



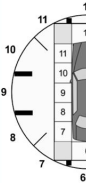

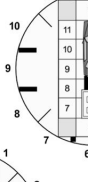
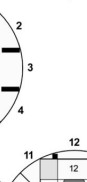
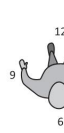

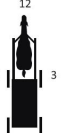
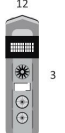
## TRAFFIC CRASH REPORT

Document #: 20195036427

<input type="checkbox"/> PHOTOS TAKEN		<input type="checkbox"/> OH-2		<input type="checkbox"/> OH-3		LOCAL INFORMATION P19031000000848		Local Report #: 23-0233-23	
<input type="checkbox"/> SECONDARY CRASH		<input type="checkbox"/> OH-1P		<input type="checkbox"/> OTHER		REPORTING AGENCY NAME* LANCASTER OSHP		NCIC* OHP2	
<input type="checkbox"/> PRIVATE PROPERTY								HIT/SKIP 1 - SOLVED 2 - UNSOLVED	
COUNTY* 23		LOCALITY* 3		LOCATION: CITY, VILLAGE, TOWNSHIP* Walnut (Township of)		ODPS FIPS 80570		CRASH DATE / TIME* 3/10/2019 5:20:00 AM	
ROUTE TYPE SR		ROUTE NUMBER 256		PREFIX N - NORTH S - SOUTH E - EAST W - WEST		LOCATION ROAD NAME		CRASH SEVERITY 3-MINOR INJURY SUSPECTED	
ROUTE TYPE		ROUTE NUMBER		PREFIX N - NORTH S - SOUTH E - EAST W - WEST		REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE#) 16		ODPS LATITUDE 39.840692	
						ROAD TYPE MP		ODPS LONGITUDE -82.565267	
REFERENCE POINT 2		DIRECTION FROM REFERENCE W		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		ODOT GOOGLE MAP LINK <a href="https://www.google.com/maps?q=39.840766,-82.564029">https://www.google.com/maps?q=39.840766,-82.564029</a>	
DISTANCE FROM REFERENCE 0.400		DISTANCE UNIT OF MEASURE 1						INTERSECTION RELATED <input type="checkbox"/> WITHIN INTERSECTION OR ON APPROACH <input type="checkbox"/> WITHIN INTERCHANGE AREA NUMBER OF APPROACHES	
								ROADWAY <input type="checkbox"/> ROADWAY DIVIDED	
LOCATION OF FIRST HARMFUL EVENT 4		MANNER OF CRASH COLLISION/IMPACT 1		DIRECTION OF TRAVEL N - NORTH S - SOUTH E - EAST W - WEST		MEDIAN TYPE 1 - DIVIDED FLUSH MEDIAN (LESS THAN 4 FEET) 2 - DIVIDED FLUSH MEDIAN (4 FEET AND GREATER) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, RAISED MEDIAN (ANY TYPE) 9 - OTHER/UNKNOWN			
WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT <input type="checkbox"/> ACTIVE SCHOOL ZONE		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 FIRST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA		CONTOUR 1		CONDITIONS 2	
LIGHT CONDITION 4		WEATHER 2				SURFACE 2			
NARRATIVE UNIT #1 WAS TRAVELING WESTBOUND ON SR256 WHEN IT TRAVELED OFF THE LEFT SIDE OF THE ROADWAY STRIKING SEVERAL TREES AND A FENCE.									
CRASH REPORTED DATE / TIME 3/10/2019 5:28:00 AM		DISPATCH DATE / TIME 3/10/2019 5:28:00 AM		ARRIVAL DATE / TIME 3/10/2019 6:02:00 AM		SCENE CLEARED DATE / TIME 3/10/2019 7:10:00 AM		REPORT TAKEN BY <input type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	
TOTAL TIME ROADWAY CLOSED 90		OTHER INVESTIGATION TIME 160		TOTAL MINUTES 262		OFFICER'S NAME* Hale, Troy		CHECKED BY OFFICER'S NAME* Mackie, Kyle	
						OFFICER'S BADGE NUMBER* 1594		CHECKED BY OFFICER'S BADGE NUMBER* 1836	
								<input type="checkbox"/> SUPPLEMENT CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS	

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## EVENTS

Document #: 20195036427	
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<b>DAMAGE</b>	
<b>DAMAGE SCALE</b>	
<div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin-bottom: 10px;">4</div> <div style="display: flex; justify-content: space-between;"> <div> 1 - NONE 2 - MINOR </div> <div> 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE </div> </div>	9 - OTHER/UNKNOWN
<b>DAMAGED AREAS INDICATE ALL THAT APPLY</b>	
<div style="border: 1px solid black; display: inline-block; padding: 10px 40px; font-size: 24px; margin: 0 auto;">15</div>	
<div style="display: flex; flex-wrap: wrap; justify-content: space-around;">   </div> <div style="display: flex; flex-wrap: wrap; justify-content: space-around; margin-top: 20px;">   </div> <div style="display: flex; justify-content: space-around; margin-top: 20px;">     </div>	
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> - NO DAMAGE [0]   <input type="checkbox"/> - TOP [13] </div> <div> <input type="checkbox"/> - UNDERCARRIAGE [14]   <input type="checkbox"/> - ALL AREAS [15] </div> </div> <div style="text-align: center; margin-top: 10px;"> <input type="checkbox"/> - UNIT NOT AT SCENE [16] </div>	
<b>INITIAL POINT OF CONTACT</b>	
<div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin-bottom: 10px;">11</div> <div style="display: flex; justify-content: space-between;"> <div> 0 - NON-COLLISION 1-12 - REFER TO UNIT DIAGRAM 13 - TOP </div> <div> 14 - UNDERCARRIAGE 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN </div> </div>	
<b>TRAFFIC</b>	
<b>TRAFFICWAY FLOW</b> <div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin-top: 10px;">2</div> <div style="margin-top: 10px;"> 1 - ONE-WAY 2 - TWO-WAY </div>	<b>TRAFFIC CONTROL</b> <div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin-top: 10px;">6</div> <div style="margin-top: 10px;"> 1 - ROUNDABOUT 2 - SIGNAL 3 - FLASHER 4 - STOP SIGN 5 - YIELD SIGN 6 - NO CONTROL </div>
<b># OF THROUGH LANES ON ROAD</b> <div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin-top: 10px;">2</div>	<b>RAIL GRADE CROSSING</b> <div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin-top: 10px;"></div> <div style="margin-top: 10px;"> 1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING </div>
<b>UNIT / NON-MOTORIST DIRECTION</b>	
FROM <div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin: 0 10px;">3</div> TO <div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin: 0 10px;">4</div>	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST </div> <div style="width: 50%;"> 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER/UNKNOWN </div> </div>
<b>UNIT SPEED</b> <div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin-top: 10px;">55</div>	<b>DETECTED SPEED</b> <div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin-top: 10px;">1</div> <div style="margin-top: 10px;"> 1 - STATED/ESTIMATED SPEED 2 - CALCULATED/EDR 3 - UNDETERMINED </div>
<b>POSTED SPEED</b> <div style="border: 1px solid black; display: inline-block; padding: 2px 10px; margin-top: 10px;">55</div>	



## MOTORIST / NON-MOTORIST

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Motorist/Non-Motorist

UNIT # 1	PERSON TYPE D	NAME: LAST, FIRST, MIDDLE			DATE OF BIRTH		AGE 18	GENDER M	
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE				
INJURIES 3	INJURED TAKEN BY 1	EMS AGENCY (NAME) THURSTON	INJURED TAKEN TO: MEDICAL FACILITY (NAME,CITY) FAIRFIELD MEDICAL CENTER	SAFETY EQUIPMENT USED 4	<input type="checkbox"/> DOT-COMPLIANT MC HELMET	SEATING POSITION 1	AIR BAG USAGE 4	EJECTION 1	TRAPPED 1
OL STATE OH	OPERATOR LICENSE NUMBER		OFFENSE CHARGED 4511.202	LOCAL CODE <input type="checkbox"/>	OFFENSE DESCRIPTION OPERATING VEHICLE WITHOUT REASONABLE CONTROL		CITATION NUMBER OHP231594031020190759		
OL CLASS 4	ENDORSEMENTS SELECT UP TO 2 <input type="checkbox"/> <input type="checkbox"/>	RESTRICTION: SELECT UP TO 3 <input type="checkbox"/> 3 <input type="checkbox"/> <input type="checkbox"/>	DRIVER DISTRACTED BY 1	ALCOHOL / DRUG SUSPECTED <input type="checkbox"/> ALCOHOL <input type="checkbox"/> MARIJUANA <input type="checkbox"/> OTHER DRUG		CONDITION 5	ALCOHOL TEST STATUS TYPE VALUE STATUS TYPE RESULT SELECT UP TO 4		DRUG TEST(S) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
INJURIES		SEATING POSITION	AIR BAG	OL CLASS	OL RESTRICTON(S)	DRIVER DISTRACTION		TEST STATUS	
1 - FATAL 2 - SUSPECTED SERIOUS INJURY 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY		1 - FRONT SEAT - LEFT SIDE (MOTORCYCLE DRIVER) 2 - FRONT SEAT - MIDDLE 3 - FRONT SEAT - RIGHT SIDE 4 - SECOND SEAT - LEFT SIDE  (MOTORCYCLE PASSENGER) 5 - SECOND SEAT - MIDDLE 6 - SECOND SEAT - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 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	1 - NOT-DEPLOYED 2 - DEPLOYED-FRONT 3 - DEPLOYED-SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE	1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO IS 'D') 5 - M/C MOPEO ONLY 6 - NO VALID OL	1 - ALCOHOL INTERLOCK DEVICE 2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES 4 - FARM WAIVER 5 - EXCEPT CLASS A BUS 6 - EXCEPT CLASS A AND 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	1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION DEVICE (TESTING, 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		1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	
INJURED TAKE BY 1 - NOT TRANSPORTED/ TREATED AT SCENE 2 - EMS 3 - POLICE 9 - OTHER/UNKNOWN			EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE	OL ENDORSEMENT H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE AND TRIPLE TRAILERS X - TANKER / HAZMAT		ALCOHOL TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER			
SAFETY EQUIPMENT 1 - NONE USED 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED 4 - SHOULDER AND 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			TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS	GENDER F - FEMALE M - MALE U - 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		DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 5 - OTHER	
								DRUG TEST RESULT(S) 1 - AMPHETAMINES 2 - BARBITURATES 3 - BENZODIAZEPINES 4 - CANNABINOID 5 - COCAINE 6 - OPIATES / OPIOIDS 7 - OTHER 8 - NEGATIVE RESULTS	

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