



MEMO

To: Vaughn Wilson, District Deputy Director
From: Vicki Shawger, Court of Claims Coordinator *Vicki*
Date: March 14, 2011
Subject: Court of Claims Case 2011-03332; Paul Risner, Co-Admr. v. ODOT, D-09
\$25,000.00

Troy Huff, HMA

Transmitted herewith is a copy of the above-styled Complaint. It is requested this Complaint be thoroughly investigated and **ONE** copy of your report of investigation, together with any supporting data, be returned to Vicki Shawger, 1st Floor. It is necessary that this information be furnished by **April 4, 2011**.

It is imperative that all facts regarding the situation be furnished and that all documents, records and other data supporting the investigation report be attached to the explanatory transmittal letter in order that the Attorney General's Court of Claims Defense Section, or this office, can properly defend the State. *A recommendation from the district would be helpful.*

It is requested, further, that any documents having to do with a "**maintenance**" claim, include, but not limited to, Straight Line Diagram with milepost identified, MMS printout 6-months from date of incident, complaint files, telephone logs, radio logs or a CIMS printout 6-months from date of the incident. *Any kind of highlighting needs to be done in yellow.*

For "**construction**" matters, please include contractor name, address, project number, plans, daily work reports and any other pertinent data. These documents need to be "flagged" and retained for use in preparing the defense of the lawsuit. This retention request may exceed the normal retention schedules established for documents such as those enumerated here. Notification of final disposition of the case will be furnished through the Quarterly Report of Action on Court Claims Cases. Documents that were retained may return to the normal retention and disposition schedule.

All documents and any copies thereof with regard to the investigation of the Complaint shall be treated as confidential and shall not be released to others without first contacting the undersigned.

If the Complaint involves a motor vehicle accident, and said accident report is not attached hereto, it will be forwarded upon receipt by this office.

Attachment

c: ODOT Auditor 11-164
File



Court of Claims of Ohio

The Ohio Judicial Center
65 South Front Street, Third Floor
Columbus, OH 43215
614.387.9800 or 1.800.824.8263
www.cco.state.oh.us

SUMMONS

PAUL RISNER, Co-Admr., et al.

Plaintiffs

v.

OHIO DEPARTMENT OF
TRANSPORTATION

Defendant

Case No. 2011-03332

Judge Joseph T. Clark

RECEIVED

MAR 10 2011

ODOT - DISTRICT 9
DISTRICT DEPUTY DIRECTOR

To the following:

Ohio Department of Transportation
District 9
650 Eastern Avenue
Chillicothe, Ohio 45601

You have been named as a defendant in a complaint filed in this court (copy attached) by:

Paul Risner, Co-Administrator of the
Estate of Amber Risner
179 Hill Drive
Jasper, Ohio 45642

Catherine Risner, Co-Administrator of the
Estate of Amber Risner
1812 Pennington Road
Waverly, Ohio 45690

The counsel of record is:

Douglas J. Blue
471 East Broad Street, Suite 1100
Columbus, Ohio 43215

You shall appear and defend both by serving a copy of your pleading upon plaintiffs' attorney, otherwise upon plaintiffs, within 28 days from the date upon which service of this summons was received, and by filing the original of your pleading with this court within three days of the aforementioned date of service upon plaintiffs.

Date: March 8, 2011

MILES C. DURFEY
CLERK, COURT OF CLAIMS OF OHIO

By: 
Assistant Clerk

IN THE COURT OF CLAIMS OF OHIO

PAUL RISNER, as Co-Administrator
of the Estate of AMBER RISNER,
a Deceased Minor,
179 Hill Drive
Jasper, OH 45642

and

CATHERINE RISNER, as Co-Administrator
of the Estate of AMBER RISNER,
a Deceased Minor,
1812 Pennington Rd.
Waverly, OH 45690,

Plaintiffs,

v.

OHIO DEPARTMENT
OF TRANSPORTATION, DISTRICT 9
650 Eastern Ave.
Chillicothe, OH 45601
and

JOHN DOE,
any businesses, corporations, entities,
and/or individuals, names and
addresses, unknown, that/who were
responsible for the design and/or
maintenance of the intersection at
S.R. 32 and Germany Road,
Pike County, Ohio,

Defendants.

2011-03332

Case No.

Judge
JUDGE JOSEPH T. CLARK

FILED
COURT OF CLAIMS
OF OHIO
2011 MAR -4 PM 12:12

COMPLAINT

**First Claim: CLAIM OF PLAINTIFFS PAUL RISNER AND CATHERINE
RISNER AGAINST DEFENDANTS FOR WRONGFUL DEATH**

1. Plaintiffs Paul Risner and Catherine Risner are the duly appointed Co-Administrators of the Estate of Amber N. Risner, Deceased. They bring this action pursuant to

Ohio Revised Code §2125.01 and §2125.02 for the exclusive benefit of the next of kin of Amber N. Risner, Deceased. A copy of the Entry Appointing Fiduciary and Letters of authority are attached hereto as Exhibit A.

2. At all times relevant herein, decedent Amber N. Risner, Plaintiff Paul Risner and Plaintiff Catherine Risner was/are a resident(s) of the State of Ohio.

3. At all times relevant herein, Defendant Ohio Department of Transportation, District 9 and/or John Doe(s) was/were employees of acting under color of law in their official capacity as the Ohio Department of Transportation and under color of statutes, ordinances, regulations, policies, customs and usage of the State of Ohio. The State of Ohio is liable under the doctrine of respondeat superior.

4. On or about Saturday, September 12, 2009, at approximately 12:21 a.m. deceased, Amber N. Risner was an occupant in a vehicle driven by Ashley Royster, travelling northbound on Germany Road, at the intersection of Germany Road and State Route 32 in Pike County, Ohio.

5. The intersection of Germany Road and State Route 32 is guided by a stop sign on Germany Road as well as a "flashing" red light facing Germany Road. The intersection has a "flashing" yellow light for State Route 32 where it intersects with Germany Road. See Diagram in Accident Report, attached as Exhibit B.

6. Ms. Royster approached the intersection of Germany Road and State Route 32, intending to cross all four (4) lanes of State Route 32 to continue travelling northbound on Germany Road. See Diagram, attached as Exhibit B.

7. As Ms. Royster crossed the intersection, she was unable to see the transport truck driven by Robert Boring. Mr. Boring's truck collided with Ms. Royster's vehicle as she passed through the intersection, killing decedent, Amber N. Risner

8. Defendants Ohio Department of Transportation, District 9 and/or John Doe(s), alone and/or by and through their agents, actual or ostensible, were negligent in installing and/or using a "flashing" red and yellow light at the intersection of Germany Road and State Route 32 rather than a more appropriate traffic control device, such as a three-light "red, yellow and green" traffic control light, proximately causing the death of deceased, Amber N. Risner.

9. Defendants Ohio Department of Transportation, District 9 and/or John Doe(s), alone and/or by and through their agents, actual or ostensible, also were negligent in designing, operating and/or maintaining an intersection where the drivers could not properly see the oncoming traffic when travelling through the intersection of Germany Road and State Route 32, proximately causing the death of deceased, Amber N. Risner.

10. Defendants Ohio Department of Transportation, District 9 and/or John Doe(s), alone and/or by and through their agents, actual or ostensible, also were negligent in designing, installing and/or maintaining an intersection that was unsafe for the motoring public, proximately causing the death of deceased, Amber N. Risner.

11. As a further direct and proximate result of the conduct of the Defendants, the next-of-kin of the decedent have suffered pecuniary loss and non-pecuniary loss, including but not limited to the loss of support, services, consortium, care assistance, attention, protection, advice, guidance, counsel, instruction, training and education of the decedent, and further lost prospective inheritance and suffered mental anguish.

12. As a further direct and proximate result of the conduct of the Defendants, the

next-of-kin of the decedent incurred reasonable burial and funeral expenses.

Second Claim: CLAIM OF PLAINTIFFS PAUL RISNER AND CATHERINE RISNER AGAINST DEFENDANTS FOR SURVIVORSHIP

13. As Co-Administrators of the Estate of deceased, Amber N. Risner, Plaintiffs Paul Risner and Catherine Risner bring this action for the injuries and damages to deceased, Amber N. Risner, prior to her wrongful death for the benefit of the Estate of Amber N. Risner, and incorporates all of the allegations contained in paragraphs one (1) through twelve (13) as if they were fully rewritten herein.

14. As a result of the conduct of the Defendants, deceased, Amber N. Risner, experienced much pain, suffering and mental anguish until the time of her wrongful death.

WHEREFORE, Plaintiffs Paul Risner and Catherine Risner, as Co-Administrators of the Estate of Amber N. Risner, demand judgment against the Defendants, jointly and severally, on the wrongful death action, in an amount in excess of Twenty-Five Thousand Dollars (\$25,000), plus interest, attorney's fees, the costs of this action and all other relief this Court deems just and equitable.

WHEREFORE, Plaintiffs Paul Risner and Catherine Risner, as Co-Administrators of the Estate of Amber N. Risner, demand judgment against the Defendants, jointly and severally, on the survivorship action, in an amount in excess of Twenty-Five Thousand (\$25,000), plus interest, attorney's fees, the costs of this action and all other relief that this Court deems just and equitable.

Respectfully submitted,

BLUE+ BLUE, LLC

A handwritten signature in black ink, appearing to read 'D. J. Blue', written over a horizontal line.

Douglas J. Blue (0058570)

471 East Broad Street, Suite 1100

Columbus, OH 43215

douglas@blueandbluelaw.com

Ph: (614) 224-6969

Fax: (614) 224-6999

Attorney for Plaintiffs

PROBATE COURT OF PIKE

COUNTY, OHIO

FILED
FEB 08 2011
JEROME D. CATANZARO
PROBATE JUDGE DECEASED

ESTATE OF Amber N. Risner

CASE NO. 20101035

ENTRY APPOINTING FIDUCIARY; LETTERS OF AUTHORITY
(For Executors and all Administrators)

Name and title of fiduciarys Paul Risner and Catherine Risner

On hearing in open court the application of the above fiduciary for authority to administer decedent's estate, the Court finds that:

Decedent died [check one of the following] testate intestate on September 12, 2009

domiciled in Pike County, Ohio

[Check one of the following] - Bond is dispensed with by the Will - Bond is dispensed with by law

Applicant has executed and filed an appropriate bond, which is approved by the Court; and

Applicant is a suitable and competent person to execute the trust.

The Court therefore appoints applicant as such fiduciary, with the power conferred by law to administer fully decedent's estate. This entry of appointment constitutes the fiduciary's letters of authority.

February 8, 2011
Date

[Signature]
Judge

CERTIFICATE OF APPOINTMENT AND INCUMBENCY

The above document is a true copy of the original kept by me as custodian of the records of this Court. It constitutes the appointment and letters of authority of the named fiduciary, who is qualified and acting in such capacity.

PLAINTIFF'S EXHIBIT
A

By [Signature] Deputy Clerk

Date February 8, 2011

[Seal]



Court of Claims of Ohio

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65 South Front Street, Third Floor
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614.387.9800 or 1.800.824.8263
www.cco.state.oh.us

2

PAUL RISNER, Co-Admr., et al.

Plaintiffs

v.

OHIO DEPARTMENT OF
TRANSPORTATION

Defendant

Case No. 2011-03332

Judge Joseph T. Clark

PRE-SCREENING ENTRY

FILED
COURT OF CLAIMS
OF OHIO
2011 MAR -8 AM 10:01

This case came to the court's attention in accordance with L.C.C.R. 15(B).

Under R.C. 2743.02(E), only state agencies and instrumentalities can be defendants in original actions in the Court of Claims. Accordingly, John Doe is DISMISSED as a party in this action. The court sua sponte amends the caption of this case to read as set out above.

The court hereby ORDERS that plaintiffs' demand for attorney fees be STRICKEN since in the absence of statutory authority attorney fees cannot be awarded by the Court of Claims. *Drain v. Kosydar* (July 31, 1979), Franklin App. No. 79AP-78.

JOSEPH T. CLARK
Judge

cc:

Douglas J. Blue
471 East Broad Street, Suite 1100
Columbus, Ohio 43215

Ohio Department of Transportation
District 9
650 Eastern Avenue
Chillicothe, Ohio 45601

Paula Luna Paoletti
Senior Deputy Attorney General
Court of Claims Defense Section
150 East Gay Street, 18th Floor
Columbus, Ohio 43215-3130

TRAFFIC CRASH REPORT



LOCAL REPORT # **71-1155-66** CRASH SEVERITY **1** PRIVATE PROPERTY HIT/SWIP **1** PHOTOS TAKEN OH-2 OH-3 OH-1F OTHER

1 FATAL 3 FDO 2 INJURY 4 UNKNOWN 1 NOT HIT/SWIP 2 SOLVED 2 UNSOLVED

N.C.I.C. # **0HP71** REPORTING AGENCY **Ohio State Highway Patrol** # UNITS **02** UNIT ERROR **02** 98 = ANIMAL 99 = UNKNOWN DATE OF CRASH **09122009**

TIME OF CRASH **0021** DAY OF WEEK **SAT** CITY VILLAGE TWP NAME (OF CITY, VILLAGE OR TOWNSHIP) **Seal** COUNTY # **66** LATITUDE **39:03:10.70** LONGITUDE **82:56:15.17**

CRASH OCCURRED ON PREFIX **SR0032** CRASH LOCATION TYPE LOC **3** TYPE LOCATION POINT USED 1 IN MED STREET 2 NUMBERED ROUTE 3 NUMBERED STREET LOCAL INFORMATION

AT / REFERENCE DIST REFERENCE OR PREFIX REFERENCE **SR0220** REF POINT **02** REFERENCE POINT USED 01 STATE LINE 02 INTERSECTION 2 STREETS 03 COUNTY LINE 04 HOUSE NUMBER 05 TOWNSHIP BOUNDARY 06 MILE POST 07 CORPORATION LIMIT 08 PLCKE NAME W/O REFERENCE 09 DRIVEWAY 10 STREET OR ROUTE W/O REFERENCE

A UNIT # **01** # OF OCC. **01** NAME (LAST, FIRST, MIDDLE) **Boring, Robert G**

ADDRESS (STREET, CITY, STATE, ZIP CODE) **41815 Gibson Ridge RD, Albany, Ohio 45710**

SOCIAL SECURITY NUMBER **11041952** AGE **56** SEX **M** HOME PHONE # **(740)698-0323** WORK PHONE #

DL STATE **OH** DL # **RQ455095** LP STATE **OH** LP # **PUM3949** INJURED TAKEN BY **2** 1 NONE 4 OTHER 2 EMS 3 UNKNOWN 3 POLICE TRANSPORTED BY **Pike County E.M.S.** INJURED TAKEN TO **Pike Community Hospital**

OWNER NAME (IF SAME, WRITE "SAME") **Montgomery, Trucking Company** ADDRESS (STREET, CITY, STATE, ZIP CODE) **P.O. Box 21, Wellston, Ohio 45692**

YEAR **2005** MAKE **FREI** MODEL **Columbia** COLOR **WHI/WHI** INSURANCE COMPANY **Great West Casualty** TOWING SERVICE OWNER PHONE # **(740)384-2138**

OFFENSE CHARGED OFFENSE DESCRIPTION CITATION # LOCAL CODE? IF YES

Motorist/Non-Motorist

B UNIT # **02** # OF OCC. **03** NAME (LAST, FIRST, MIDDLE) **Royster, Ashley N**

ADDRESS (STREET, CITY, STATE, ZIP CODE) **110 First ST, Unit 3, Beaver, Ohio 45613**

SOCIAL SECURITY NUMBER **11061991** AGE **17** SEX **F** HOME PHONE # **(740)289-4833** WORK PHONE #

DL STATE **OH** DL # **TJ711704** LP STATE **OH** LP # **EUK4218** INJURED TAKEN BY **2** 1 NONE 4 OTHER 2 EMS 3 UNKNOWN 3 POLICE TRANSPORTED BY **Pike County E.M.S.** INJURED TAKEN TO **Pike Community Hospital**

OWNER NAME (IF SAME, WRITE "SAME") **SAME** ADDRESS (STREET, CITY, STATE, ZIP CODE)

YEAR **1997** MAKE **CHEV** MODEL **Blazer** COLOR **MAR/MAR** INSURANCE COMPANY **Farley** TOWING SERVICE **Bobst** OWNER PHONE #

OFFENSE CHARGED OFFENSE DESCRIPTION CITATION # LOCAL CODE? IF YES

Occupant

C UNIT # **02** NAME (LAST, FIRST, MIDDLE) **Thompson, Kayla D** HOME PHONE # **(740)493-3444** DATE OF BIRTH **08311992** AGE **17** SEX **F**

ADDRESS (STREET, CITY, STATE, ZIP CODE) **3452 Left Fork RD, Lucasville, Ohio 45648**

INJURED TAKEN BY **2** 1 NONE 4 OTHER 2 EMS 3 UNKNOWN 3 POLICE TRANSPORTED BY **Pike County E.M.S.** INJURED TAKEN TO **Pike Community Hospital**

D UNIT # **02** NAME (LAST, FIRST, MIDDLE) **Risner, Amber N** HOME PHONE # **(740)289-4115** DATE OF BIRTH **03111992** AGE **17** SEX **F**

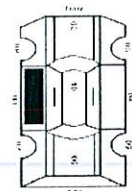
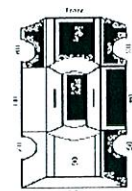
ADDRESS (STREET, CITY, STATE, ZIP CODE) **179 Hill RD, Jasper, Ohio 45642**

INJURED TAKEN BY **2** 1 NONE 4 OTHER 2 EMS 3 UNKNOWN 3 POLICE TRANSPORTED BY **Pike County E.M.S.** INJURED TAKEN TO **Pike Community Hospital**

SEATING POSITION 01 FRONT - LEFT (MC DRIVER) 02 FRONT - MIDDLE 03 FRONT - RIGHT 04 SECOND - LEFT (MC PASS) 05 SECOND - MIDDLE 06 SECOND - RIGHT 07 THIRD - LEFT (MC PASSENGER/SIDE CH) 08 THIRD - MIDDLE 09 THIRD - RIGHT 10 SLEEPER SECTION OF CH 11 ENCLOSED CHRGD+REF 12 UNENCLOSED CHRGD+REF 13 TRAILING UNIT 14 EXTERIOR 15 OTHER 16 NON-MOTORIST 17 UNKNOWN	SAFETY EQUIPMENT 01 NONE USED 02 SHOULDER BELT ONLY 03 LAF BELT ONLY 04 SHOULDER/LAF BELT 05 CHILD SAFETY SEAT 06 MC HELMET USED 07 USE UNKNOWN 08 NONE USED 09 HELMET USED 10 PROTECTIVE PADS 11 REFLECTIVE CLOTHING 12 LIGHTING 13 OTHER 14 UNKNOWN	AIR BAG 5 1 NOT DEPLOYED 2 DEPLOYED-FRONT 3 DEPLOYED-SIDE 4 DEPLOYED-BOTH FRONT/SIDE 5 NOT APPLICABLE 6 UNKNOWN	AIR BAG SWITCH 1 1 NOT PRESENT 2 IN ON POSITION 3 IN OFF POSITION 4 UNKNOWN	EJECTION 1 1 NOT EJECTED 2 TOTALLY EJECTED 3 PARTIALLY EJECTED 4 NOT APPLICABLE 5 UNKNOWN	TRAPPED 1 1 NOT TRAPPED 2 EXTRACTED BY MECHANICAL MEANS 3 FREED BY NON-MECHANICAL MEANS 4 UNKNOWN	INJURIES 2 2 1 NO INJURY 2 POSSIBLE 3 NON-INCAPACITATING 3 INCAPACITATING 3 FATAL INJURY 5 UNKNOWN
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TOP COPY - GCS BOTTOM COPY - AGENCY

Narrative

Unit 1 was westbound on SR 32. Unit 2 was northbound from Germany Road crossing SR 32 to go north on SR 220. **Unit 2 struck unit on the drivers side.**

MANNER OF COLLISION OR IMPACT

6

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

SCHOOL BUS RELATED

1

1 NO
 2 YES, DIRECTLY INVOLVED
 3 YES, INDIRECTLY INVOLVED
 4 UNKNOWN

WORK ZONE RELATED

1

1 NO
 2 YES
 3 UNKNOWN

TYPE OF WORK ZONE

1 LANE CLOSURE
 2 LANE SHIFT/CROSSOVER
 3 WORK ON SHOULDER OR MEDIAN
 4 INTERMITTENT/ALTERNATING WORK
 5 OTHER

LOCATION OF CRASH IN WORK ZONE

1 BEFORE FIRST WORK ZONE WARNING SIGN
 2 AT LANE WARNING AREA
 3 TRANSITION AREA
 4 ACTIVITY AREA

WORKERS PRESENT

1 NO
 2 YES
 3 UNKNOWN

WEATHER

0 1

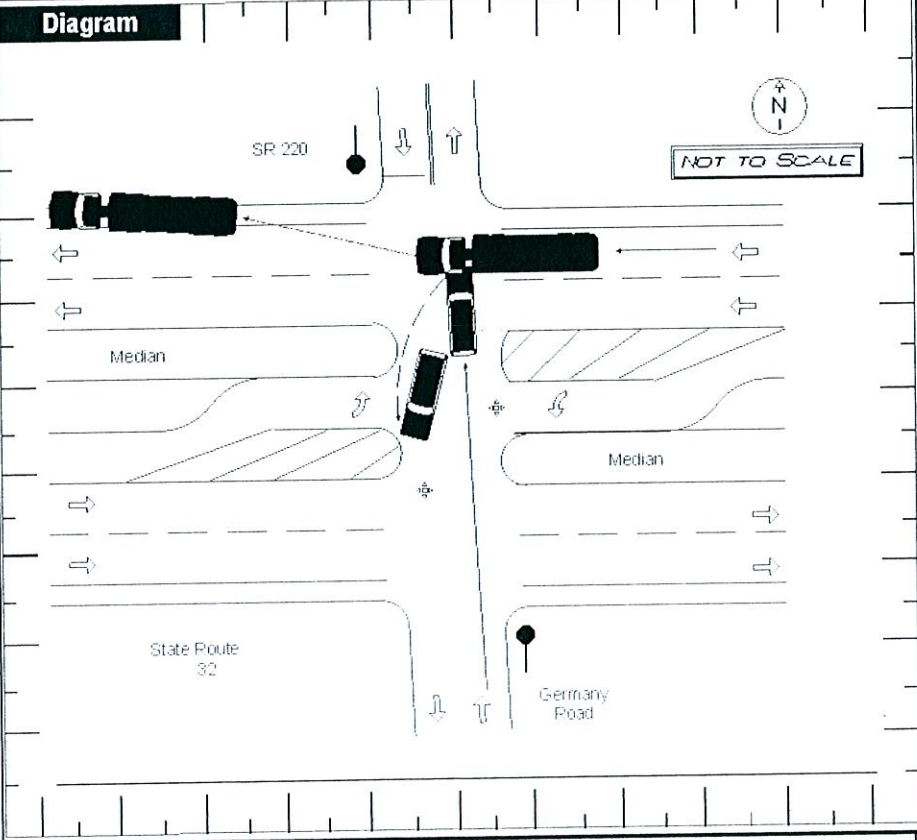
01 CLEAR
 02 CLOUDY
 03 FOG, SMOG, SMOKE
 04 RAIN
 05 SLEET, HAIL (FREEZING RAIN DRIZZLE)
 06 SNOW
 07 SEVERE CROSSWINDS
 08 BLOWING SAND, SOIL, DIRT, SNOW
 09 OTHER
 10 UNKNOWN

LIGHT CONDITIONS

4

PRIMARY SECONDARY

1 DAYLIGHT
 2 DAWN
 3 DUSK
 4 DARK - LIGHTED SIGNALS
 5 DARK - NOT LIGHTED
 6 DARK - UNKNOWN LIGHTING
 7 GLARE
 8 OTHER
 9 UNKNOWN



Truck/Bus

UNIT # **0 1**

THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING:
 A TRUCK (MOTOR VEHICLE) WITH A GVWR MORE THAN 10,000 POUNDS, OR
 A TRUCK (MOTOR VEHICLE) WITH HAZARDOUS MATERIALS PLACARD, OR
 A BUS DESIGNED FOR AT LEAST 8 PERSONS, INCLUDING DRIVER.

AND

THE CRASH RESULTED IN ONE OR MORE OF THE FOLLOWING:
 A FATALITY, OR
 AN INJURY REQUIRING TRANSPORTATION TO IMMEDIATE MEDICAL TREATMENT, OR
 AT LEAST ONE VEHICLE HAD TO BE TOWED DUE TO DISABLING DAMAGE OR REQUIRED INTERVENING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER.

COMPANY (FROM SHIPPING PAPER) **Montgomery Trucking Company** COMPANY PHONE **(740)384-2138**

ADDRESS (STREET, CITY, ST, ZIP CODE) **P.O. Box 21, Wellston, Ohio 45692**

US DOT 00093019	ICC MC 42111	FUCO	TRAILER LP ST OH	TRAILER LP YEAR 2003	TRAILER LP # TMJ5252	PLACARD #	# DIA		
CARGO BODY TYPE 0 3	01 NOT APPLICABLE 02 BUSHINGS INCLUDING DRIVER 03 WAREHOUSE BOX 04 GRAIN/HIP GRAVEL 05 POLE 06 CARGO TANK 07 FLATEED 08 DUMP 09 CONCRETE MIXER 10 AUTO TRANSPORTER 11 GAS REG/W/FLUE 12 OTHER 13 UNKNOWN	WEIGHT (GVWR) 3	1 LESS THAN 10,000 2 10,001 - 20,000 3 MORE THAN 20,000	COLL CLASS 1	1 CLASS A 2 CLASS B 3 CLASS C 4 CLASS D 5 CLASS E	HAZARDOUS MATERIALS PLACARD 1	1 NO 2 YES 3 UNKNOWN	HAZARDOUS MATERIALS RELEASED 3	1 NO 2 YES 3 NOT APPLICABLE 4 UNKNOWN

Police Action

DATE CRASH REPORTED: **0 9 1 2 2 0 0 9**

TIME REC CALL: **0 0 2 1**

DISPATCH: **0 0 2 1**

ARRIVED: **0 0 3 7**

CLEARED: **0 3 5 2**

OTHER: **1 8 0**

TOTAL MINUTES: **0 3 9 1**

OFFICER'S NAME: **Diehl, Nicholas**

BADGE #: **1 7 3 5**

CHECKED BY: **JDLOTT**

DATE REPORT FILED: **0 9 2 1 2 0 0 9**

REPORT TAKEN BY: **1** (1 POLICE AGENCY, 2 MOTORIST)

REPORT TAKEN AT: **1** (1 SCENE, 2 STATION, 3 OTHER)

SUPPLEMENTARY:

LOCAL REPORT #: **7 1 - 1 1 5 5 - 6 6**

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (REV. 1/82)

LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY Ohio State Highway Patrol	DATE OF ACCIDENT 09/12/2009
IN COUNTY OF Pike	ACCIDENT LOCATION SR0032	

Road conditions: Dry pavement, Lighted.

Weather conditions: Dark, Clear, Cool.

RP: Northeast apex of SR 32 & SR 220

Point Zero: North side berm of SR 32

RP to Point zero: 70 feet

Measuring device used: Wheel

Notes: From north berm of SR 32 it was 22 feet 7 inches south to first lane, also 34 feet to start of second lane.

All measurements were taken from north side berm of SR 32.

Sergeant John Howard U# 1692 crash reconstructionist was on scene and assisted with OH-2, a second OH-2 will be completed by Sgt Howa and will be included with investigation.

It was 110 feet 7 inches to stop bar of Germany road from the north side berm of SR 32.

AE	FE	Description
A. 7 feet 2 inches west	18 feet 3 inches south	Start of left skids U# 1
B. 15 feet 4 inches west	11 feet 8 inches south	Start of right skids U # 1
C. 70 feet 10 inches west	18 feet 2 inches south	Start of right front skid U# 2
D. 101 feet 10 inches west	15 feet 6 inches south	Clothing, Body fluid, & body matter
E. 109 feet 8 inches west	42 feet 10 inches south	Right rear tire U# 2
F. 109 feet 8 inches west	52 feet 9 inches south	Right front tire U# 2
G. 122 feet 1 inch west	16 feet 6 inches south	End of body matter
H. 132 feet 2 inches west	17 feet 3 inches south	Body disengagement
I. 183 feet 6 inches west	10 feet 6 inches south	Center of left duals over edge line
J. 211 feet 4 inches west	18 feet 0 inches south	Center mass of body
K. 240 feet 0 inches west	0	Right trailer duals off roadway
L. 255 feet 8 inches west	0	Right tractor duals off roadway
M. 299 feet 0 inches west	2 feet 5 inches south	Left rear trailer axle U# 1
N. 302 feet 5 inches west	3 feet 0 inches south	Left rear tractor axle U# 1
O. 337 feet 10 inches west	5 feet 10 inches south	Left rear Tractor axle U# 1
P. 341 feet 9 inches west	6 feet 0 inches south	Left tractor axle U# 1
Q. 359 feet 7 inches west	8 feet 3 inches south	Left front tractor axle U# 1
R. 318 feet 5 inches west	0	Axles 1, 2, & 3 return to pavement

Timeline

0021

Advised by dispatch of a 2 vehicle serious injury crash on SR 32 at SR 220.

0022

Troopers Aaron Morgan U 1785, Nicholas Diehl U 1735, Delmer Hurd U 1827, & Sergeant Douglas Debord U 0983 en route to scene.

0028

Pike County Sheriffs Deputy J. Savage arrived on scene and advised that there was a fatality involved.

0030

Sergeant Debord advised to contact Chillicothe post commander Lee Darden U 1366 of incident.

0030

Trooper Hurd first on

OFFICER'S SIGNATURE	PAUSE LINE
	1735

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (REV. 1/82)

LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY Ohio State Highway Patrol	DATE OF ACCIDENT 09/12/2009
IN COUNTY OF Pike	ACCIDENT LOCATION SR0032	

scene.
0034
Message left with Lieutenant Darden regarding crash.
0037
Investigating Trooper Nicholas Diehl arrives on scene.
0037
Sergeant Bill Menendez U 1381 commercial enforcement was contacted and was advised that we need a commercial inspector to respond to scene.
0042
Trooper Aaron Morgan arrived on scene. Photos, Vehicle inventory, Damage analysis.
0047
Pike County Coroner requested to be notified.
0052
Staff Lieutenant Scott Borden U 1103 on call District Duty Officer was advised.
0100
Sergeant Douglas Debord arrives on scene.
0103
Pike County Coroner Dr. Kessler enroute to scene.
0104
Sergeant John Howard U 1692, crash reconstructionist, arrived on scene.
0130
Motor Carrier Enforcement Unit Joe Elcess U 3285 on scene and begins inspection of U 1- report attached.
0133
Coroner on scene. Pronounced deceased at 0027
0134
Father of deceased Paul Risner arrived on scene and was advised by Trooper Diehl of situation.
0135
Trooper Phillip Rutherford U 1907 arrived at Pike Community Hospital to obtain witness statements from driver of U# 2 and passenger from U
0154
Urine sample obtained from the driver of U# 1 at scene.
0210
Pike County E.M.S. left scene with deceased enroute to Pike Community hospital.
0246
Statement and blood sample obtained from driver Ashley Royster by Trooper Rutherford.
0247
Driver of U# 1 transported to Pike Community Hospital for evaluation by Pike County E.M.S.
0324
All units clear from scene.

Phillip Fin and Edward Casteel, owners of Montgomery trucking were on scene.

Damage analysis:

Unit 1:
Contact damage to left side of power unit. Induced damage to trailer.

Unit 2:
Contact damage to center, right front and rear, also contact damage to right side and top.

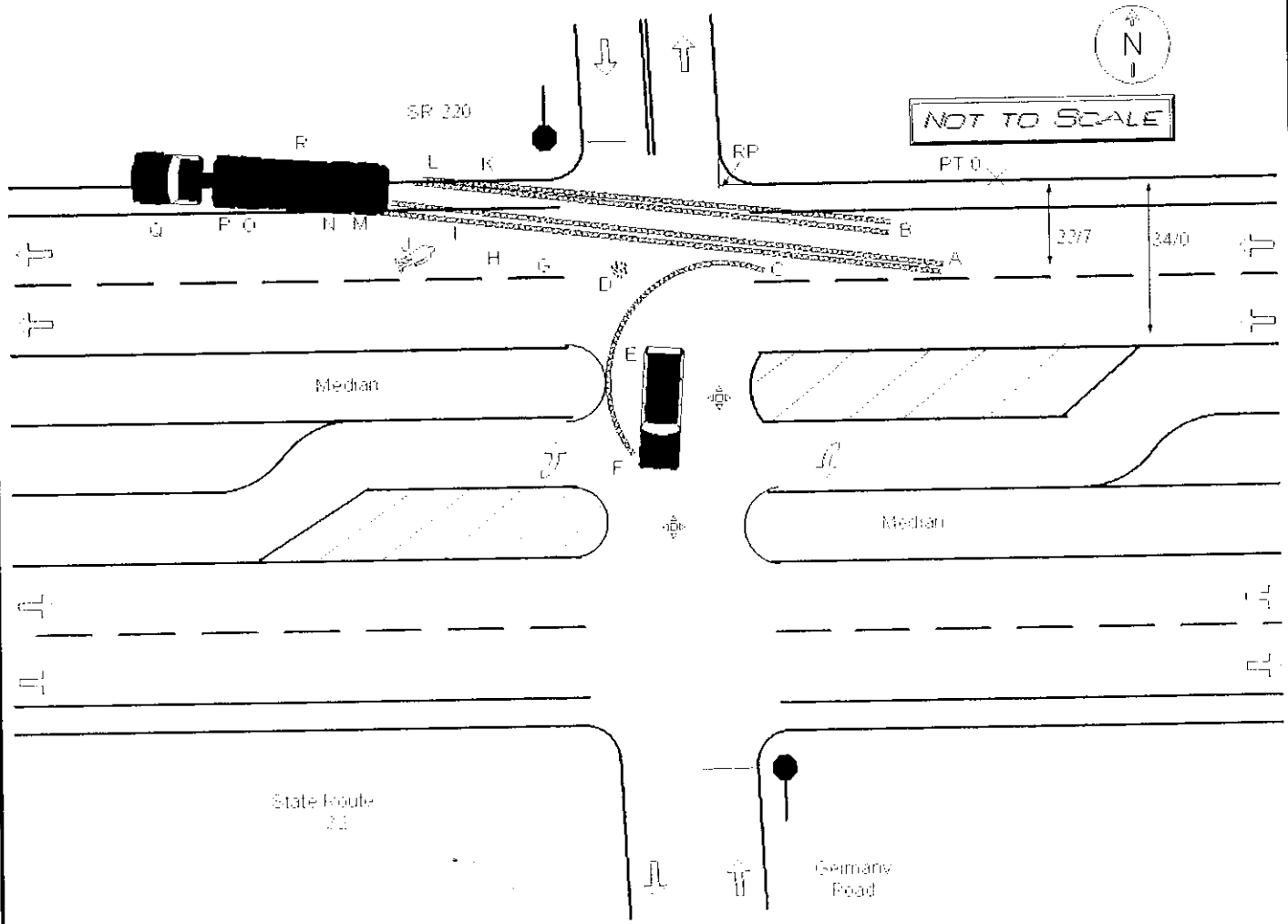
The deceased, right front passenger Amber Risner was ejected from U# 2 and then became entangled in U# 1'S trailer axles before coming to rest in the westbound lane of SR 32. Inspection of the safety belt for the right front passenger appeared to be in the unused position.

OFFICERS SIGNATURE	BADGE NO. 1735
--------------------	-------------------

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (REV. 1/82)

LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY Ohio State Highway Patrol	DATE OF ACCIDENT 09/12/2009
IN COUNTY OF Pike	ACCIDENT LOCATION SR0032	



DATE OF REPORT	OFFICER ID
	1735



OHIO TRAFFIC CRASH REPORT
DIAGRAM / NARRATIVE CONTINUATION

LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY OHIO STATE HIGHWAY PATROL	DATE OF CRASH		
IN COUNTY OF Pike	CRASH LOCATION SR 32 at MP 20	M09	D12	Y 2009

Tire analysis for unit 2 -
Tire size P235-75-R15

Right front - 8/32, 7/32, 9/32 - off rim
Left front - 9/32, 9/32, 9/32
Both front tires wer American L/T Prospectors

Right rear - 9/32, 8/32, 9/32
Left rear - 10/32, 9/32, 10/32
Rear tires were Goodyear Wrangler Radials

Trooper Aaron Morgan took the measurements of the tires.

The blood and urine samples that were obtained from the drivers were sent to the OSHP Crime Lab for analysis. The results will be supplemented upon receipt.

Copy of crash report will be forwarded to the Pike County Prosecutor Rob Junk for review.

Unit 2 rotated counterclockwise and struck Unit 1's trailer after intial impact, this is when the front seat passenger Amber Risner was ejected.

OFFICER'S SIGNATURE X Trooper N. C. Diehl	BADGE NUMBER 1735
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LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH M 7 D 12 Y 09
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, ROBERT G BORDO HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

TPR N.C. ODELL AT SCENCE 0048
OFFICER'S NAME LOCATION

Q. WHAT HAPPENED?
 A. PICKED UP LOAD AT General Mills Wellston OH.
 DRIVING WESTBOUND ON US HIGHWAY 32
 WHEN APPROACHING GERMANY RD INTERSECTION
 CAR TRAVELED NORTHBOUND FROM MARATHON
 STATION DROVE INTO THE SIDE OF THE
 TRUCK I WAS DRIVING
 SEEING CAR ENTERING INTERSECTION CAUSED
 ME TO BRAKE.
 CAR SHOWED NO SIGNS OF TRYING TO STOP

Q. ARE YOU INJURED?
 A. NO. NOT TO MY KNOWLEDGE

Q. HOW FAST WERE YOU DRIVING?
 A. 55 MPH

Q. WHAT ARE YOU LOADED WITH?
 A. FROZEN FOODS

Q. WHERE WERE YOU COMING FROM?
 A. GENERAL MILLS PLANT IN WELLSTON

ADDRESS OF WITNESS 40715 COBBEN RIDGE RD ALBANY OH 45710	PHONE 740-698-0323
SIGNATURE OF WITNESS X <u>Robert G Bordo</u>	OFFICER'S SIGNATURE X <u>TPR N.C. ODELL</u>



LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH M 9 D 12 Y 09
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FOR LOCAL USE ONLY -- DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, ROBERT G BORZING HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

TJR MC DERMID AT SCENE 0048
OFFICER'S NAME LOCATION

Q. WHERE WERE YOU TRAVELING?
 A. WEST MEMPHIS ARKANSAS.

Q. HOW FAR BACK FROM THE INTERSECTION DID YOU SEE THEM?
 A. RIGHT BEFORE.

Q. COULD YOU TELL IF THEY STOPPED AT THE STOP SIGN OF COUNTRY RD & SR 32?
 A. I COULD NOT TELL.

Q. DID THEY STOP ON THE MADDE OF THE INTERSECTION BEFORE CROSSING?
 A. NO.

Q. DID THEY HAVE THEIR HEADLIGHTS ON?
 A. YES.

Q. WERE ALL YOUR LIGHTS FUNCTIONAL?
 A. YES.

Q. DID YOU DO A PRE-TRIP INSPECTION OF THE VEHICLE?
 A. YES.

Q. WERE THERE ANY PROBLEMS?
 A. NO.

ADDRESS OF WITNESS 41815 CASSIDON RIDGE RD AUSTIN OH 45170	PHONE 740 608-0323
SIGNATURE OF WITNESS X <u>Robert G Borzing</u>	OFFICER'S SIGNATURE X <u>TJR Mc Dermid</u>



LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH M 9 D 12 Y 09
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, ROBERT G BORENG HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

TIM N.C. DETH AT SCENE 0048
OFFICER'S NAME LOCATION

Q. WHAT DID YOU DO AFTER THE CRASH?
 A. I CONTACTED MY EMPLOYER.

Q. WAS YOUR SAFETY BELT ON?
 A. YES.

Q. DID YOU SEE THE FLASHING LIGHTS?
 A. YES.

Q. ARE YOU ON ANY PRESCRIPTION MEDICATION?
 A. NOT AT THIS TIME I WAS ON NAPROXEN.

Q. HOW OFTEN DO YOU TRAVEL THIS ROUTE?
 A. AT LEAST 3 TIMES A WEEK.

Q. DID YOU DECREASE YOUR SPEED BEFORE COMING INTO THE INTERSECTION?
 A. YES.

Q. IS THAT NORMAL FOR YOU TO DO THAT AS MUCH AS YOU FREQUENT THE AREA?
 A. YES.

Q. ANYTHING ELSE THAT YOU WOULD LIKE TO ADD?
 A. NO.

ADDRESS OF WITNESS 41875 GORSON RIDGE RD AUBURN OH 43070	PHONE 740 698-0323
SIGNATURE OF WITNESS X <u>Robert G Boring</u>	OFFICER'S SIGNATURE X <u>TIM N.C. DETH</u>



LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH M 09 D 12 Y 05
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, ASHLEY ROYSTER HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

TRM PM RUTHERFORD U-1907 AT PIKE COMMUNITY HOSPITAL
OFFICER'S NAME LOCATION

Q WHAT HAPPENED?

A WE WENT TO THE GERMANY ROAD GAS STATION. WE WENT LEFT ONTO GERMANY. I WAS GOING STRAIGHT ACROSS SR 32 TO GO ONTO SR 220. I LOOKED LEFT AND RIGHT AND DIDN'T SEE ANYTHING COMING. I REMEMBER SEEING AMBER BESIDE ME AND KAYLA IN THE BACK SEAT. I REMEMBER THE AIR BAG GOING OFF AND THEN AMBER WASN'T THERE.

Q WHAT TIME DID YOU CRASH?

A I DON'T REMEMBER

Q WHERE WERE YOU COMING FROM BEFORE GOING TO THE GAS STATION?

A MY HOUSE IN BEAVER

Q DID YOU COME TO A COMPLETE STOP AT THE FLASHING LIGHT?

A YES

Q WHERE WERE YOU GOING?

A LAKE WAITE

Q WHY?

A WE WERE GOING FISHING

Q WERE YOU SUPPOSED TO MEET ANYONE THERE?

A YES BUT IM NOT SURE WHO

ADDRESS OF WITNESS 110 FIRST ST APT #3 BEAVER OH 45613	PHONE 746-289-4533
SIGNATURE OF WITNESS X Ashley Royster	OFFICER'S SIGNATURE X TRM PM Rutherford



TRAFFIC CRASH WITNESS STATEMENT

OH-3 2

LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH MO 9 D 12 Y 08
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, ASHLEY N. ROYSTER HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

TJR PM RUTHERFORD U-1907 AT PIKE COMMUNITY HOSPITAL
OFFICER'S NAME LOCATION

Q WHAT TIME WERE YOU SUPPOSED TO MEET THERE?

A WE REALLY DIDN'T HAVE A TIME. WE WERE GOING STRAIGHT THERE.

Q WHAT DID YOU DO EARLIER IN THE EVENING?

A WE WENT TO A FOOTBALL GAME AT PEKETON

Q WHAT TIME DID YOU LEAVE THE GAME?

A 10:30 OR 11 PM

Q WITH WHOM DID YOU LEAVE THE GAME?

A AMBER AND KAYLA

Q WHERE DID YOU GO?

A WE WENT TO AMBER'S HOUSE AND ASKED HER DAD IF SHE COULD STAY THE NIGHT AND THEN WE WENT TO MY HOUSE.

Q DID YOU CONSUME ANY ALCOHOLIC BEVERAGES TONIGHT?

A NO

Q DID YOU SMOKE ANY MARIJUANA?

A NO

Q DID YOU TAKE ANY ILLEGAL NARCOTICS?

A NO

Q ARE YOU CURRENTLY TAKING ANY PRESCRIBED MEDICATION?

A ONE MARIJIN AND A RUTEROL/FLOVENT.

ADDRESS OF WITNESS 110 FIRST ST APT #3 PEPPER OH 45613	PHONE 710 255-4833
SIGNATURE OF WITNESS X Ashley Royster	OFFICER'S SIGNATURE X TJR PM [Signature]



LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH M 09 D 12 Y 09
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, ASHLEY N. ROYSTER PRINTED HEREBY MAKE THIS VOLUNTARY STATEMENT TO
T/PL PM RUTHERFORD U-1907 OFFICER'S NAME AT PIKE COMMUNITY HOSPITAL LOCATION

Q WHICH SIDE DID YOU GET HIT?

A THE RIGHT PASSENGER SIDE

Q DID KAYLA SAY ANYTHING TO YOU?

A YES

Q WHAT DID SHE SAY?

A SHE KEPT ~~SAID~~ TELLING ME TO CALL HER GRANDMA

Q WHAT DID YOU DO?

A KAYLA AND I LOOKED EACH OTHER OVER AND DIDNT SEE ANYTHING WRONG. THEN KAYLA WENT RUNNING TOWARDS AMBER BUT I HELD HER BACK.

Q DID YOU HAVE YOUR SEATBELT ON?

A YES

Q DID AMBER?

A I DONT KNOW. I TOLD HER TO.

Q DID KAYLA?

A I DONT KNOW.

Q ARE YOU WILLING, WITH YOUR PARENTS PERMISSION, TO PROVIDE A BLOOD SAMPLE?

A YES.

Q ANYTHING YOU WANT TO ADD TO YOUR STATEMENT

A NOT THAT I CAN THINK OF

ADDRESS OF WITNESS 110 FIRST ST APT #3 BEAVER OH 45613	PHONE 740-289-4833
SIGNATURE OF WITNESS X Ashley Royster	OFFICER'S SIGNATURE X T/PL PM Rutherford

LOCAL REPORT NUMBER 71-1155-666	REPORTING AGENCY STATE HIGHWAY PATROL	DATE OF CRASH M 05 / D 12 / Y 09
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FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, ASHLEY N ROYSTER HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

TPR PM RUTHERFORD U-1907 AT PEKE COMMUNITY HOSPITAL
OFFICER'S NAME LOCATION

Q WERE YOUR PARENTS PRESENT WITH YOU WHEN YOU PROVIDED THIS STATEMENT?

A YES

Q WERE THEY PRESENT IN THE ROOM WHEN THE BLOOD SAMPLE WAS OBTAINED?

A YES

ADDRESS OF WITNESS 110 FIRST ST APT #3 BEAVER OH 45613	PHONE 740 285 4833
SIGNATURE OF WITNESS X Ashley Royster	OFFICER'S SIGNATURE X TPR PM Rtp

DRIVER/VEHICLE EXAMINATION REPORT

71-1155-66

09/12/2009



OHIO STATE HIGHWAY PATROL
Motor Carrier Enforcement
District 9 Jackson
TELEPHONE: (740) 286-9845
Return certification to agency listed below

Report Number: OH3285005187
Inspection Date: 09/12/2009
Start Time: 01:30 AM End Time: 02:54 AM
Inspection Level: II - Walk-Around
HM Inspection Type: None

MONTGOMERY TRUCKING COMPANY
P O BOX 21
WELLSTON, OH 45692-0021
USDOT#: 00093019 Phone#: (740)384-2138
MC/MX#: 141791 Fax#:
State#:
Location: ROADSIDE
Highway: SR32 AT SR220
County: PIKE, OH

Driver: BORING, ROBERT G
License#: RQ455095 State: OH
Date of Birth: 11/04/1952
CoDriver:
License#: State:
Date of Birth:

MilePost: Shipper: GENERAL MILLS
Origin: WELLSTON, OHIO Bill of Lading: 31705018
Destination: WEST MEMPHIS, AR. Cargo: REFRIGERATED FOODS

VEHICLE IDENTIFICATION

Table with columns: Unit, Type, Make, Year, State, Plate #, Company #, VIN, GVWR, CVSA #, CVSA Issued #, OOS Sticker. Contains two rows of vehicle data.

BRAKE ADJUSTMENTS: No Brake Measurements Required For Level 2

VIOLATIONS: No Violations Were Discovered.

HazMat: No HM Transported

Placard: No Cargo Tank:

Special Checks: Post Crash

State Information:

FMCSA Credentials Verified(Y/N): N; CDL Verified (Y/N): Y, FMCSA OOS Order Issued(Y/N): N; For-Hire Carrier: Y Reason Code: CRAS.
Fatalities (Y/N): Y, Crash Report #: 71-1155-66 Supplemental Report #: N, Paper Report #: N, Driver Address: 41815 GIBSON RIDGE,
Driver City: ALBANY, Driver State: OH; Driver Zip: 45710; Photos Taken (Y/N): N, Orig Seal Placed by(C/D/S/U): N; Co-Investigator #: 1735;

All violations of the FHMR and FNDNR or Title 49 of the Ohio Revised Code will be reviewed by the PUCO's Transportation Department to determine whether civil forfeitures should be assessed against any responsible parties in accordance with the penalty provisions of Title 49 of the Ohio Revised Code. If civil forfeitures are assessed, you will receive a separate notice by mail. These penalties may be assessed to motor carriers, shippers, and/or drivers.

ATTENTION DRIVER: This report must be sent to the motor carrier whose name appears at the top of this inspection report within 24 hours. If the inspection report cannot be delivered within 24 hours the driver must mail or fax the inspection report to the motor carrier.

ATTENTION MOTOR CARRIER: The motor carrier must examine this report and repair all the vehicle defects/violations noted above. AND: The motor carrier must sign the Certification of Repairs below and return the signed form to: Public Utilities Commission of Ohio-TASD, 180 E. Broad St., Columbus, Oh, 43215-3792. If the motor carrier fails to return the signed form within 15 days of the inspection. If "No Violations Were Discovered" then you do not need to return this report. Failure to return this report with the required information will result in penalties of up to \$500.

MOTOR CARRIER CERTIFICATION OF COMPLETED REPAIRS: The undersigned certifies that all violations noted on this report have been corrected and action taken to assure compliance with the Federal Motor Carrier Safety & Hazardous Materials Regulations insofar as they are applicable to motor carriers and drivers. A false certification of repairs is required to be prosecuted with penalties up to \$10,000.

Signature of Motor Carrier: X Title: Date:

Report Prepared By: J.A. ELCESS

Badge #: 3285

Copy Received By: ROBERT BORING

Page 1 of 1



OH3285005187

TRAFFIC CRASH REPORT



LOCAL REPORT # 7 1 - 1 1 5 5 - 6 6	CRASH SEVERITY 1 FATAL 3 FDD 2 INJURY 4 UNKNOWN 1	PRIVATE PROPERTY IF YES	HITS/UP 1 NOT HITS/UP 2 SOLVED 3 UNCLOSED 1	PHOTOS TAKEN OH-2 OH-3 OH-1F OTHER X X X X
REPORTING AGENCY OHP71 Ohio State Highway Patrol	# UNITS 02	UNIT ERROR 02	DATE OF CRASH 09122009	
TIME OF CRASH 0021	DAY OF WEEK SAT	CITY VILLAGE TWP Seal	COUNTY # 66	LATITUDE 39:03:10.70
CRASH OCCURRED ON PREFIX CRASH LOCATION SR0032		TYPE LOCATION POINT USED 1 R.MED STREET 3 NUMBERED ROUTE 2 NUMBERED STREET		LOCAL INFORMATION
AT / REFERENCE DIST REFERENCE OR PREFIX REFERENCE AT SR0220		REFERENCE POINT USED 01 STATE LINE 02 INTERSECTION 2 STREETS 03 COUNTY LINE		#1 HOUSE NUMBER #2 PLACE NAME W/O REFERENCE #3 TOWNSHIP BOUNDARY #4 DIVERGENT #5 MILE POST #6 STREET OR ROUTE W/O REFERENCE #7 CORPORATION LIMIT

Motorist/Non-Motorist

UNIT # A 01	# OF OCC. 01	NAME (LAST, FIRST, MIDDLE) Boring, Robert G
ADDRESS (STREET, CITY, STATE, ZIP CODE) 41815 Gibson Ridge RD, Albany, Ohio 45710		
SOCIAL SECURITY NUMBER 11041952	DATE OF BIRTH 11041952	AGE 56
SEX M	HOME PHONE # (740)698-0323	WORK PHONE #
DL STATE OH	DL # RQ455095	LP STATE LP # OH PUM3949
INJURED TAKEN BY 2	1 NONE 4 OTHER 2 EMS 3 UNKNOWN POLICE	TRANSPORTED BY Pike County E.M.S.
OWNER NAME (IF SAME, WRITE "SAME") Montgomery, Trucking Company		ADDRESS (STREET, CITY, STATE, ZIP CODE) P.O. Box 21, Wellston, Ohio 45692
YEAR 2005	MAKE FREI	MODEL Columbia
COLOR WHI/WHI	INSURANCE COMPANY Great West Casualty	TOWING SERVICE OWNER PHONE # (740)384-2138
OFFENSE NUMBER	OFFENSE DESCRIPTION	CITATION #

UNIT # B 02	# OF OCC. 03	NAME (LAST, FIRST, MIDDLE) Royster, Ashley N
ADDRESS (STREET, CITY, STATE, ZIP CODE) 110 First ST, Unit 3, Beaver, Ohio 45613		
SOCIAL SECURITY NUMBER 11061991	DATE OF BIRTH 11061991	AGE 17
SEX F	HOME PHONE # (740)289-4833	WORK PHONE #
DL STATE OH	DL # TJ711704	LP STATE LP # OH EUK4218
INJURED TAKEN BY 2	1 NONE 4 OTHER 2 EMS 3 UNKNOWN POLICE	TRANSPORTED BY Pike County E.M.S.
OWNER NAME (IF SAME, WRITE "SAME") SAME		ADDRESS (STREET, CITY, STATE, ZIP CODE) SAME
YEAR 1997	MAKE CHEV	MODEL Blazer
COLOR MAR/MAR	INSURANCE COMPANY Farley	TOWING SERVICE Bobst
OFFENSE NUMBER	OFFENSE DESCRIPTION	CITATION #

Occupant

UNIT # C 02	# OF OCC. 02	NAME (LAST, FIRST, MIDDLE) Thompson, Kayla D
ADDRESS (STREET, CITY, STATE, ZIP CODE) 3452 Left Fork RD, Lucasville, Ohio 45648		
SOCIAL SECURITY NUMBER 08311992	DATE OF BIRTH 08311992	AGE 17
SEX F	HOME PHONE # (740)493-3444	WORK PHONE #
DL STATE OH	DL # 2	LP STATE LP # OH
INJURED TAKEN BY 2	1 NONE 4 OTHER 2 EMS 3 UNKNOWN POLICE	TRANSPORTED BY Pike County E.M.S.
OWNER NAME (IF SAME, WRITE "SAME") SAME		ADDRESS (STREET, CITY, STATE, ZIP CODE) SAME
YEAR 1992	MAKE Chevrolet	MODEL Blazer
COLOR Black	INSURANCE COMPANY Farley	TOWING SERVICE Bobst
OFFENSE NUMBER	OFFENSE DESCRIPTION	CITATION #

UNIT # D 02	# OF OCC. 02	NAME (LAST, FIRST, MIDDLE) Risner, Amber N
ADDRESS (STREET, CITY, STATE, ZIP CODE) 179 Hill RD, Jasper, Ohio 45642		
SOCIAL SECURITY NUMBER 03111992	DATE OF BIRTH 03111992	AGE 17
SEX F	HOME PHONE # (740)289-4115	WORK PHONE #
DL STATE OH	DL # 2	LP STATE LP # OH
INJURED TAKEN BY 2	1 NONE 4 OTHER 2 EMS 3 UNKNOWN POLICE	TRANSPORTED BY Pike County E.M.S.
OWNER NAME (IF SAME, WRITE "SAME") SAME		ADDRESS (STREET, CITY, STATE, ZIP CODE) SAME
YEAR 1992	MAKE Chevrolet	MODEL Blazer
COLOR Black	INSURANCE COMPANY Farley	TOWING SERVICE Bobst
OFFENSE NUMBER	OFFENSE DESCRIPTION	CITATION #

SEATING POSITION 01 FRONT - LEFT (DRIVER) 01 FRONT - MIDDLE 01 FRONT - RIGHT 04 SECOND - LEFT (MC PASSENGER) 04 SECOND - MIDDLE 04 SECOND - RIGHT 04 THIRD - LEFT 04 MC PASSENGER (CAB) 04 THIRD - MIDDLE 04 THIRD - RIGHT 04 SLEEPER SEAT (NON-CAP) 04 ENCLOSED CAB (TRUCK) 04 TRUCK UNIT 04 OTHER 04 UNKNOWN	SAFETY EQUIPMENT 04 MOTORIST 04 NONE USED 04 SHOULDER BELT ONLY 04 LAP BELT ONLY 04 SHOULDER BELT ONLY 04 CHILD-PROTECT SEAT 04 HELMET USED 04 USE FRONTS 04 NONE USED 04 HELMET USED 04 PROTECTIVE ROPS 04 REFLECTIVE CLOTHING 04 OTHER 04 UNKNOWN	AIR BAG 5 NOT DEPLOYED 2 DEPLOYED FRONT 2 DEPLOYED SIDE 2 DEPLOYED SOUTH FRONT SIDE 5 NOT APPLICABLE 5 UNKNOWN	AIR BAG SWITCH 1 NOT PRESENT 2 IN ON POSITION 2 IN OFF POSITION 2 UNKNOWN	EJECTION 1 NOT EJECTED 1 PARTIALLY EJECTED 1 NOT APPLICABLE 1 UNKNOWN	TRAPPED 1 NOT TRAPPED 1 EJECTED BY MECHANICAL MEANS 1 FREED BY NON-MECH MEANS 1 UNKNOWN	INJURIES 2 NO INJURY 2 POSSIBLE INJURY 3 INCAPACITATING INJURY 3 FATAL INJURY 3 UNKNOWN
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<p>UNIT NUMBERS</p> <p>0 1 A 0 2 B</p> <p>NON-MOTORIST LOCATION</p> <p>01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NO CROSSWALK 03 NON-INTERSECTION CROSSWALK 04 DRIVEWAY ACCESS CROSSWALK 05 IN ROADWAY 06 NOT IN ROADWAY 07 MEDIAN (BUT NOT SHOULDER) 08 ISLAND 09 SHOULDER 10 SIDEWALK 11 WITHIN 10 FEET OF ROADWAY (NOT SHOULDER, MEDIAN, SIDEWALK, ISLAND) 12 BEYOND 10 FEET OF ROADWAY (WITHIN TRAFFICWAY) 13 OUTSIDE TRAFFICWAY 14 SHARED PATHS OR TRAILS 15 UNKNOWN</p>	<p>DAMAGE AREA</p> <p>DAMAGE AREA</p> <p>MOST DAMAGED AREA</p> <p>0 8 A 0 3 B</p>	<p>PREDASH ACTIONS</p> <p>MOTORIST</p> <p>01 MOVEMENT ESSENTIALLY STRAIGHT AHEAD 02 BRACING 03 CHANGING LANES 04 OVERTAKING/ PASSING 05 TURNING RIGHT 06 TURNING LEFT 07 MAKING U-TURN 08 ENTERING TRAFFIC LANE 09 LEAVING TRAFFIC LANE 10 PARKED 11 STOPPING/ STOPPED IN TRAFFIC 12 OFFERLESS 13 OTHER 14 UNKNOWN</p> <p>NON-MOTORIST</p> <p>01 ENTERING/ PASSING IN SPECIFIED LOCATION 02 WALKING, RUNNING, JOGGING, PLAYING, CYCLING 03 WORKING 04 PUSHING VEHICLE 05 APPROACHING/ LEAVING VEHICLE 06 PLAYING/ WORKING ON VEHICLE 07 STANDING 08 OTHER 09 UNKNOWN</p>	<p>SEQUENCE OF EVENTS</p> <p>A E</p> <p>2 0 2 0</p> <p>0 8</p> <p>NON-COLLISION</p> <p>01 OVERTURN/ ROLL-OVER 02 FIRE/ EXPLOSION 03 IMMERSED 04 RIGID BUMP 05 CAR/ EQUIPMENT LOSS/ SHIFT 06 EQUIPMENT FAILURE 07 SEPARATION OF UNITS 08 RAN OFF ROAD/ RIGHT 09 RAN OFF ROAD/ LEFT 10 CROSS-MEDIAN CENTERLINE 11 DOWNHILL RUNAWAY 12 OTHER NON-COLLISION 13 UNKNOWN NON-COLLISION 14 COLLISION W/ OTHER VEHICLE OR OBJECT (NOT FILED)</p>	<p>POSTED SPEED</p> <p>5 5 A 5 5 B</p> <p>TRAFFIC CONTROL</p> <p>1 2 A 0 2 B</p> <p>01 NO CONTROLS 02 STOP SIGN 03 YIELD SIGN 04 TRAFFIC SIGNAL 05 TRAFFIC FLASHERS 06 SCHOOL ZONE 07 RAILROAD CROSSBUCKS 08 RAILROAD FLASHERS 09 RAILROAD GATES 10 CONSTRUCTION BARRICADE 11 POLICE OFFICER 12 PAVEMENT MARKINGS 13 CROSSWALK LINES 14 WALKWAY/ TRAIL SIGNAL 15 TRAFFIC CONTROL OFFICE/ DEPARTMENT MISSING/ OCCUPIED 16 OTHER</p>	<p>DRUG TEST STATUS</p> <p>4 A 4 B</p> <p>1 NONE 2 TEST REFUSED 3 TEST OPEN, CONTAMINATED 4 SAMPLE UNUSABLE 5 TEST OPEN, RESULTS UNKNOWN 6 UNKNOWN</p> <p>DRUG TEST TYPE</p> <p>3 A 2 B</p> <p>1 NONE 2 BLOOD 3 URINE 4 OTHER</p> <p>DRUG TEST RESULT</p> <p>1 1 A 1 1 B</p> <p>1 NONE 2 MAXIMUM 3 COCAINE 4 OPiates 5 AMPHETAMINES 6 PCP 7 OTHER 8 UNKNOWN AT TIME OF REPORTING</p>
<p>TYPE OF UNIT</p> <p>1 3 A 0 6 B</p> <p>MOTORIST</p> <p>01 SUB-COMPACT 02 COMPACT 03 MID SIZE 04 FULL SIZE 05 MINIVAN 06 SPORT UTILITY VEHICLE 07 PICK-UP 08 PANEL VAN 09 SINGLE UNIT TRUCK - TRAILER, 6 TIRES 10 SINGLE UNIT TRUCK - 3/4 AXLES 11 TRUCK/ TRAILER 12 TRUCK, TRACTOR/ EDETRAIL 13 TRACTOR/ SEMI-TRAILER 14 TRACTOR/ TRAILER SHORT 15 TRACTOR/ TRAILER LONG 16 FIFTH WHEEL OR CONVENTIONAL 17 TRACTOR/ TRAILER 18 MOTORCYCLE 19 MOTORCYCLE 20 SCHOOL BUS 21 CHURCH BUS 22 PUBLIC BUS 23 OTHER BUS 24 POLICE VEHICLE 25 FIRE TRUCK 26 AMBULANCE/ RESCUE 27 TAXI 28 MOTOR HOME 29 TRAIN 30 RAILROAD VEHICLE 31 RAILROAD EQUIPMENT 32 SNOWMOBILE 33 CONSTRUCTION EQUIPMENT 34 ALL OTHERS</p> <p>NON-MOTORIST</p> <p>35 ANIMAL WARDER 36 ANIMAL WRECKER 37 SKATEBOARD 38 PEDESTRIAN 39 SKATER 40 OTHER NON-MOTORIST 41 UNKNOWN</p>	<p>POINT OF IMPACT</p> <p>0 8 A 0 3 B</p> <p>01 NONE 02 CENTER FRONT 03 RIGHT FRONT 04 RIGHT SIDE 05 RIGHT REAR 06 REAR CENTER 07 LEFT REAR 08 LEFT SIDE 09 LEFT FRONT 10 TOP AND WINDOWS 11 UNDER A WHEEL 12 UNDER A TRAILER 13 TOTAL COLLISION AREA 14 OTHER 15 UNKNOWN</p> <p>ACTION</p> <p>4 A 3 B</p> <p>1 NONE CONTACT 2 NON-COLLISION 3 BRACING 4 STRUCK 5 BOTH STRIKING AND STRUCK 6 UNKNOWN</p>	<p>CONTRIBUTING CIRCUMSTANCES</p> <p>0 1 A 0 2 B</p> <p>MOTORIST</p> <p>01 NONE 02 FAILURE TO YIELD 03 RAN RED LIGHT OR STOP SIGN 04 EXCEEDED SPEED LIMIT 05 UNSAFE SPEED 06 IMPROPER TURN 07 LEFT OF CENTER 08 FOLLOWED TOO CLOSE/ BEHIND 09 IMPROPER LANE CHANGING/ OVERTAKING/ PASSING/ IMPROPER PASSING 10 IMPROPER TRACKING 11 W/ FLEET/ STRAY FROM PARKED POSITION 12 STOPPED OR PARKED ILLEGALLY 13 OPERATING VEHICLE INERRATIC, RECKLESS, CARELESS, NEGLECTFUL OR AGGRESSIVE MANNER 14 OVERTURNING/ ROLL-OVER DUE TO WIND, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC. 15 FAILURE TO CONTROL 16 MISSING DESTINATION 17 DRIVER INATTENTION 18 FATIGUE/ SLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/ WILTING/ COLLAPSE 21 OTHER WIND/ SEPARATION 22 UNKNOWN 23 UNKNOWN</p> <p>NON-MOTORIST</p> <p>24 IMPROPER CROSSING 25 BRACING 26 WIND AND/OR PILE DRIFT IN ROADWAY 27 FAILURE TO YIELD/ RIGHT OF WAY 28 NOT VISIBLE (NO PLOTTING) 29 INATTENTIVE 30 FAILURE TO OBEY TRAFFIC SIGNALS, SIGNALS, OR OFFICER 31 WRONG SIDE OF ROAD 32 OTHER 33 UNKNOWN</p>	<p>COLLISION TYPE</p> <p>01 FRONT-TO-REAR 02 FRONT-TO-REAR 03 FRONT-TO-REAR 04 FRONT-TO-REAR 05 FRONT-TO-REAR 06 FRONT-TO-REAR 07 FRONT-TO-REAR 08 FRONT-TO-REAR 09 FRONT-TO-REAR 10 FRONT-TO-REAR 11 FRONT-TO-REAR 12 FRONT-TO-REAR 13 FRONT-TO-REAR 14 FRONT-TO-REAR 15 FRONT-TO-REAR 16 FRONT-TO-REAR 17 FRONT-TO-REAR 18 FRONT-TO-REAR 19 FRONT-TO-REAR 20 FRONT-TO-REAR 21 FRONT-TO-REAR 22 FRONT-TO-REAR 23 FRONT-TO-REAR 24 FRONT-TO-REAR 25 FRONT-TO-REAR 26 FRONT-TO-REAR 27 FRONT-TO-REAR 28 FRONT-TO-REAR 29 FRONT-TO-REAR 30 FRONT-TO-REAR 31 FRONT-TO-REAR 32 FRONT-TO-REAR 33 FRONT-TO-REAR 34 FRONT-TO-REAR 35 FRONT-TO-REAR 36 FRONT-TO-REAR 37 FRONT-TO-REAR 38 FRONT-TO-REAR 39 FRONT-TO-REAR 40 FRONT-TO-REAR 41 FRONT-TO-REAR 42 FRONT-TO-REAR 43 FRONT-TO-REAR 44 FRONT-TO-REAR 45 FRONT-TO-REAR 46 FRONT-TO-REAR 47 FRONT-TO-REAR 48 FRONT-TO-REAR 49 FRONT-TO-REAR</p>	<p>DIRECTION</p> <p>FROM TO FROM TO</p> <p>3 4 A 2 1 B</p> <p>1 NORTH 2 SOUTH 3 EAST 4 WEST 5 NORTHEAST 6 NORTHWEST 7 SOUTHEAST 8 SOUTHWEST 9 UNKNOWN</p> <p>CONDITION</p> <p>1 1 A 1 B</p> <p>1 APPARENTLY NORMAL 2 PHYSICAL IMPAIRMENT 3 EMOTIONAL 4 ILLNESS 5 FELL/ ASLEEP, FRAINTED, FATIGUE, ETC. 6 UNDER THE INFLUENCE OF MEDICATION/ DRUG/ ALCOHOL 7 OTHER 8 UNKNOWN</p> <p>ALCOHOL SUSPECTED</p> <p>1 1 A 1 B</p> <p>1 NONE 2 YES - ALCOHOL SUSPECTED 3 YES - NOT MEASURED 4 YES - DRUGS COLLECTED 5 YES - ALCOHOL/ DRUGS SUSPECTED 6 UNKNOWN</p>	<p>TYPE OF INTERSECTION</p> <p>0 2</p> <p>01 NOT AN INTERSECTION 02 FOUR-WAY INTERSECTION 03 T-INTERSECTION 04 Y-INTERSECTION 05 TRAFFIC CIRCLE/ ROUNDABOUT 06 FIRE-FIGHTING CROSSING 07 ON RAMP 08 OFF RAMP 09 CROSSOVER 10 DRIVEWAY ACCESS 11 RAILROAD CROSSING 12 SHARED DRIVE PATHS OR TRAILS 13 UNKNOWN</p> <p>OCURRENCE</p> <p>1</p> <p>1 ON ROADWAY 2 ON SHOULDER 3 IN MEDIAN 4 ON OFFICER 5 ON GROUND 6 ON SIDE OF ROADWAY 7 UNKNOWN</p> <p>ROAD CONDITION</p> <p>2</p> <p>1 STRAIGHT LEVEL 2 STRAIGHT GRADE 3 CURVE LEVEL 4 CURVE GRADE</p> <p>ROAD CONDITION</p> <p>PRIMARY SECONDARY</p> <p>0 1</p>
<p>DAMAGE SCALE</p> <p>3 A 5 B</p> <p>1 NONE 2 NON-FUNCTIONAL DAMAGE 3 FUNCTIONAL DAMAGE 4 UNSEVERE DAMAGE 5 SEVERE 6 UNKNOWN</p>	<p>VEHICLE DEFECT</p> <p>CODE ONLY IF 19 SELECTED - PHONE</p> <p>01 TURN SIGNALS 02 HEADLAMPS 03 TAIL LAMPS 04 BRAKES 05 STEERING 06 TIRE TREAD/ AIR 07 WORN OR CRACKED TIRES 08 TRUCK EQUIPMENT DEFECTIVE 09 WORN/ CRACKED/ MISSING OR BROKEN 10 OTHER DEFECTS</p>	<p>VEHICLE DEFECT</p> <p>CODE ONLY IF 19 SELECTED - PHONE</p> <p>01 TURN SIGNALS 02 HEADLAMPS 03 TAIL LAMPS 04 BRAKES 05 STEERING 06 TIRE TREAD/ AIR 07 WORN OR CRACKED TIRES 08 TRUCK EQUIPMENT DEFECTIVE 09 WORN/ CRACKED/ MISSING OR BROKEN 10 OTHER DEFECTS</p>	<p>FIRST HARMFUL EVENT</p> <p>1 A 1 B</p> <p>OF THE SEQUENCE OF EVENTS - WHICH ONE IS THE FIRST HARMFUL EVENT (1-4)</p> <p>MOST HARMFUL EVENT</p> <p>1 A 1 B</p> <p>OF THE SEQUENCE OF EVENTS - WHICH ONE IS THE MOST HARMFUL EVENT (1-4)</p> <p>SPEED DETECTED</p> <p>1 A 1 B</p> <p>1 TESTED 2 ESTIMATED/ OBSERVED</p> <p>SPEED</p> <p>5 5 A 2 0 B</p>	<p>ALCOHOL TEST STATUS</p> <p>4 A 4 B</p> <p>1 NONE 2 TEST REFUSED 3 TEST OPEN, CONTAMINATED/ SAMPLE UNUSABLE 4 TEST OPEN, RESULTS UNKNOWN 5 TEST OPEN, RESULTS UNKNOWN 6 UNKNOWN</p> <p>ALCOHOL TEST TYPE</p> <p>3 A 2 B</p> <p>1 NONE 2 BLOOD 3 URINE 4 OTHER</p> <p>ALCOHOL TEST RESULT</p> <p>0 0 0 A 0 0 0 B</p>	<p>ALCOHOL TEST STATUS</p> <p>4 A 4 B</p> <p>1 NONE 2 TEST REFUSED 3 TEST OPEN, CONTAMINATED/ SAMPLE UNUSABLE 4 TEST OPEN, RESULTS UNKNOWN 5 TEST OPEN, RESULTS UNKNOWN 6 UNKNOWN</p> <p>ALCOHOL TEST TYPE</p> <p>3 A 2 B</p> <p>1 NONE 2 BLOOD 3 URINE 4 OTHER</p> <p>ALCOHOL TEST RESULT</p> <p>0 0 0 A 0 0 0 B</p> <p>LOCAL REPORT #</p> <p>X 7 1 - 1 1 5 5 - 6 6</p>

Narrative

Unit 1 was westbound on SR 32. Unit 2 was northbound from Germany Road crossing SR 32 to go north on SR 220. Unit 2 struck unit on the drivers side.

MANNER OF COLLISION OR IMPACT

6

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

WEATHER

0 1

- 01 CLEAR
- 02 CLOUDY
- 03 FOG, SMOG, SMOKE
- 04 RAIN
- 05 SLEET, HAIL, FREEZING RAIN OR ICE
- 06 SNOW
- 07 SEVERE CROSSWINDS
- 08 BLOWING SAND, SOIL, DIRT, SNOW
- 09 OTHER
- 10 UNKNOWN

LIGHT CONDITIONS

4

- 1 DAYLIGHT
- 2 DAWN
- 3 DUSK
- 4 DARK - LIGHTED ROADWAYS
- 5 DARK - NOT LIGHTED
- 6 DARK - UNKNOWN LIGHTING
- 7 CLARE
- 8 OTHER
- 9 UNKNOWN

SCHOOL BUS RELATED

1

- 1 NO
- 2 YES, DIRECTLY INVOLVED
- 3 YES, INDIRECTLY INVOLVED
- 4 UNKNOWN

WORK ZONE RELATED

1

- 1 NO
- 2 YES
- 3 UNKNOWN

TYPE OF WORK ZONE

- 1 LANE CLOSURE
- 2 LANE SHIFTER/OVERLAP
- 3 WORK ON SHOULDER OR MEDIAN
- 4 INTERMITTENT WORKING
- 5 OTHER

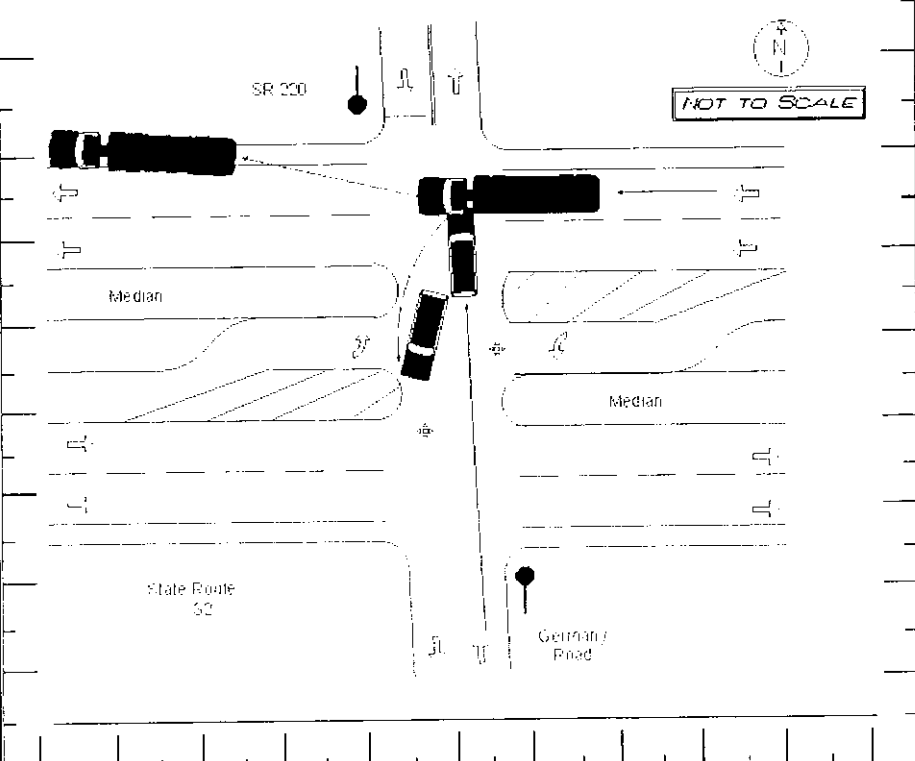
LOCATION OF CRASH IN WORK ZONE

- 1 BEFORE FIRST WORK ZONE
- 2 IN WORK ZONE
- 3 WORK ON SHOULDER OR MEDIAN
- 4 AFTER LAST WORK ZONE

WORKERS PRESENT

- 1 NO
- 2 YES
- 3 UNKNOWN

Diagram



Truck/Bus

UNIT #

0 1

THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING:
 A TRUCK OR BUS VEHICLE WITH A GVWR MORE THAN 10,000 POUNDS OR
 A TRUCK OR BUS VEHICLE WITH A LICENSE PLATE OR MATERIALS PLACARD FOR
 A USE DESIGNATED FOR AT LEAST 8 PERSONS, INCLUDING DRIVER

AND

THE CRASH RESULTED IN ONE OR MORE OF THE FOLLOWING:
 DEATH OR
 INJURY REQUIRING TREATMENT AT A HOSPITAL OR IMMEDIATE MEDICAL TREATMENT OR
 AT LEAST ONE VEHICLE WAS TOWED DUE TO CRASH DAMAGE OR REQUIRED INTERMEDIATE ASSISTANCE BEFORE BEING DRIVEN AWAY OR TOWED

COMPANY NAME: **Montgomery Trucking Company** COMPANY PHONE: **(740)384-2138**
 ADDRESS (STREET, CITY, ST, ZIP+4): **P.O. Box 21, Wellston, Ohio 45692**

US DOT 00093019	MC MC 42111	FUCC OH	TRAILER LP ST 2003	TRAILER LP YEAR TMJ5252	FLACARD #	# OF
CARGO BODY TYPE 0 3	01 NOT APPLICABLE 02 BUS/SHUTTLE INCLUDING DRIVER 03 TRAILER LOGS/TELEPHONE 04 DRIVING HIGHWAY VEHICLE 05 TANK 06 CASE/DRUM 07 FLATHEAD 08 DUMP 09 CONCRETE MIXER 10 AUTO TRANSPORTER 11 GARAGE/REFUSE 12 OTHER 13 UNKNOWN	WEIGHT (GVWR) 3	COL CLASS 1	HAZARDOUS MATERIALS PLACARD 1	HAZARDOUS MATERIALS RELEASED 3	

Police Action

DATE CRASH REPORTED 0 9 1 2 2 0 0 9	TIME REC. CALL 0 0 2 1	DISPATCH 0 0 2 1	ARRIVED 0 0 3 7	CLEARED 0 3 5 2	OTHER 1 8 0	TOTAL MINUTES 0 3 9 1
OFFICER'S NAME Diehl, Nicholas	DROVE # 1 7 3 5	CHECKED BY DADEBORD	STATE REPORT # 1 2 2 3 2 0 0 9			
REPORT TYPE # 1	REPORT TYPE - 1 POLICE ONLY 2 POLICE 3 OTHER	REPORT TYPE - 1 1	LOCAL REPORT # 7 1 - 1 1 5 5 - 6 6			

TOP COPY - ODFG BOTTOM COPY - OENR

Narrative

MANNER OF COLLISION OR IMPACT

- NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT
- HEAD ON
- HEAD ON
- HEAD TO REAR
- BACKING
- ANGLE
- SIDE SWIPE, SAME DIRECTION
- SIDE SWIPE, OPPOSITE DIRECTION
- UNKNOWN

WEATHER

- CLEAR
- CLOUDY
- FOG, SMOG, SMOKE
- RAIN
- SLEET, HAIL, FREEZING RAIN OR ICE
- SNOW
- SEVERE CROSSWINDS
- BLOWING SAND, SOIL, DIRT, SNOW
- OTHER
- UNKNOWN

LIGHT CONDITIONS

PRIMARY SECONDARY

- DAYLIGHT
- DAWN
- DUSK
- DAY - LIGHTED ROADWAY
- DAY - NOT LIGHTED
- NIGHT - UNKNOWN LIGHTING
- CURFEW
- OTHER
- UNKNOWN

SCHOOL BUS RELATED

- NO
- YES, DIRECTLY INVOLVED
- YES, INDIRECTLY INVOLVED
- UNKNOWN

WORK ZONE RELATED

- NO
- YES
- UNKNOWN

TYPE OF WORK ZONE

- LANE CLOSURE
- LANE SHOULDER CROSSOVER
- WORK ON SHOULDER OR MEDIAN
- INTERMITTENT WORKING ZONE
- OTHER

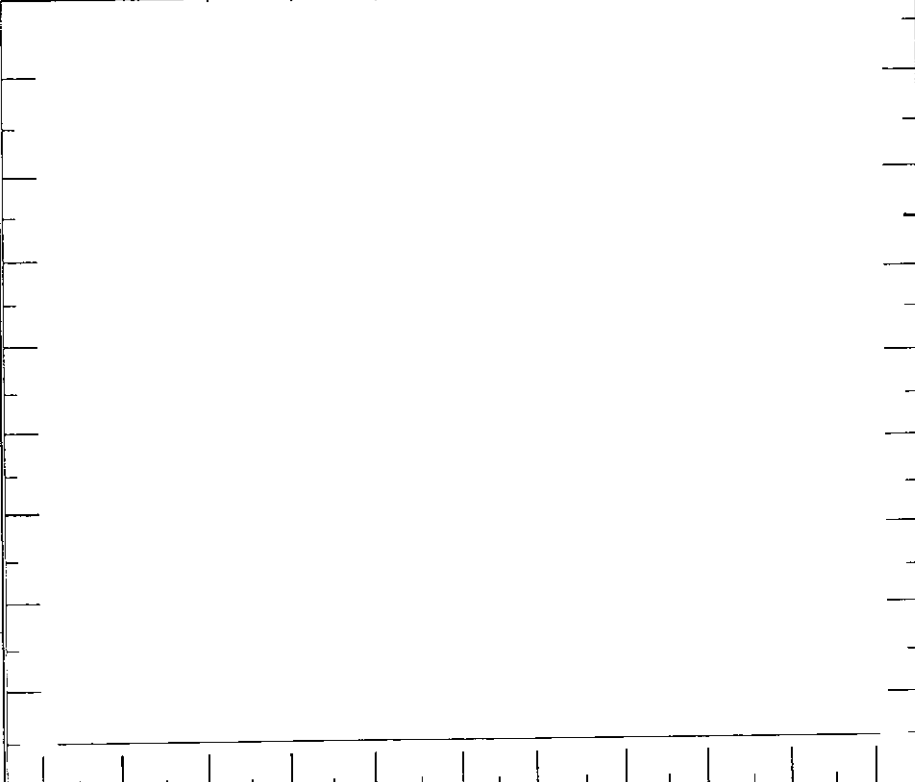
LOCATION OF CRASH IN WORK ZONE

- BEFORE FIRST WORK ZONE WHEN SIGNALING
- ENDING WORK ZONE
- TRANSITION AREA
- SUBSEQUENT

WORKERS PRESENT

- NO
- YES
- UNKNOWN

Diagram



Truck/Bus

UNIT #

THE CRASH INVOLVED (IN THE CASE OF THE FOLLOWING) A TRUCK (OR TRAILER) WITH A GVWR OF MORE THAN 10,000 POUNDS, OR A TRUCK (OR TRAILER) WITH A HIGHWAY MATERIALS FLUX (MFR) PLUS DEPOSIT AT LEAST EXCEEDS INCLUDING DRIVER

AND THE CRASH INVOLVED (IN THE CASE OF THE FOLLOWING) A TRUCK (OR TRAILER) REQUIRING TRANSPORTATION TO REPAIR OR RECEIVE MEDICAL TREATMENT, OR AT LEAST TWO VEHICLES TO BE TOWED TO A REPAIR OR REPAIR ASSISTIVE FACILITY OTHER THAN A DRIVER

COMPANY FROM SHIPPING PAPER

COMPANY FROM

ADDRESS (STREET, CITY, ST, ZIP CODE)

MS DOT	PLATE #	FUCO	TRAILER LP ST	TRAILER LP TLR	TRAILER LP #	PLACARD #	MOA
CARGO BODY TYPE	WEIGHT (LBS)	VEHICLE CLASS	HAZARDOUS MATERIALS FLUX	HAZARDOUS MATERIALS RELEASED			
<input type="checkbox"/> NOT APPLICABLE <input type="checkbox"/> BUS/IS INCLUDING TRAILER <input type="checkbox"/> SKID/LOCKED/HEEL <input type="checkbox"/> FORWARD/REAR	<input type="checkbox"/> 1 LESS THAN 10,000 <input type="checkbox"/> 2 10,001 - 20,000 <input type="checkbox"/> 3 MORE THAN 20,000	<input type="checkbox"/> CLASS 1 <input type="checkbox"/> CLASS 2 <input type="checkbox"/> CLASS 3 <input type="checkbox"/> CLASS 4 <input type="checkbox"/> CLASS 5	<input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNKNOWN	<input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NOT APPLICABLE <input type="checkbox"/> UNKNOWN			

Police Action

DATE CRASH REPORTED: TIME REC'D CALL: DISPATCH: ARRIVED: CLEARED: OTHER: TOTAL MINUTE:

OFFICER'S NAME:

REPORT TAKEN BY:

REPORT TAKEN AT: 1 SCENE 2 STATION 3 OTHER

LOCAL REPORT # 7 1 - 1 1 5 5 - 6 6

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (REV. 1/82)

LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY Ohio State Highway Patrol	DATE OF ACCIDENT 09/12/2009
IN COUNTY OF Pike	ACCIDENT LOCATION SR0032	

Road conditions: Dry pavement, Lighted.

Weather conditions: Dark, Clear, Cool.

RP: Northeast apex of SR 32 & SR 220

Point Zero: North side berm of SR 32

RP to Point zero: 70 feet

Measuring device used: Wheel

Notes: From north berm of SR 32 it was 22 feet 7 inches south to first lane, also 34 feet to start of second lane.

All measurements were taken from north side berm of SR 32.

Sergeant John Howard U# 1692 crash reconstructionist was on scene and assisted with OH-2, a second OH-2 will be completed by Sgt Howa and will be included with investigation.

It was 110 feet 7 inches to stop bar of Germany road from the north side berm of SR 32.

AE	FE	Description
A. 7 feet 2 inches west	18 feet 3 inches south	Start of left skids U# 1
B. 15 feet 4 inches west	11 feet 8 inches south	Start of right skids U # 1
C. 70 feet 10 inches west	18 feet 2 inches south	Start of right front skid U# 2
D. 101 feet 10 inches west	15 feet 6 inches south	Clothing, Body fluid, & body matter
E. 109 feet 8 inches west	42 feet 10 inches south	Right rear tire U# 2
F. 109 feet 8 inches west	52 feet 9 inches south	Right front tire U# 2
G. 122 feet 1 inch west	16 feet 6 inches south	End of body matter
H. 132 feet 2 inches west	17 feet 3 inches south	Body disengagement
I. 183 feet 6 inches west	10 feet 6 inches south	Center of left duals over edge line
J. 211 feet 4 inches west	18 feet 0 inches south	Center mass of body
K. 240 feet 0 inches west	0	Right trailer duals off roadway
L. 255 feet 8 inches west	0	Right tractor duals off roadway
M. 299 feet 0 inches west	2 feet 5 inches south	Left rear trailer axle U# 1
N. 302 feet 5 inches west	3 feet 0 inches south	Left rear trailer axle U# 1
O. 337 feet 10 inches west	5 feet 10 inches south	Left rear Tractor axle U# 1
P. 341 feet 9 inches west	6 feet 0 inches south	Left tractor axle U# 1
Q. 359 feet 7 inches west	8 feet 3 inches south	Left front tractor axle U# 1
R. 318 feet 5 inches west	0	Axles 1, 2, & 3 return to pavement

Timeline

0021

Advised by dispatch of a 2 vehicle serious injury crash on SR 32 at SR 220.

0022

Troopers Aaron Morgan U 1785, Nicholas Diehl U 1735, Delmer Hurd U 1827, & Sergeant Douglas Debord U 0983 en route to scene.

0028

Pike County Sheriffs Deputy J. Savage arrived on scene and advised that there was a fatality involved.

0030

Sergeant Debord advised to contact Chillicothe post commander Lee Darden U 1366 of incident.

0030

Trooper Hurd first on

OFFICER'S NAME	1735
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OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (REV. 1/82)

LOCAL REPORT NUMBER	71-1155-66	REPORTING AGENCY	Ohio State Highway Patrol	DATE OF ACCIDENT	09/12/2009
IN COUNTY OF	Pike	ACCIDENT LOCATION	SR0032		

scene.
 0034
 Message left with Lieutenant Darden regarding crash.
 0037
 Investigating Trooper Nicholas Diehl arrives on scene.
 0037
 Sergeant Bill Menendez U 1381 commercial enforcement was contacted and was advised that we need a commercial inspector to respond to scene.
 0042
 Trooper Aaron Morgan arrived on scene. Photos. Vehicle inventory, Damage analysis.
 0047
 Pike County Coroner requested to be notified.
 0052
 Staff Lieutenant Scott Borden U 1103 on call District Duty Officer was advised.
 0100
 Sergeant Douglas Debord arrives on scene.
 0103
 Pike County Coroner Dr. Kessler enroute to scene.
 0104
 Sergeant John Howard U 1692, crash reconstructionist, arrived on scene.
 0130
 Motor Carrier Enforcement Unit Joe Elcess U 3285 on scene and begins inspection of U 1- report attached.
 0133
 Coroner on scene. Pronounced deceased at 0027
 0134
 Father of deceased Paul Risner arrived on scene and was advised by Trooper Diehl of situation.
 0135
 Trooper Phillip Rutherford U 1907 arrived at Pike Community Hospital to obtain witness statements from driver of U# 2 and passenger from U
 0154
 Urine sample obtained from the driver of U# 1 at scene.
 0210
 Pike County E.M.S. left scene with deceased enroute to Pike Community hospital.
 0246
 Statement and blood sample obtained from driver Ashley Royster by Trooper Rutherford.
 0247
 Driver of U# 1 transported to Pike Community Hospital for evaluation by Pike County E.M.S.
 0324
 All units clear from scene.

Phillip Fin and Edward Casteel, owners of Montgomery trucking were on scene.

Damage analysis:

Unit 1:
 Contact damage to left side of power unit. And also contact damage to trailer.

Unit 2:
 Contact damage to center, right front and rear, also contact damage to right side and top.

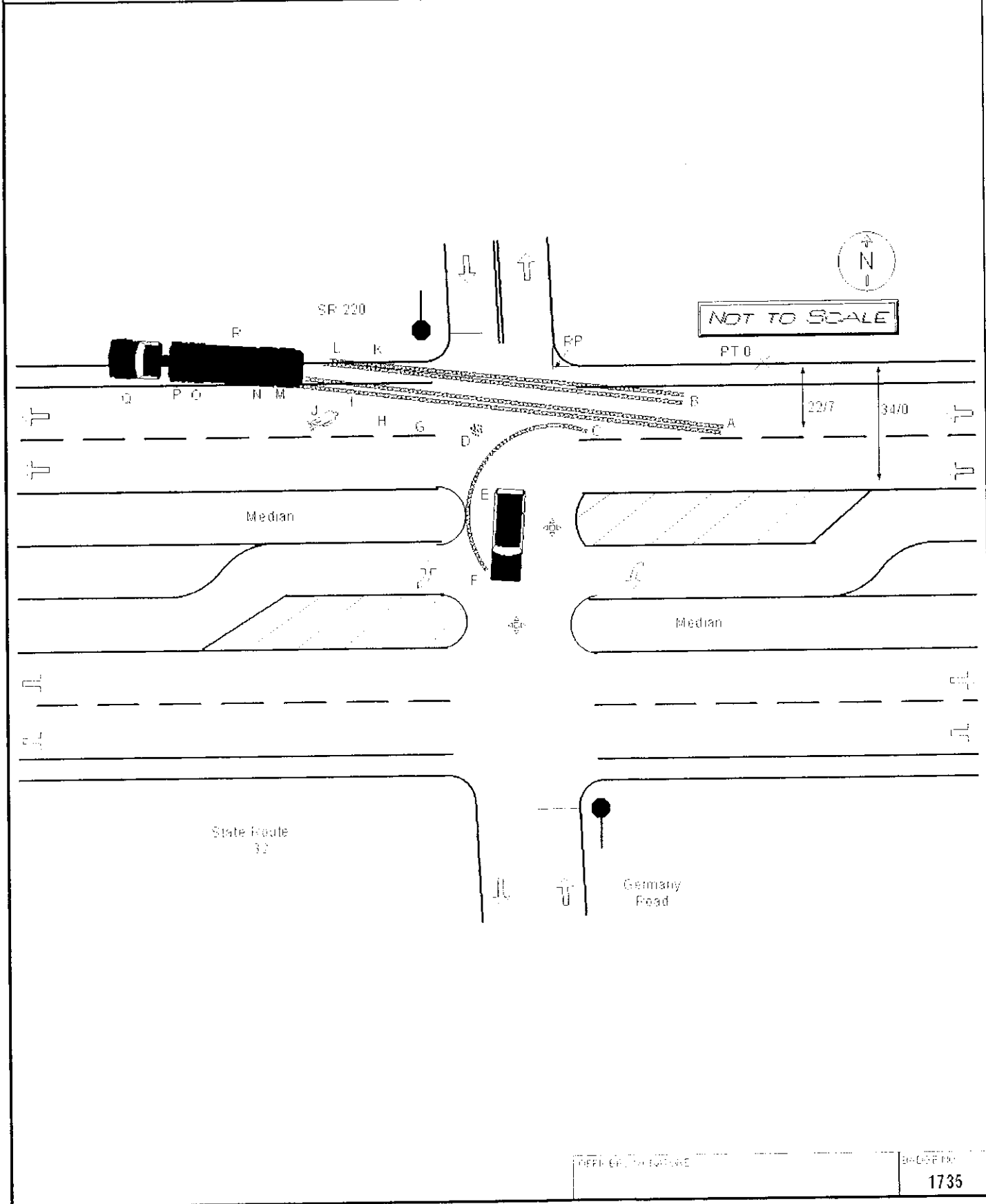
The deceased, right front passenger Amber Risner was ejected from U# 2 and then became entangled in U# 1'S trailer axles before coming to rest in the westbound lane of SR 32. Inspection of the safety belt for the right front passenger appeared to be in the unused position.

REPORTING OFFICER	1735
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OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 (REV. 1/82)

LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY Ohio State Highway Patrol	DATE OF ACCIDENT 09/12/2009
IN COUNTY OF Pike	ACCIDENT LOCATION SR0032	



OHIO TRAFFIC CRASH REPORT - DIAGRAM / NARRATIVE CONTINUATION

OH-2 (OSP Rev. 1/05)

LOCAL REPORT NUMBER 71-1155-66	REPORTING AGENCY Ohio State Highway Patrol	DATE OF CRASH M 9 D 12 Y 09
IN COUNTY OF Pike	CRASH LOCATION State Route 32 at State Route 220	

Continuation from OH-2

The Unit 1 was struck by Unit 2 in the area of the left fuel tank. After impact, axle numbers two and three drove over the front end of unit 2. There was contact damage to the semi tires with oil deposits and paint being left on the outside tires on axles two and three.

The forward momentum of unit 1 caused unit 2 to rotate in a clockwise direction. After the initial impact, unit 2 made a secondary impact with unit 1's trailer. Paint transfer from unit 2 on unit 1's trailer was measured at a height to indicate unit 2's rear end was off the ground during its second impact with the trailer of unit 1.

During the second impact the passenger door of unit 2 was forced open as unit 1 continued sliding forward with both units in a primarily parallel position on the roadway.

The lock and latch of unit 2's passenger door were both torn from the door as it was forced open. A portion of the back of the door got caught on unit 1 as the door was ripped open. The front passenger of unit 2 fell out of the vehicle just before axle # 4 and 5. Unit 1 had its tires locked up as the unrestrained passenger was ejected.

There were no view obstructions that would have been a factor where unit 2 would have been setting.

All lights were working on Unit 1.

OFFICER'S SIGNATURE X 	UNIT NO. 1735	PAGE NO.
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