

TRAFFIC CRASH REPORT

*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT

<input checked="" type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input checked="" type="checkbox"/> OH-3 <input type="checkbox"/> SECONDARY CRASH <input type="checkbox"/> OH-1P <input type="checkbox"/> OTHER <input type="checkbox"/> PRIVATE PROPERTY				LOCAL INFORMATION 4402 GLENESTE-WITHAMSVILLE RD REPORTING AGENCY NAME* Union Township Police Dept.				NCIC* 01316			LOCAL REPORT NUMBER* 122003360			
COUNTY* 13				LOCALITY* 1-CITY 2-VILLAGE 3-TOWNSHIP				LOCATION: CITY, VILLAGE, TOWNSHIP*				CRASH DATE / TIME* 04032022 1144		
REFERENCE LOCATION	ROUTE TYPE	ROUTE NUMBER	PREFIX	1-NORTH 2-SOUTH 3-EAST 4-WEST	LOCATION ROAD NAME			ROAD TYPE	LATITUDE DECIMAL DEGREES			CRASH SEVERITY 1 - FATAL 2 - SERIOUS INJURY SUSPECTED 3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE ONLY		
	ROUTE TYPE	ROUTE NUMBER	PREFIX	1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)			ROAD TYPE	LONGITUDE DECIMAL DEGREES					
REFERENCE POINT		DIRECTION FROM REFERENCE		1-NORTH 2-SOUTH 3-EAST 4-WEST	ROUTE TYPE	AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS	ROAD TYPE	HW - HIGHWAY LA - LANE MP - MILEPOST OV - OVAL PK - PARKWAY PI - PIKE PL - PLACE	RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE	INTERSECTION RELATED				
REFERENCE POINT		DIRECTION FROM REFERENCE		1-NORTH 2-SOUTH 3-EAST 4-WEST	ROUTE TYPE	IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE	RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE	RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE	NUMBER OF APPROACHES				
REFERENCE POINT		DIRECTION FROM REFERENCE		1-NORTH 2-SOUTH 3-EAST 4-WEST	ROUTE TYPE	IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE	RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE	RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE	ROADWAY				
REFERENCE POINT		DIRECTION FROM REFERENCE		1-NORTH 2-SOUTH 3-EAST 4-WEST	ROUTE TYPE	IR - INTERSTATE ROUTE(TP) US - FEDERAL US ROUTE SR - STATE ROUTE CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE	ROAD TYPE	RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE	RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE	ROADWAY DIVIDED				
LOCATION OF FIRST HARMFUL EVENT				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	6	MANNER OF CRASH COLLISION/IMPACT			DIRECTION OF TRAVEL	MEDIAN TYPE			
LOCATION OF FIRST HARMFUL EVENT				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	6	MANNER OF CRASH COLLISION/IMPACT			1-NORTH 2-SOUTH 3-EAST 4-WEST	MEDIAN TYPE			
WORK ZONE RELATED		WORK ZONE TYPE		1-LANE CLOSURE 2-LANE SHIFT/CROSSOVER 3-WORK ON SHOULDER OR MEDIAN 4-INTERMITTENT OR MOVING WORK 5-OTHER	LOCATION OF CRASH IN WORK ZONE	1-BEFORE THE 1ST WORK ZONE WARNING SIGN 2-ADVANCE WARNING AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA	CONTOUR	1	CONDITIONS	1	SURFACE			
WORK ZONE RELATED		WORK ZONE TYPE		1-LANE CLOSURE 2-LANE SHIFT/CROSSOVER 3-WORK ON SHOULDER OR MEDIAN 4-INTERMITTENT OR MOVING WORK 5-OTHER	LOCATION OF CRASH IN WORK ZONE	1-BEFORE THE 1ST WORK ZONE WARNING SIGN 2-ADVANCE WARNING AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA	CONTOUR	1	CONDITIONS	1	SURFACE			
WORKERS PRESENT		LAW ENFORCEMENT PRESENT		1-ADVANCE WARNING AREA 2-TRANSITION AREA 3-ACTIVITY AREA 4-TERMINATION AREA	1-BEFORE THE 1ST WORK ZONE WARNING SIGN 2-ADVANCE WARNING AREA 3-TRANSITION AREA 4-ACTIVITY AREA 5-TERMINATION AREA	1-STRAIGHT LEVEL 2-STRAIGHT GRADE 3-CURVE LEVEL 4-CURVE GRADE 9-OTHER/UNKNOWN	1	1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN	1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN	1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN				
ACTIVE SCHOOL ZONE		LIGHT CONDITION		1-DAYLIGHT 2-DAWN/DUSK 3-DARK - LIGHTED ROADWAY 4-DARK - ROADWAY NOT LIGHTED 5-DARK - UNKNOWN ROADWAY LIGHTING 9-OTHER / UNKNOWN	WEATHER	1-CLEAR 2-CLOUDY 3-FOG, SMOG, SMOKE 4-RAIN 5-SLEET, HAIL	1-SNOW 6-SNOW 7-SEVERE CROSSWINDS 8-BLOWING SAND, SOIL, DIRT, SNOW 9-FREEZING RAIN OR FREEZING DRIZZLE 99-OTHER / UNKNOWN	1	1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN	1-DRY 2-WET 3-SNOW 4-ICE 5-SAND, MUD, DIRT, OIL, GRAVEL 6-WATER (STANDING, MOVING) 7-SLUSH 9-OTHER/UNKNOWN	1-CONCRETE 2-BLACKTOP, BITUMINOUS, ASPHALT 3-BRICK/BLOCK 4-SLAG, GRAVEL, STONE 5-DIRT 9-OTHER/UNKNOWN			
NARRATIVE UNIT #1 WAS MAKING A RIGHT FROM EASTGATE SOUTH DRIVE ONTO GLENESTE-WIHAMSVILLE RD (SOUTHBOUND), WHEN UNIT #1 STRUCK UNIT #2, WHO WAS TRAVELING SOUTHBOUND ON SAID ROADWAY (TWO THROUGH LANES FOR SOUTHBOUND TRAFFIC; FAILED TO MERGE SAFELY). UNIT #1 WAS ATTEMPTING TO MERGE INTO THE LEFT TURN LANE TO TURN INTO POPEYE'S CHICKEN.														
				Indicate the north direction with an "N" on the compass diagram.										
CRASH REPORTED DATE / TIME		DISPATCH DATE / TIME		ARRIVAL DATE / TIME		SCENE CLEARED DATE / TIME		REPORT TAKEN BY						
04032022 1144		04032022 1146		04032022 1151		04032022 1305		<input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST						
TOTAL TIME ROADWAY CLOSED		OTHER INVESTIGATION TIME		TOTAL MINUTES		OFFICER'S NAME*		CHECKED BY OFFICER'S NAME*						
0000				0079		Pangallo, Joseph II		Williams, Eric J						
						OFFICER'S BADGE NUMBER*		CHECKED BY OFFICER'S BADGE NUMBER*						
						3 5		8 5						
<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODS)														

OWNER

VEHICLE

EVENT(s)

SEQUENCE OF EVENTS

1 20 1 - OVERTURN/ROLLOVER
2 - FIRE/EXPLOSION
3 - IMMERSION
4 - JACKKNIFE
5 - CARGO/EQUIPMENT LOSS OR SHIFT

3 1 - IMPROPER TURN

4 1 - IMPROPER BACKING

5 1 - UNSAFE SPEED

6 1 - RAN RED LIGHT

7 1 - FAILURE TO YIELD

8 1 - RAN OFF ROAD RIGHT

9 1 - RAN OFF ROAD LEFT

10 1 - CROSS MEDIAN

11 1 - IMPROPER LANE CHANGE

12 1 - IMPROPER PASSING

13 1 - DROVE OFF ROAD

14 1 - IMPROPER TURN

15 1 - CHANGING LANES

16 1 - STRIKING

17 1 - STRIKING & STRUCK

18 1 - NON-CONTACT

19 1 - NON-COLLISION

20 1 - STRIKING

21 1 - STRIKING

22 1 - STRIKING

23 1 - STRIKING

24 1 - STRIKING

25 1 - STRIKING

26 1 - STRIKING

27 1 - STRIKING

28 1 - STRIKING

29 1 - STRIKING

30 1 - STRIKING

31 1 - STRIKING

32 1 - STRIKING

33 1 - STRIKING

34 1 - STRIKING

35 1 - STRIKING

36 1 - STRIKING

37 1 - STRIKING

38 1 - STRIKING

39 1 - STRIKING

40 1 - STRIKING

41 1 - STRIKING

42 1 - STRIKING

43 1 - STRIKING

44 1 - STRIKING

45 1 - STRIKING

46 1 - STRIKING

47 1 - STRIKING

48 1 - STRIKING

49 1 - STRIKING

50 1 - STRIKING

51 1 - STRIKING

52 1 - STRIKING

53 1 - STRIKING

54 1 - STRIKING

55 1 - STRIKING

56 1 - STRIKING

57 1 - STRIKING

58 1 - STRIKING

59 1 - STRIKING

60 1 - STRIKING

61 1 - STRIKING

62 1 - STRIKING

63 1 - STRIKING

64 1 - STRIKING

65 1 - STRIKING

66 1 - STRIKING

67 1 - STRIKING

68 1 - STRIKING

69 1 - STRIKING

70 1 - STRIKING

71 1 - STRIKING

72 1 - STRIKING

73 1 - STRIKING

74 1 - STRIKING

75 1 - STRIKING

76 1 - STRIKING

77 1 - STRIKING

78 1 - STRIKING

79 1 - STRIKING

80 1 - STRIKING

81 1 - STRIKING

82 1 - STRIKING

83 1 - STRIKING

84 1 - STRIKING

85 1 - STRIKING

86 1 - STRIKING

87 1 - STRIKING

88 1 - STRIKING

89 1 - STRIKING

90 1 - STRIKING

91 1 - STRIKING

92 1 - STRIKING

93 1 - STRIKING

94 1 - STRIKING

95 1 - STRIKING

96 1 - STRIKING

97 1 - STRIKING

98 1 - STRIKING

99 1 - STRIKING

100 1 - STRIKING

101 1 - STRIKING

102 1 - STRIKING

103 1 - STRIKING

104 1 - STRIKING

105 1 - STRIKING

106 1 - STRIKING

107 1 - STRIKING

108 1 - STRIKING

109 1 - STRIKING

110 1 - STRIKING

111 1 - STRIKING

112 1 - STRIKING

113 1 - STRIKING

114 1 - STRIKING

115 1 - STRIKING

116 1 - STRIKING

117 1 - STRIKING

118 1 - STRIKING

119 1 - STRIKING

120 1 - STRIKING

121 1 - STRIKING

122 1 - STRIKING

123 1 - STRIKING

124 1 - STRIKING

125 1 - STRIKING

126 1 - STRIKING

127 1 - STRIKING

128 1 - STRIKING

129 1 - STRIKING

130 1 - STRIKING

131 1 - STRIKING

132 1 - STRIKING

133 1 - STRIKING

134 1 - STRIKING

135 1 - STRIKING

136 1 - STRIKING

137 1 - STRIKING

138 1 - STRIKING

139 1 - STRIKING

140 1 - STRIKING

141 1 - STRIKING

142 1 - STRIKING

143 1 - STRIKING

144 1 - STRIKING

145 1 - STRIKING

146 1 - STRIKING

147 1 - STRIKING

148 1 - STRIKING

149 1 - STRIKING

150 1 - STRIKING

151 1 - STRIKING

152 1 - STRIKING

153 1 - STRIKING

154 1 - STRIKING

155 1 - STRIKING

156 1 - STRIKING

157 1 - STRIKING

158 1 - STRIKING

159 1 - STRIKING

160 1 - STRIKING

161 1 - STRIKING

162 1 - STRIKING

163 1 - STRIKING

164 1 - STRIKING

165 1 - STRIKING

166 1 - STRIKING

167 1 - STRIKING

168 1 - STRIKING

169 1 - STRIKING

170 1 - STRIKING

171 1 - STRIKING

172 1 - STRIKING

173 1 - STRIKING

174 1 - STRIKING

175 1 - STRIKING

176 1 - STRIKING

177 1 - STRIKING

178 1 - STRIKING

179 1 - STRIKING

180 1 - STRIKING

181 1 - STRIKING

182 1 - STRIKING

183 1 - STRIKING

184 1 - STRIKING

185 1 - STRIKING

186 1 - STRIKING

187 1 - STRIKING

188 1 - STRIKING

189 1 - STRIKING

190 1 - STRIKING

191 1 - STRIKING

192 1 - STRIKING

193 1 - STRIKING

194 1 - STRIKING

195 1 - STRIKING

196 1 - STRIKING

197 1 - STRIKING

198 1 - STRIKING

199 1 - STRIKING

200 1 - STRIKING

201 1 - STRIKING

202 1 - STRIKING

203 1 - STRIKING

204 1 - STRIKING

205 1 - STRIKING

206 1 - STRIKING

207 1 - STRIKING

208 1 - STRIKING

209 1 - STRIKING

210 1 - STRIKING

211 1 - STRIKING

212 1 - STRIKING

213 1 - STRIKING

214 1 - STRIKING

215 1 - STRIKING

216 1 - STRIKING

217 1 - STRIKING

218 1 - STRIKING

219 1 - STRIKING

220 1 - STRIKING

221 1 - STRIKING

222 1 - STRIKING

223 1 - STRIKING

224 1 - STRIKING

225 1 - STRIKING

226 1 - STRIKING

227 1 - STRIKING

228 1 - STRIKING

229 1 - STRIKING

OWNER

VEHICLE

EVENT(s)

UNIT #

LP STATE

INSURANCE VERIFIED

UNIT TYPE

SPECIAL FUNCTION

CARGO BODY TYPE

NON-MOTORIST LOCATION AT IMPACT

ACTION

CONTRIBUTING CIRCUMSTANCES

SEQUENCE OF EVENTS

COLLISION WITH FIXED OBJECT - STRUCK

FIRST HARMFUL EVENT

OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER)

FAIN MIKA DAWN

OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)

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

46 BEASLEY FORK RD WEST UNION, Ohio, 45693

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE

LICENCE PLATE # **HUB5302**

VEHICLE IDENTIFICATION # **1G1J1D15SIH6H4134470**

VEHICLE YEAR **2017**

VEHICLE MAKE **CHEVROLET**

INSURANCE COMPANY **GEICO**

INSURANCE POLICY # **6010271663**

COLOR **GRY**

VEHICLE MODEL **SONIC**

TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE

INTERLOCK DEVICE EQUIPPED HIT/SKIP UNIT **01**

UNIT TYPE **01**
4 - PICK UP
5 - CARGO VAN
6 - VAN (9-15 SEATS)

OF TRAILING UNITS **01**

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

AUTONOMOUS MODE LEVEL **0**

SPECIAL FUNCTION **01**
3 - ELECTRONIC RIDE SHARING
4 - SCHOOL TRANSPORT
5 - BUS - TRANSIT/COMMUTER

CARGO BODY TYPE **01**
1 - NO CARGO BODY TYPE / NOT APPLICABLE
2 - BUS

VEHICLE DEFECTS **00**
1 - TURN SIGNALS
2 - HEAD LAMPS
3 - TAIL LAMPS

NON-MOTORIST LOCATION AT IMPACT **00**
1 - INTERSECTION - MARKED CROSSWALK
2 - INTERSECTION - UNMARKED CROSSWALK

ACTION **04**
1 - NON-CONTACT
2 - NON-COLLISION
3 - STRIKING **01**
4 - STRUCK
5 - BOTH STRIKING & STRUCK
6 - OTHER / UNKNOWN

CONTRIBUTING CIRCUMSTANCES **01**
1 - NONE
2 - FAILURE TO YIELD
3 - RAN RED LIGHT
4 - RAN STOP SIGN
5 - UNSAFE SPEED
6 - IMPROPER TURN

SEQUENCE OF EVENTS **20**

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 MOBILE OBJECT

25 - IMPACT ATTENUATOR / CRASH CUSHION
26 - BRIDGE OVERHEAD STRUCTURE
27 - BRIDGE PIER OR ABUTMENT
28 - BRIDGE PARAPET
29 - BRIDGE RAIL
30 - GUARDRAIL FACE

31 - GUARDRAIL END
32 - PORTABLE BARRIER
33 - MEDIAN CABLE BARRIER
34 - MEDIAN GUARDRAIL
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

1 - FIRST HARMFUL EVENT **1**
1 - MOST HARMFUL EVENT **1**

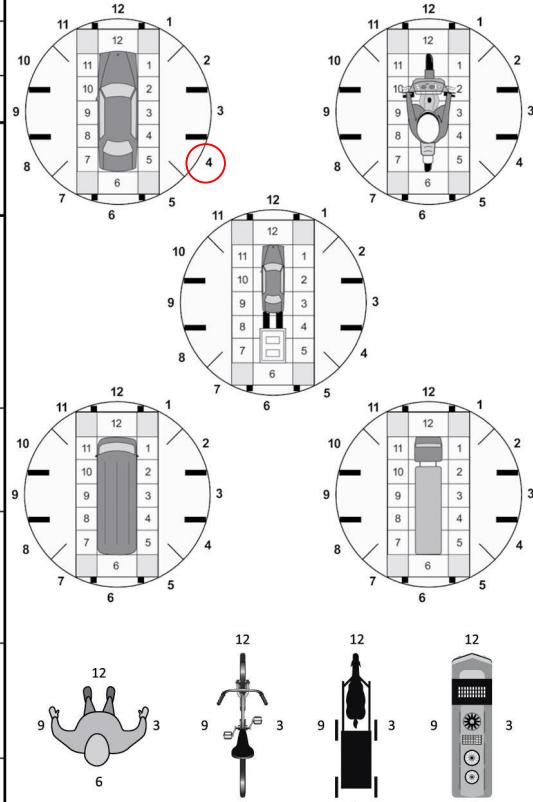
DAMAGE

DAMAGE SCALE

2 1 - NONE 3 - FUNCTIONAL DAMAGE
2 - MINOR 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

04 0 - NO DAMAGE 14 - UNDERCARRIAGE
1-12 - REFER TO UNIT DIAGRAM 15 - VEHICLE NOT AT SCENE
13 - TOP 99 - UNKNOWN

TRAFFIC

TRAFFICWAY FLOW

2 1 - ONE-WAY 4 - STOP SIGN
2 - TWO-WAY 5 - YIELD SIGN
3 - FLASHER 6 - NO CONTROL

OF THROUGH LANES ON ROAD

4 1 - NOT INVOLVED
2 - INVOLVED-ACTIVE CROSSING
3 - INVOLVED-PASSIVE CROSSING

UNIT / NON-MOTORIST DIRECTION

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

UNIT SPEED

10 1 - STATED / ESTIMATED SPEED
2 - CALCULATED / EDR
3 - UNDETERMINED

POSTED SPEED

45

LOCAL REPORT NUMBER
122003360

MOTORIST / NON-MOTORIST	UNIT #	NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH	AGE	GENDER				
	01	BROOKS NORMA JEAN					09091939	082	F				
ADDRESS: STREET,CITY,STATE, ZIP		4171 KILLDEER CT, LEBANON, Ohio, 45036					CONTACT PHONE - INCLUDE AREA CODE						
INJURIES 5		INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME,CITY)		SAFETY EQUIPMENT USED 04	DOT-COMPLIANT MC HELMET	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 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 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST STATUS 1	TYPE 1	VALUE .	DRUG TEST(S) STATUS 1	TYPE 1	RESULT SELECT UP TO 4
UNIT #		NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH	AGE	GENDER				
02		FAIN MIKA DAWN					03151996	026	F				
ADDRESS: STREET,CITY,STATE, ZIP		46 BEASLEY FORK RD, WEST UNION, Ohio, 45693					CONTACT PHONE - INCLUDE AREA CODE						
INJURIES 5		INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME,CITY)		SAFETY EQUIPMENT USED 04	DOT-COMPLIANT MC HELMET	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 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 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST STATUS 1	TYPE 1	VALUE .	DRUG TEST(S) STATUS 1	TYPE 1	RESULT SELECT UP TO 4
UNIT #		NAME: LAST, FIRST, MIDDLE					DATE OF BIRTH	AGE	GENDER				
000							000	000	000				
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 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG	CONDITION 1	ALCOHOL TEST STATUS 1	TYPE 1	VALUE .	DRUG TEST(S) STATUS 1	TYPE 1	RESULT SELECT UP TO 4
INJURIES		SEATING POSITION		AIR BAG		OL CLASS	OL RESTRICTION(S)	DRIVER DISTRACTION		TEST STATUS			
1 - FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)		1 - NOT DEPLOYED		1 - CLASS A	1 - ALCOHOL INTERLOCK DEVICE	1 - NOT DISTRACTED		1 - NONE GIVEN			
2 - SUSPECTED SERIOUS INJURY		2 - FRONT - MIDDLE		2 - DEPLOYED FRONT		2 - CLASS B	2 - CDL INTRASTATE ONLY	2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)		2 - TEST REFUSED			
3 - SUSPECTED MINOR INJURY		3 - FRONT - RIGHT SIDE		3 - DEPLOYED SIDE		3 - CLASS C	3 - CORRECTIVE LENSES	3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE		3 - TEST GIVEN, RESULTS UNKNOWN			
4 - POSSIBLE INJURY		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)		4 - DEPLOYED BOTH FRONT / SIDE		4 - REGULAR CLASS (OHIO = D)	4 - FARM WAIVER	4 - TALKING ON HAND-HELD COMMUNICATION DEVICE		4 - TEST GIVEN, RESULTS UNKNOWN			
5 - NO APPARENT INJURY		5 - SECOND - MIDDLE		5 - NOT APPLICABLE		5 - M/C MOPED ONLY	5 - EXCEPT CLASS A BUS	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE		5 - TEST GIVEN, RESULTS UNKNOWN			
INJURED TAKEN BY		6 - SECOND - RIGHT SIDE		9 - DEPLOYMENT UNKNOWN		6 - NO VALID OL	6 - EXCEPT CLASS A & CLASS B BUS	6 - PASSENGER		6 - BLOOD			
1 - NOT TRANSPORTED /TREATED AT SCENE		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		EJECTION		H - HAZMAT	7 - EXCEPT TRACTOR-TRAILER	7 - OTHER DISTRACTION INSIDE THE VEHICLE		7 - URINE			
2 - EMS		8 - THIRD - MIDDLE		1 - NOT EJECTED		M - MOTORCYCLE	8 - INTERMEDIATE LICENSE RESTRICTIONS	8 - OTHER DISTRACTION OUTSIDE THE VEHICLE		8 - BREATH			
3 - POLICE		9 - THIRD - RIGHT SIDE		2 - PARTIALLY EJECTED		P - PASSENGER	9 - LEARNER'S PERMIT RESTRICTIONS	9 - OTHER / UNKNOWN		5 - OTHER			
9 - OTHER / UNKNOWN		10 - SLEEPER SECTION OF TRUCK CAB		3 - TOTALLY EJECTED		N - TANKER	10 - LIMITED TO DAYLIGHT ONLY	10 - APPARENTLY NORMAL		1 - NONE			
SAFETY EQUIPMENT		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)		4 - NOT APPLICABLE		Q - MOTOR SCOOTER	11 - LIMITED TO EMPLOYMENT	11 - PHYSICAL IMPAIRMENT		2 - BLOOD			
1 - NONE USED		12 - PASSENGER IN UNENCLOSED CARGO AREA		1 - NOT TRAPPED		R - THREE-WHEEL MOTORCYCLE	12 - LIMITED - OTHER	12 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		3 - URINE			
2 - SHOULDER BELT ONLY USED		13 - TRAILING UNIT		2 - EXTRICATED BY MECHANICAL MEANS		S - SCHOOL BUS	13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER ADAPTIVE DEVICES)	13 - APPARENTLY NORMAL		4 - OTHER			
3 - LAP BELT ONLY USED		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		3 - FREED BY NON-MECHANICAL MEANS		T - DOUBLE & TRIPLE TRAILERS	14 - MILITARY VEHICLES ONLY	14 - PHYSICAL IMPAIRMENT		1 - AMPHETAMINES			
4 - SHOULDER & LAP BELT USED		15 - NON-MOTORIST		F - FEMALE		X - TANKER / HAZMAT	15 - MOTOR VEHICLES WITHOUT AIR BRAKES	15 - APPARENTLY NORMAL		2 - BARBITURATES			
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING		99 - OTHER / UNKNOWN		M - MALE			16 - OUTSIDE MIRROR	16 - APPARENTLY NORMAL		3 - BENZODIAZEPINES			
6 - CHILD RESTRAINT SYSTEM - REAR FACING				U - OTHER / UNKNOWN			17 - PROSTHETIC AID	17 - APPARENTLY NORMAL		4 - CANNABINOID			
7 - BOOSTER SEAT							18 - OTHER	18 - APPARENTLY NORMAL		5 - COCAINE			
8 - HELMET USED										6 - OPIATES / OPIOIDS			
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)										7 - OTHER			
10 - REFLECTIVE CLOTHING										8 - NEGATIVE RESULTS			
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY													
99 - OTHER / UNKNOWN													

Union Township Police Dept.

OHIO TRAFFIC ACCIDENT - IMAGE CONTINUATION

122003360

Traffic Crash/Non-Injury

4/04/2022 OH3

OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-3 REV 1/82

LOCAL REPORT NUMBER 273360	REPORTING AGENCY <u>Union Township Police Department</u>	DATE OF CRASH <u>M 4 D 3 22</u>
IN COUNTY OF <u>Clermont</u>	CRASH LOCATION <u>4402 Glen Este -Withams</u>	

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, Mika Fair hereby make this voluntary statement to PO Pangallo #35 At Accident Scene

- 1) What time did the accident happen? 11:30 am
- 2) What road were you traveling on? Glen Este Withamsville rd
- 3) What direction were you traveling? _____
- 4) Were you injured? YES or NO If yes, explain: _____
- 5) What was your speed before the crash? 10 mph
- 6) What is the speed limit? _____
- 7) Is there anything you could have done to avoid the accident? No
- 8) Is the address on your license correct? YES or NO. If no, please list the correct address below.

9) Were you wearing your seat belt? YES NO. If you have passengers, were they wearing their seat belt? YES or NO

10) Vehicle Year / Make/ Model 2017 Chevy Sonic

11) List all the occupants below:

Name	Address (street, city, zip)	Seating Position

12) Describe what happened?

woman turned out ~~too~~ tried to get in to incorrect lane and hit the back of my car

Insurance Company Geico

Policy# 60102714663

Signature X

Mika Fair

Union Township Police Dept.

OHIO TRAFFIC ACCIDENT - IMAGE CONTINUATION

122003360

Traffic Crash/Non-Injury

4/04/2022 OH3

OHIO TRAFFIC CRASH WITNESS STATEMENT

OH-3 REV 1/82

LOCAL REPORT NUMBER <i>72-3360</i>	REPORTING AGENCY <u>Union Township Police Department</u>	DATE OF CRASH <i>M 4 D 3 Y 22</i>
IN COUNTY OF Clermont	CRASH LOCATION <i>4402 Glenest W. Hillsdale Rd</i>	

FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, Jean Brooks hereby make this voluntary statement to PO Pangallo #35 At Accident Scene

- 1) What time did the accident happen? 11:45 a.m.
- 2) What road were you traveling on? _____
- 3) What direction were you traveling? _____
- 4) Were you injured? YES or NO If yes, explain: _____
- 5) What was your speed before the crash? 4 5-10 MPH
- 6) What is the speed limit? 25 MPH
- 7) Is there anything you could have done to avoid the accident? _____
- 8) Is the address on your license correct? YES or NO. If no, please list the correct address below.

- 9) Were you wearing your seat belt? YES NO. If you have passengers, were they wearing their seat belt? YES or NO
- 10) Vehicle Year / Make/ Model 2021 BUICK ENVISION
- 11) List all the occupants below:

Name	Address (street, city, zip)	Seating Position
<u>JEAN BROOKS</u>	<u>4171 KILDEER ST., LEBANON, OH 45036</u>	<u>DRIVER</u>

12) Describe what happened?

I turned right onto Glenest/W. Hillsdale Rd and was going to turn left onto a ~~yellow~~ private drive. The other car was turning left onto Glen Est/W. Hillsdale and we hit each other.

Insurance Company State Farm Policy# 891-3286-B09-35B

Signature X

Norma Jean Brooks

OFFICER'S SIGNATURE <i>PO Pangallo</i>	UNIT NO. <i>1</i>	PAGE NO. <i>1</i>
---	----------------------	----------------------