAPPED
	THE WINDS	OFFENSE CH	MARCED	LOCAL 0	FFENSE DESCRIPTION	MC HELMET		CITATIO	N NUMBER	
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE CH	MAGED	CODE	FFENSE DESCRIPTION			CHANG	N NOMBER	
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED BY	ALCOHOL / DRUG SUSPECTE ALCOHOL MAR	D RJUANA	CONDITION STATUS	ALCOHOL TES		STATUS	DRUG TEST	(S) RESULT SELECT UP TO 4
			OTHER DRUG	L		-L				
M UNIT# NAME: LAST, FIRS	T, MIDDLE						DATE OF BIRTH	1 1	AGE	GENDER
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE				
INJURIES INJURED E	MS AGENCY (NAME)	INJURED TAKEN TO: MEDICA	AL FACILITY (NAME CITY)	SAFETY EQUIP	PMENT		SEATING POSITIO	N AIR BAG	G USAGE EJI	ECTION TRAPPED
TAKEN BY			, ,,,,	USED		DOT-COMPLIANT MC HELMET				
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE CH	ARGED	LOCAL O	FFENSE DESCRIPTION			CITATIO	N NUMBER	
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECTE	ED	CONDITION STATUS	ALCOHOL TES	VALUE	STATUS	DRUG TEST	(S) RESULT SELECT UP TO 4
		BY	ALCOHOL MAR OTHER DRUG	RUUANA		 • L		L		LEGGET GETECT OF 104
INJURIES 1 - FATAL	SEATING POSITION 1 - FRONT - LEFT SIDE	AIR BAG 1 - NOT DEPLOYED	0L CLASS A	ASS	OL RESTRICTION		DRIVER DISTRA	CTION	1 - NONE GIVEN	TEST STATUS
2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B		DEVICE 2 - CDL INTRASTATE ONLY	2 - M	ANUALLY OPERATING A LECTRONIC COMMUNICA		2 - TEST REFUSE	:D
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	3 - DEPLOYED SIDE	3 - CLASS C IDE 4 - REGULAR CLASS (OH	WO D)	3 - CORRECTIVE LENSES 4 - FARM WAIVER	D	EVICE (TEXTING, TYPING,	ATION	3 - TEST GIVEN, O SAMPLE / UNU	
5 - NO APPARENT INJURY	(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE	4 - DEPLOYED BOTH FRONT / SI 5 - NOT APPLICABLE	5 - M / C MOPED ONLY	110 = D)	5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A		ALING) ALKING ON HANDS-FREE	.	4 - TEST GIVEN, F	RESULTS KNOWN
	6 - SECOND - RIGHT SIDE	9 - DEPLOYMENT UNKNOWN	6 - NO VALID OL	6 - NO VALID OL		4 - T.	COMMUNICATION DEVICE 4 - TALKING ON HAND-HELD		5 - TEST GIVEN, RESULTS UNKNOWN	
INJURED TAKEN BY 1 - NOT TRANSPORTED	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)				7 - EXCEPT TRACTOR-TRAI 8 - INTERMEDIATE LICENSE	LER C	OMMUNICATION DEVICE			
/TREATED AT SCENE 2 - EMS	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	EJECTION	OL ENDOR	SEMENT	RESTRICTIONS 9 - LEARNER'S PERMIT	E	LECTRONIC DEVICE		ALC	OHOL TEST TYPE
3 - POLICE	10 - SLEEPER SECTION OF TRUCK CAB	1 - NOT EJECTED	H - HAZMAT	O-MICK!	RESTRICTIONS 10 - LIMITED TO DAYLIGHT		ASSENGER THER DISTRACTION INS	IDE	1 - NONE	
9 - OTHER / UNKNOWN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	GO AREA 3 - TOTALLY EJECTED		M - MOTORCYCLE P - PASSENGER		TI	THE VEHICLE 8 - OTHER DISTRACTIONS OUTSIDE		2 - BLOOD 3 - URINE	
	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	3 - TOTALLY EJECTED 4 - NOT APPLICABLE	P - PASSENGER N - TANKER		11 - LIMITED TO EMPLOYME 12 - LIMITED - OTHER 13 - MECHANICAL DEVICES	TI	HE VEHICLE THER / UNKNOWN		3 - URINE 4 - BREATH	
SAFETY EQUIPMENT 1 - NONE USED	12 - PASSENGER IN UNENCLOSED		Q - MOTOR SCOOTER		13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND		THER / UNKNOWN		5 - OTHER	
2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED	CARGO AREA 13 - TRAILING UNIT	TRAPPED 1 - NOT TRAPPED	R - THREE-WHEEL MOTO	ORCYCLE	CONTROLS, OR OTHER ADAPTIVE DEVICES)					
4 - SHOULDER & LAP BELT USED	14 - RIDING ON VEHICLE	2 - EXTRICATED BY	S - SCHOOL BUS	DAIL EDG	14 - MILITARY VEHICLES ON 15 - MOTOR VEHICLES	NLY			1 - NONE	RUG TEST TYPE
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	EXTERIOR (NON-TRAILING UNIT)	MECHANICAL MEANS 3 - FREED BY		T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT					2 - BLOOD	
6 - CHILD RESTRAINT SYSTEM - REAR FACING	15 - NON-MOTORIST 99 - OTHER / UNKNOWN	NON-MECHANICAL MEANS			16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER	1 - A	CONDITION PPARENTLY NORMAL	V	3 - URINE	
7 - BOOSTER SEAT 8 - HELMET USED					18 - OTHER	2 - F	HYSICAL IMPAIRMENT		4 - OTHER	
9 - PROTECTIVE PADS USED							MOTIONAL (E.G. DEPRES GRY, DISTURBED)	SED,	DBII	G TEST RESULT(S)
(ELBOWS, KNEES, ETC.) 10 - REFLECTIVE CLOTHING			F - FEMALE	ER		4 - 11	LNESS		1 - AMPHETAMIN	IES
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY			M - MALE				ELL ASLEEP, FAINTED, TIGUED, ETC.		2 - BARBITURATE 3 - BENZODIAZER	
99 - OTHER / UNKNOWN			U - OTHER/UNKNOWN			6-1	NDER THE INFLUENCE (OF	4 - CANNABINOIE 5 - COCAINE	IS
							EDICATIONS / DRUGS LCOHOL		6 - OPIATES / OP	IOIDS
						9 - 0	THER / UNKNOWN		7 - OTHER 8 - NEGATIVE RE	SULTS

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