



# TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER *	CRASH SEVERITY	HIT/SKIP
<b>2018-00011396</b>	<b>3</b> 1 - FATAL 2 - INJURY 3 - PDO	<input type="checkbox"/> 1 - SOLVED <input type="checkbox"/> 2 - UNSOLVED

LOCAL INFORMATION  
**N 21st St**

<input type="checkbox"/> PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER	<input type="checkbox"/> PDO UNDER STATE REPORTABLE DOLLAR AMOUNT	<input type="checkbox"/> PRIVATE PROPERTY	REPORTING AGENCY NCIC * <b>04501</b>	REPORTING AGENCY NAME * <b>Newark Police Department</b>	NUMBER OF UNITS <b>02</b>	UNIT IN ERROR <b>01</b> 98 - ANIMAL 99 - UNKNOWN
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COUNTY * <b>45</b>	<input checked="" type="checkbox"/> CITY * <input type="checkbox"/> VILLAGE * <input type="checkbox"/> TOWNSHIP *	CITY, VILLAGE, TOWNSHIP * <b>NEWARK</b>	CRASH DATE * <b>04252018</b>	TIME OF CRASH <b>1130</b>	DAY OF WEEK <b>Wed</b>
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DEGREES / MINUTES / SECONDS LATITUDE	LONGITUDE	DECIMAL DEGREES LATITUDE	LONGITUDE
<b>0 / 0 / 0</b>	<b>0 / 0 / 0</b>	<b>40.077887</b>	<b>-81.242956</b>

ROADWAY DIVISION <input type="checkbox"/> DIVIDED <input checked="" type="checkbox"/> UNDIVIDED	DIVIDED LANE DIRECTION OF TRAVEL N - NORTHBOUND E - EASTBOUND S - SOUTHBOUND W - WESTBOUND	NUMBER OF THRU LANES <b>05</b>	ROAD TYPES OR MILEPOST <sup>2</sup> AL - ALLEY CR - CIRCLE HE - HEIGHTS MP - MILEPOST PL - PLACE ST - STREET WA - WAY AV - AVENUE CT - COURT HW - HIGHWAY PK - PARKWAY RD - ROAD TE - TERRACE BL - BOULEVARD DR - DRIVE LA - LANE PI - PIKE SQ - SQUARE TL - TRAIL
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LOCATION ROUTE NUMBER <b>21st</b>	LOC PREFIX N, S, E, W <b>N</b>	LOCATION ROAD NAME <b>21st</b>	ROUTE TYPES <sup>1</sup> IR - INTERSTATE ROUTE (INC. TURNPIKE) CR - NUMBERED COUNTY ROUTE US - US ROUTE TR - NUMBERED TOWNSHIP ROUTE SR - STATE ROUTE
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DISTANCE FROM REFERENCE <b>100</b>	DIR FROM REF MILES FEET YARDS <b>E</b>	REFERENCE ROUTE NUMBER <b>1061</b>	REF PREFIX N, S, E, W <b>E</b>	REFERENCE NAME (ROAD, MILEPOST, HOUSE #)	REFERENCE ROAD TYPE <sup>2</sup>
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REFERENCE POINT USED <b>3</b> 1 - INTERSECTION 2 - MILE POST 3 - HOUSE NUMBER	CRASH LOCATION <b>01</b> 01 - NOT AN INTERSECTION 02 - FOUR-WAY INTERSECTION 03 - T-INTERSECTION 04 - Y-INTERSECTION 05 - TRAFFIC CIRCLE/ROUNDBOAT	06 - FIVE-POINT, OR MORE 07 - ON RAMP 08 - OFF RAMP 09 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS	<input type="checkbox"/> INTERSECTION RELATED	LOCATION OF FIRST HARMFUL EVENT <b>1</b> 1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 9 - UNKNOWN
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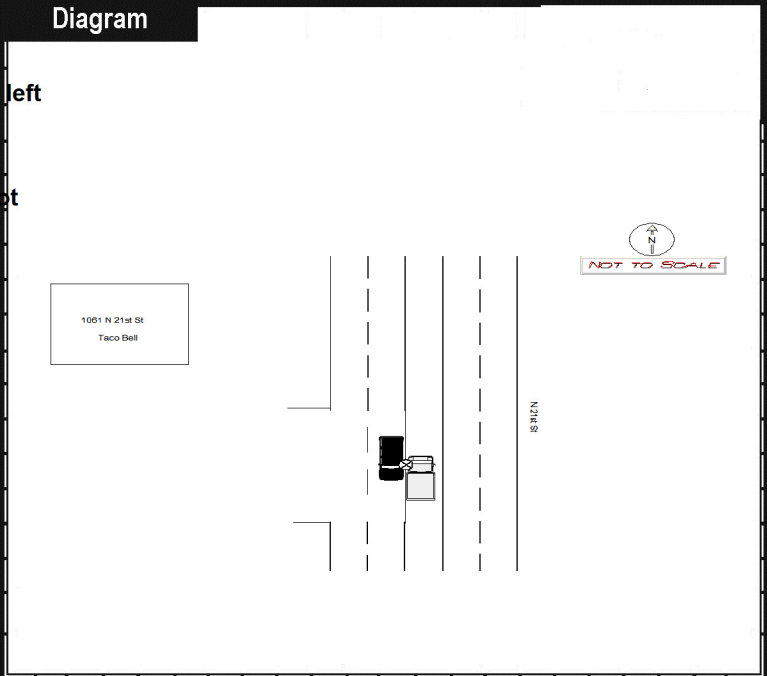
ROAD CONTOUR <b>1</b> 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - UNKNOWN	ROAD CONDITIONS PRIMARY <b>01</b> SECONDARY	01 - DRY 02 - WET 03 - SNOW 04 - ICE 05 - SAND, MUD, DIRT, OIL, GRAVEL 06 - WATER (STANDING, MOVING) 07 - SLUSH 08 - DEBRIS* 09 - RUT, HOLES, BUMPS, UNEVEN PAVEMENT* 10 - OTHER 99 - UNKNOWN	* SECONDARY CONDITION ONLY
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MANNER OF CRASH COLLISION/IMPACT <b>8</b> 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - UNKNOWN	WEATHER <b>1</b> 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - OTHER/UNKNOWN
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ROAD SURFACE <b>2</b> 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 6 - OTHER	LIGHT CONDITIONS PRIMARY <b>1</b> SECONDARY	1 - DAYLIGHT 2 - DAWN 3 - DUSK 4 - DARK - LIGHTED ROADWAY 5 - DARK - ROADWAY NOT LIGHTED 6 - DARK - UNKNOWN ROADWAY LIGHTING 7 - GLARE* 8 - OTHER 9 - UNKNOWN	<input type="checkbox"/> SCHOOL ZONE RELATED <input type="checkbox"/> YES, SCHOOL BUS DIRECTLY INVOLVED <input type="checkbox"/> YES, SCHOOL BUS INDIRECTLY INVOLVED
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<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE) <input type="checkbox"/> LAW ENFORCEMENT PRESENT (VEHICLE ONLY)	TYPE OF WORK ZONE <input type="checkbox"/> 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 <input type="checkbox"/> 1 - BEFORE THE FIRST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA
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**NARRATIVE**  
Unit #2 was in the turning lane to turn w/b into the parking lot of 1061 N 21st St when Unit #1 who was s/b IAO 1061 N 21st St in the left lane when both vehicle drivers side mirrors hit causing Unit #1's mirror to break. Unit #2 had no damage per the driver. Fault cannot be determined.



REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)	DATE CRASH REPORTED <b>04252018</b>	TIME CRASH REPORTED <b>1130</b>	DISPATCH TIME <b>1136</b>	ARRIVAL TIME <b>1143</b>	TIME CLEARED <b>1230</b>	OTHER INVESTIGATION TIME	TOTAL MINUTES
OFFICER'S NAME * <b>Litzinger, Christy</b>		OFFICER'S BADGE NUMBER <b>45NPD-349</b>		CHECKED BY		PAGE <b>1</b> OF <b>4</b>		



# UNIT

LOCAL REPORT NUMBER

**2018-00011396**

UNIT NUMBER <b>01</b>	OWNER NAME: LAST, FIRST, MIDDLE ( <input checked="" type="checkbox"/> SAME AS DRIVER) <b>DONOVAN, DONNA, BERTRAM</b>	OWNER PHONE NUMBER - INC. AREA CODE ( <input checked="" type="checkbox"/> SAME AS DRIVER) <b>614-307-3894</b>	DAMAGE SCALE <b>3</b>	DAMAGED AREA 
OWNER ADDRESS: CITY, STATE, ZIP ( <input checked="" type="checkbox"/> SAME AS DRIVER) <b>101 BEECHTREE LN, OH 43023</b>			1 - NONE	09
LP STATE <b>OH</b>	LICENSE PLATE NUMBER <b>222XEL</b>	VEHICLE IDENTIFICATION NUMBER <b>3GNFK16T03G280974</b>	2 - MINOR	08
VEHICLE YEAR <b>2003</b>	VEHICLE MAKE <b>Chevrolet</b>	VEHICLE MODEL <b>SUBURBAN</b>	3 - FUNCTIONAL	07
PROOF OF INSURANCE SHOWN <input checked="" type="checkbox"/>	INSURANCE COMPANY <b>allstate ins.</b>	POLICY NUMBER <b>926454323</b>	4 - DISABLING	06
CARRIER NAME, ADDRESS, CITY, STATE, ZIP			9 - UNKNOWN	05
			CARRIER PHONE - INCLUDE AREA CODE	

US DOT	VEHICLE WEIGHT GVWR/GCWR 1 - LESS THAN OR EQUAL TO 10K LBS. 2 - 10,001 TO 26,000 LBS. 3 - MORE THAN 26,000 LBS.	CARGO BODY TYPE 01 - NO CARGO BODY TYPE/NOT APPLICABLE 02 - BUS/VAN (9-15 SEATS, INC DRIVER) 03 - BUS (16+ SEATS, INC DRIVER) 04 - VEHICLE TOWING ANOTHER VEHICLE 05 - LOGGING 06 - INTERMODAL CONTAINER CHASSIS 07 - CARGO VAN/ENCLOSED BOX 08 - GRAIN, CHIPS, GRAVEL	TRAFFICWAY DESCRIPTION <b>1</b> 1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED OR GRASS >4 FT) MEDIAN 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY
HM PLACARD ID NO.	<input type="checkbox"/> HAZARDOUS MATERIAL RELEASED	09 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIXER 14 - AUTO TRANSPORTER 15 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN	<input type="checkbox"/> HIT / SKIP UNIT
HM CLASS NUMBER			

NON-MOTORIST LOCATION PRIOR TO IMPACT 01 - INTERSECTION - MARKED CROSSWALK 02 - INTERSECTION - NO CROSSWALK 03 - INTERSECTION - OTHER 04 - MIDBLOCK - MARKED CROSSWALK 05 - TRAVEL LANE - OTHER LOCATION 06 - BICYCLE LANE 07 - SHOULDER/ROADSIDE 08 - SIDEWALK 09 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED-USE PATH OR TRAIL 12 - NON-TRAFFICWAY AREA 99 - OTHER/UNKNOWN	TYPE OF USE <b>1</b> 1 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	UNIT TYPE <b>06</b> 99 - UNKNOWN OR HIT / SKIP	PASSENGER VEHICLES (LESS THAN 9 PASSENGERS) 01 - SUB-COMPACT 02 - COMPACT 03 - MID SIZE 04 - FULL SIZE 05 - MINIVAN 06 - SPORT UTILITY VEHICLE 07 - PICKUP 08 - VAN 09 - MOTORCYCLE 10 - MOTORIZED BICYCLE 11 - SNOWMOBILE/ATV 12 - OTHER PASSENGER VEHICLE	MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS 13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES 14 - SINGLE UNIT TRUCK; 3+ AXLES 15 - SINGLE UNIT TRUCK / TRAILER 16 - TRUCK/TRACTOR (BOBTAIL) 17 - TRACTOR/SEMI-TRAILER 18 - TRACTOR/DOUBLE 19 - TRACTOR/TRIPLES 20 - OTHER MED/HEAVY VEHICLE	BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER) 21 - BUS/VAN (9-15 SEATS, INC DRIVER) 22 - BUS (16+ SEATS, INC DRIVER) NON-MOTORIST 23 - ANIMAL WITH RIDER 24 - ANIMAL WITH BUGGY, WAGON, SURREY 25 - BICYCLE/PEDACYCLIST 26 - PEDESTRIAN/SKATER 27 - OTHER NON-MOTORIST
			<input type="checkbox"/> HAS HM PLACARD		

SPECIAL FUNCTION <b>01</b> 01 - NONE 02 - TAXI 03 - RENTAL TRUCK (OVER 10K LBS) 04 - BUS - SCHOOL (PUBLIC OR PRIVATE) 05 - BUS - TRANSIT 06 - BUS - CHARTER 07 - BUS - SHUTTLE 08 - BUS - OTHER	09 - AMBULANCE 10 - FIRE 11 - HIGHWAY/MAINTENANCE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - OTHER GOVERNMENT 16 - CONSTRUCTION EQUIP.	17 - FARM VEHICLE 18 - FARM EQUIPMENT 19 - MOTORHOME 20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NARRATIVE)	MOST DAMAGED AREA <b>08</b> 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 - UNDERCARRIAGE 12 - LOAD/TRAILER 13 - TOTAL(ALL AREAS) 14 - OTHER	ACTION <b>9</b> 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN
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PRE-CRASH ACTIONS <b>01</b> 99 - UNKNOWN	MOTORIST 01 - STRAIGHT AHEAD 02 - BACKING 03 - CHANGING LANES 04 - OVERTAKING/PASSING 05 - MAKING RIGHT TURN 06 - MAKING LEFT TURN 07 - MAKING U-TURN 08 - ENTERING TRAFFIC LANE 09 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - OTHER MOTORIST ACTION	NON-MOTORIST 15 - ENTERING OR CROSSING SPECIFIED LOCATION 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING 17 - WORKING 18 - PUSHING VEHICLE 19 - APPROACHING OR LEAVING VEHICLE 20 - STANDING 21 - OTHER NON-MOTORIST ACTION
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CONTRIBUTING CIRCUMSTANCES PRIMARY <b>21</b> SECONDARY <b>00</b> 99 - UNKNOWN	MOTORIST 01 - NONE 02 - FAILURE TO YIELD 03 - RAN RED LIGHT 04 - RAN STOP SIGN 05 - EXCEEDED SPEED LIMIT 06 - UNSAFE SPEED 07 - IMPROPER TURN 08 - LEFT OF CENTER 09 - FOLLOWED TOO CLOSELY/ACDA 10 - IMPROPER LANE CHANGE /PASSING/OFF ROAD	NON-MOTORIST 11 - IMPROPER BACKING 12 - IMPROPER START FROM PARKED POSITION 13 - STOPPED OR PARKED ILLEGALLY 14 - OPERATING VEHICLE IN NEGLIGENCE MANNER 15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS) 16 - WRONG SIDE/WRONG WAY 17 - FAILURE TO CONTROL 18 - VISION OBSTRUCTION 19 - OPERATING DEFECTIVE EQUIPMENT 20 - LOAD SHIFTING/FALLING/SPILLING 21 - OTHER IMPROPER ACTION	VEHICLE DEFECTS <b>00</b> 01 - TURN SIGNALS 02 - HEAD LAMPS 03 - TAIL LAMPS 04 - BRAKES 05 - STEERING 06 - TIRE BLOWOUT 07 - WORN OR SLICK TIRES 08 - TRAILER EQUIPMENT DEFECTIVE 09 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 11 - OTHER DEFECTS
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SEQUENCE OF EVENTS 1 <b>20</b> 2 <b>00</b> 3 <b>00</b> 4 <b>00</b> 5 <b>00</b> 6 <b>00</b> FIRST HARMFUL EVENT <b>1</b> MOST HARMFUL EVENT <b>1</b> 99 - UNKNOWN	NON-COLLISION EVENTS 01 - OVERTURN/ROLLOVER 02 - FIRE/EXPLOSION 03 - IMMERSION 04 - JACKKNIFE 05 - CARGO/EQUIPMENT LOSS OR SHIFT 06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC) 07 - SEPARATION OF UNITS 08 - RAN OFF ROAD RIGHT 09 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN OR SUPPORT 11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION
COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE (TRAIN, ENGINE) 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	COLLISION WITH FIXED OBJECT 25 - IMPACT ATTENUATOR/CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL, BUILDING, TUNNEL 52 - OTHER FIXED OBJECT

UNIT SPEED <b>30</b> <input type="checkbox"/> STATED <input checked="" type="checkbox"/> ESTIMATED	POSTED SPEED <b>35</b>	TRAFFIC CONTROL <b>01</b> 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 - PERSON (FLAGGER, OFFICER) 12 - PAVEMENT MARKINGS 13 - CROSSWALK LINES 14 - WALK/DON'T WALK 15 - OTHER 16 - NOT REPORTED	UNIT DIRECTION FROM <b>N</b> TO <b>S</b> 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN
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# UNIT

LOCAL REPORT NUMBER

**2018-00011396**

UNIT NUMBER <b>02</b>	OWNER NAME: LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER ) <b>Paul Construction</b>	OWNER PHONE NUMBER - INC. AREA CODE ( <input checked="" type="checkbox"/> SAME AS DRIVER ) <b>740-624-5098</b>	DAMAGE SCALE <b>1</b>	DAMAGED AREA 
OWNER ADDRESS: CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER ) <b>1702 CHANDLERSVILLE RD ,Zanesville ,OH</b>				
LP STATE <b>OH</b>	LICENSE PLATE NUMBER <b>PFU4815</b>	VEHICLE IDENTIFICATION NUMBER <b>1GBJJC34U37E145187</b>	# OCCUPANTS <b>1</b>	
VEHICLE YEAR <b>2007</b>	VEHICLE MAKE <b>Chevrolet</b>	VEHICLE MODEL <b>Other</b>	VEHICLE COLOR	
<input checked="" type="checkbox"/> PROOF OF INSURANCE SHOWN	INSURANCE COMPANY <b>Nationwide Mutual</b>	POLICY NUMBER <b>ACPBAF 57-3-6147967</b>	TOWED BY	

CARRIER NAME, ADDRESS, CITY, STATE, ZIP <b>Paul Construction</b>	<b>1702 CHANDLERSVILLE RD ,Zanesville ,OH</b>	CARRIER PHONE- INCLUDE AREA CODE <b>740-624-5098</b>
US DOT	VEHICLE WEIGHT GVWR/GCWR <b>2</b>	CARGO BODY TYPE <b>99</b>
HM PLACARD ID No.	<input type="checkbox"/> HAZARDOUS MATERIAL RELEASED	TRAFFICWAY DESCRIPTION <b>1</b>
HM CLASS NUMBER		<input type="checkbox"/> HIT / SKIP UNIT

NON-MOTORIST LOCATION PRIOR TO IMPACT <b>01</b>	TYPE OF USE <b>2</b>	UNIT TYPE <b>07</b>	PASSENGER VEHICLES (LESS THAN 9 PASSENGERS)	MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS	BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER)
01 - INTERSECTION - MARKED CROSSWALK	1 - PERSONAL	01 - SUB-COMPACT	01 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES	21 - BUS/VAN (9-15 SEATS, INC DRIVER)	23 - ANIMAL WITH RIDER
02 - INTERSECTION - NO CROSSWALK	2 - COMMERCIAL	02 - COMPACT	14 - SINGLE UNIT TRUCK; 3+ AXLES	22 - BUS (16+ SEATS, INC DRIVER)	24 - ANIMAL WITH BUGGY, WAGON, SURREY
03 - INTERSECTION - OTHER	3 - GOVERNMENT	03 - MID SIZE	15 - SINGLE UNIT TRUCK / TRAILER	Non-Motorist	25 - BICYCLE/PEDACYCLIST
04 - MIDBLOCK - MARKED CROSSWALK	<input type="checkbox"/> IN EMERGENCY RESPONSE	04 - FULL SIZE	16 - TRUCK/TRACTOR (BOBTAIL)	17 - TRACTOR/SEMI-TRAILER	26 - PEDESTRIAN/SKATER
05 - TRAVEL LANE - OTHER LOCATION		05 - MINIVAN	17 - TRACTOR/DOUBLE	18 - TRACTOR/TRIPLES	27 - OTHER NON-MOTORIST
06 - BICYCLE LANE		06 - SPORT UTILITY VEHICLE	19 - TRACTOR/TRIPLES	20 - OTHER MED/HEAVY VEHICLE	
07 - SHOULDER/ROADSIDE		07 - PICKUP			
08 - SIDEWALK		08 - VAN			
09 - MEDIAN/CROSSING ISLAND		09 - MOTORCYCLE			
10 - DRIVEWAY ACCESS		10 - MOTORIZED BICYCLE			
11 - SHARED-USE PATH OR TRAIL		11 - SNOWMOBILE/ATV			
12 - NON-TRAFFICWAY AREA		12 - OTHER PASSENGER VEHICLE			
99 - OTHER/UNKNOWN					

SPECIAL FUNCTION <b>22</b>	01 - NONE	09 - AMBULANCE	17 - FARM VEHICLE	MOST DAMAGED AREA <b>01</b>	01 - NONE	08 - LEFT SIDE	99 - UNKNOWN	ACTION <b>9</b>	1 - NON-CONTACT
02 - TAXI	10 - FIRE	11 - HIGHWAY/MAINTENANCE	18 - FARM EQUIPMENT	02 - CENTER FRONT	02 - CENTER FRONT	09 - LEFT FRONT		2 - NON-COLLISION	
03 - RENTAL TRUCK (OVER 10K LBS)	12 - MILITARY	12 - MILITARY	19 - MOTORHOME	03 - RIGHT FRONT	03 - RIGHT FRONT	10 - TOP AND WINDOWS		3 - STRIKING	
04 - BUS - SCHOOL (PUBLIC OR PRIVATE)	13 - POLICE	20 - GOLF CART	21 - TRAIN	04 - RIGHT SIDE	04 - RIGHT SIDE	11 - UNDERCARRIAGE		4 - STRUCK	
05 - BUS - TRANSIT	14 - PUBLIC UTILITY	22 - OTHER (EXPLAIN IN NARRATIVE)		05 - RIGHT REAR	05 - RIGHT REAR	12 - LOAD/TRAILER		5 - STRIKING/STRUCK	
06 - BUS - CHARTER	15 - OTHER GOVERNMENT			06 - REAR CENTER	06 - REAR CENTER	13 - TOTAL(ALL AREAS)		9 - UNKNOWN	
07 - BUS - SHUTTLE	16 - CONSTRUCTION EQUIP.			07 - LEFT REAR	07 - LEFT REAR	14 - OTHER			
08 - BUS - OTHER									

PRE-CRASH ACTIONS <b>14</b>	MOTORIST	01 - STRAIGHT AHEAD	07 - MAKING U-TURN	13 - NEGOTIATING A CURVE	Non-Motorist	15 - ENTERING OR CROSSING SPECIFIED LOCATION	21 - OTHER NON-MOTORIST ACTION
99 - UNKNOWN	02 - BACKING	03 - CHANGING LANES	08 - ENTERING TRAFFIC LANE	14 - OTHER MOTORIST ACTION	16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING	17 - WORKING	
	04 - OVERTAKING/PASSING	05 - MAKING RIGHT TURN	09 - LEAVING TRAFFIC LANE		18 - PUSHING VEHICLE	19 - APPROACHING OR LEAVING VEHICLE	
	06 - MAKING LEFT TURN	11 - SLOWING OR STOPPED IN TRAFFIC	10 - PARKED		20 - STANDING		
		12 - DRIVERLESS					

CONTRIBUTING CIRCUMSTANCES	MOTORIST	01 - NONE	11 - IMPROPER BACKING	Non-Motorist	22 - NONE	VEHICLE DEFECTS	01 - TURN SIGNALS
PRIMARY <b>01</b>	02 - FAILURE TO YIELD	12 - IMPROPER START FROM PARKED POSITION	12 - IMPROPER START FROM PARKED POSITION	23 - IMPROPER CROSSING	03 - RAN RED LIGHT	02 - HEAD LAMPS	02 - HEAD LAMPS
SECONDARY <b>01</b>	03 - RAN STOP SIGN	13 - STOPPED OR PARKED ILLEGALLY	13 - STOPPED OR PARKED ILLEGALLY	24 - DARTING	04 - RAN STOP SIGN	03 - TAIL LAMPS	03 - TAIL LAMPS
99 - UNKNOWN	05 - EXCEEDED SPEED LIMIT	14 - OPERATING VEHICLE IN NEGLIGENCE MANNER	14 - OPERATING VEHICLE IN NEGLIGENCE MANNER	25 - LYING AND/OR ILLEGALLY IN ROADWAY	06 - UNSAFE SPEED	04 - BRAKES	04 - BRAKES
	07 - IMPROPER TURN	15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS)	15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS)	26 - FAILURE TO YIELD RIGHT OF WAY	08 - LEFT OF CENTER	05 - STEERING	05 - STEERING
	09 - FOLLOWED TOO CLOSELY/ACDA	16 - WRONG SIDE/WRONG WAY	16 - WRONG SIDE/WRONG WAY	27 - FAILURE TO YIELD RIGHT OF WAY	10 - LEFT OF CENTER	06 - TIRE BLOWOUT	06 - TIRE BLOWOUT
	10 - IMPROPER LANE CHANGE /PASSING/OFF ROAD	17 - FAILURE TO CONTROL	17 - FAILURE TO CONTROL	28 - NOT VISIBLE (DARK CLOTHING)	11 - LEFT OF CENTER	07 - WORN OR SLICK TIRES	07 - WORN OR SLICK TIRES
		18 - VISION OBSTRUCTION	18 - VISION OBSTRUCTION	29 - INATTENTIVE	12 - LEFT OF CENTER	08 - TRAILER EQUIPMENT DEFECTIVE	08 - TRAILER EQUIPMENT DEFECTIVE
		19 - OPERATING DEFECTIVE EQUIPMENT	19 - OPERATING DEFECTIVE EQUIPMENT	30 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER	13 - LEFT OF CENTER	09 - MOTOR TROUBLE	09 - MOTOR TROUBLE
		20 - IMPROPER LANE CHANGE /PASSING/OFF ROAD	20 - IMPROPER LANE CHANGE /PASSING/OFF ROAD	31 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER	14 - LEFT OF CENTER	10 - DISABLED FROM PRIOR ACCIDENT	10 - DISABLED FROM PRIOR ACCIDENT
		21 - SLOWING OR STOPPED IN TRAFFIC	21 - SLOWING OR STOPPED IN TRAFFIC	32 - WRONG SIDE OF THE ROAD	15 - LEFT OF CENTER	11 - OTHER DEFECTS	11 - OTHER DEFECTS
		12 - DRIVERLESS	12 - DRIVERLESS	33 - OTHER NON-MOTORIST ACTION	16 - LEFT OF CENTER		

SEQUENCE OF EVENTS	1 <b>20</b>	2	3	4	5	6	Non-Collision Events	01 - OVERTURN/ROLLOVER	06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC)	10 - CROSS MEDIAN OR SUPPORT
FIRST HARMFUL EVENT	<b>1</b>						02 - FIRE/EXPLOSION	07 - SEPARATION OF UNITS	07 - SEPARATION OF UNITS	11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL
MOST HARMFUL EVENT	<b>1</b>						03 - IMMERSION	08 - RAN OFF ROAD RIGHT	08 - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWAY
							04 - JACKKNIFE	09 - RAN OFF ROAD LEFT	09 - RAN OFF ROAD LEFT	13 - OTHER NON-COLLISION
							05 - CARGO/EQUIPMENT LOSS OR SHIFT			
COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED	14 - PEDESTRIAN	21 - PARKED MOTOR VEHICLE	25 - IMPACT ATTENUATOR/CRASH CUSHION	33 - MEDIAN CABLE BARRIER	41 - OTHER POST, POLE OR SUPPORT	48 - TREE				
15 - PEDALCYCLE	22 - WORK ZONE MAINTENANCE EQUIPMENT	26 - BRIDGE OVERHEAD STRUCTURE	34 - MEDIAN GUARDRAIL BARRIER	34 - MEDIAN GUARDRAIL BARRIER	42 - CURB	49 - FIRE HYDRANT				
16 - RAILWAY VEHICLE (TRAIN, ENGINE)	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE	27 - BRIDGE PIER OR ABUTMENT	35 - MEDIAN CONCRETE BARRIER	35 - MEDIAN CONCRETE BARRIER	43 - CURB EQUIPMENT	50 - WORK ZONE MAINTENANCE EQUIPMENT				
17 - ANIMAL - FARM	24 - OTHER MOVABLE OBJECT	28 - BRIDGE PARAPET	36 - MEDIAN OTHER BARRIER	36 - MEDIAN OTHER BARRIER	44 - DITCH	51 - WALL, BUILDING, TUNNEL				
18 - ANIMAL - DEER		29 - BRIDGE RAIL	37 - TRAFFIC SIGN POST	37 - TRAFFIC SIGN POST	45 - EMBANKMENT	52 - OTHER FIXED OBJECT				
19 - ANIMAL - OTHER		30 - GUARDRAIL FACE	38 - OVERHEAD SIGN POST	38 - OVERHEAD SIGN POST	46 - FENCE					
20 - MOTOR VEHICLE IN TRANSPORT		31 - GUARDRAIL END	39 - LIGHT/LUMINARIES SUPPORT	39 - LIGHT/LUMINARIES SUPPORT	47 - MAILBOX					
		32 - PORTABLE BARRIER	40 - UTILITY POLE	40 - UTILITY POLE						

UNIT SPEED <b>0</b>	POSTED SPEED <b>35</b>	TRAFFIC CONTROL <b>01</b>	01 - NO CONTROLS	07 - RAILROAD CROSSBUCKS	13 - CROSSWALK LINES	UNIT DIRECTION FROM <b>S</b> TO <b>W</b>	1 - NORTH	5 - NORTHEAST	9 - UNKNOWN
<input type="checkbox"/> STATED		02 - STOP SIGN	08 - RAILROAD FLASHERS	14 - WALK/DON'T WALK	2 - SOUTH	2 - SOUTH	6 - NORTHWEST		
<input checked="" type="checkbox"/> ESTIMATED		03 - YIELD SIGN	09 - RAILROAD GATES	15 - OTHER	3 - EAST	3 - EAST	7 - SOUTHEAST		
		04 - TRAFFIC SIGNAL	10 - CONSTRUCTION BARRICADE	16 - NOT REPORTED	4 - WEST	4 - WEST	8 - SOUTHWEST		
		05 - TRAFFIC FLASHERS	11 - PERSON (FLAGGER, OFFICER)						
		06 - SCHOOL ZONE	12 - PAVEMENT MARKINGS						



# MOTORIST / Non-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER  
**2018-00011396**

Motorist/Non-Motorist

Motorist/Non-Motorist

OCCUPANT

OCCUPANT

UNIT NUMBER <b>01</b>	NAME: LAST, FIRST, MIDDLE <b>DONOVAN, DONNA, BERTRAM</b>	DATE OF BIRTH <b>10081955</b>	AGE <b>062</b>	GENDER <b>F</b> F - FEMALE M - MALE
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ADDRESS, CITY, STATE, ZIP <b>101 BEECHTREE LN ,OH 43023</b>	CONTACT PHONE- INCLUDE AREA CODE <b>614-307-3894</b>
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INJURIES <b>1</b>	INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED <b>04</b>	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION <b>01</b>	AIR BAG USAGE <b>1</b>	EJECTION <b>1</b>	TRAPPED <b>1</b>
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OL STATE <b>OH</b>	OPERATOR LICENSE NUMBER <b>SW532976</b>	OL CLASS <b>4</b>	No VALID OL <input type="checkbox"/>	M/C END. <input type="checkbox"/>	CONDITION <b>1</b>	ALCOHOL/DRUG SUSPECTED <b>1</b>	ALCOHOL TEST STATUS <b>1</b>	ALCOHOL TEST TYPE <b>1</b>	ALCOHOL TEST VALUE .	DRUG TEST STATUS <b>1</b>	DRUG TEST TYPE <b>1</b>
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OFFENSE CHARGED ( <input type="checkbox"/> LOCAL CODE )	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED <input type="checkbox"/>	DRIVER DISTRACTED BY <b>1</b>
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UNIT NUMBER <b>02</b>	NAME: LAST, FIRST, MIDDLE <b>ATKINS, LOGAN, T</b>	DATE OF BIRTH <b>10291985</b>	AGE <b>032</b>	GENDER <b>M</b> F - FEMALE M - MALE
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ADDRESS, CITY, STATE, ZIP <b>2505 PINKERTON ,ZANESVILLE ,OH</b>	CONTACT PHONE- INCLUDE AREA CODE <b>740-624-5098</b>
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INJURIES <b>1</b>	INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED <b>04</b>	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION <b>01</b>	AIR BAG USAGE <b>1</b>	EJECTION <b>1</b>	TRAPPED <b>1</b>
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OL STATE <b>OH</b>	OPERATOR LICENSE NUMBER <b>SW916101</b>	OL CLASS <b>4</b>	No VALID OL <input type="checkbox"/>	M/C END. <input type="checkbox"/>	CONDITION <b>1</b>	ALCOHOL/DRUG SUSPECTED <b>1</b>	ALCOHOL TEST STATUS <b>1</b>	ALCOHOL TEST TYPE <b>1</b>	ALCOHOL TEST VALUE .	DRUG TEST STATUS <b>1</b>	DRUG TEST TYPE <b>1</b>
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OFFENSE CHARGED ( <input type="checkbox"/> LOCAL CODE )	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED <input type="checkbox"/>	DRIVER DISTRACTED BY <b>1</b>
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INJURIES 1 - NO INJURY / NONE REPORTED 2 - POSSIBLE 3 - NON-INCAPACITATING 4 - INCAPACITATING 5 - FATAL	INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 4 - OTHER 9 - UNKNOWN	SAFETY EQUIPMENT USED MOTORIST 01 - NONE USED - VEHICLE OCCUPANT 02 - SHOULDER BELT ONLY USED 03 - LAP BELT ONLY USED 04 - SHOULDER AND LAP BELT USED	99 - UNKNOWN SAFETY EQUIPMENT NON-MOTORIST 05 - CHILD RESTRAINT SYSTEM-FORWARD FACING 06 - CHILD RESTRAINT SYSTEM- REAR FACING 07 - BOOSTER SEAT 08 - HELMET USED	09 - NONE USED 10 - HELMET USED 11 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC)	12 - REFLECTIVE CLOTHING 13 - LIGHTING 14 - OTHER
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SEATING POSITION 01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 02 - FRONT - MIDDLE 03 - FRONT - RIGHT SIDE 04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 05 - SECOND - MIDDLE 06 - SECOND - RIGHT SIDE	07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 08 - THIRD - MIDDLE 09 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF CAB (TRUCK) 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A 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 16 - OTHER 99 - UNKNOWN	AIR BAG USAGE 1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN
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EJECTION 1 - NOT EJECTED 2 - TOTALLY EJECTED 3 - PARTIALLY EJECTED 4 - NOT APPLICABLE	TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - EXTRICATED BY NON-MECHANICAL MEANS	OPERATOR LICENSE CLASS 1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO'S "D") 5 - MC/MOPED ONLY	CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED 6 - UNDER THE INFLUENCE OF MEDICATIONS, DRUGS, ALCOHOL 7 - OTHER	ALCOHOL/DRUG SUSPECTED 1 - NONE 2 - YES - ALCOHOL SUSPECTED 3 - YES - HBD NOT IMPAIRED 4 - YES - DRUGS SUSPECTED 5 - YES - ALCOHOL AND DRUGS SUSPECTED
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ALCOHOL TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	ALCOHOL TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - BREATH 5 - OTHER	DRUG TEST STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	DRIVER DISTRACTED BY 1 - NO DISTRACTION REPORTED 2 - PHONE 3 - TEXTING/E-MAILING 4 - ELECTRONIC COMMUNICATION DEVICE 5 - OTHER ELECTRONIC DEVICE (NAVIGATION DEVICE, RADIO, DVD) 6 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION
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UNIT NUMBER <b>   </b>	NAME: LAST, FIRST, MIDDLE <b>   </b>	DATE OF BIRTH <b>   </b>	AGE <b>  </b>	GENDER <input type="checkbox"/> F - FEMALE <input type="checkbox"/> M - MALE
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ADDRESS, CITY, STATE, ZIP <b>  </b>	CONTACT PHONE- INCLUDE AREA CODE <b>  </b>
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INJURIES <input type="checkbox"/>	INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED <input type="checkbox"/>	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION <input type="checkbox"/>	AIR BAG USAGE <input type="checkbox"/>	EJECTION <input type="checkbox"/>	TRAPPED <input type="checkbox"/>
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UNIT NUMBER <b>  </b>	NAME: LAST, FIRST, MIDDLE <b>  </b>	DATE OF BIRTH <b>  </b>	AGE <b>  </b>	GENDER <input type="checkbox"/> F - FEMALE <input type="checkbox"/> M - MALE
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ADDRESS, CITY, STATE, ZIP <b>  </b>	CONTACT PHONE- INCLUDE AREA CODE <b>  </b>
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INJURIES <input type="checkbox"/>	INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED <input type="checkbox"/>	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION <input type="checkbox"/>	AIR BAG USAGE <input type="checkbox"/>	EJECTION <input type="checkbox"/>	TRAPPED <input type="checkbox"/>
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