OP PUBLIC SAFETY TR		H REPORT	RMATION	ES MANDATORY I	FIELD FOR SUP	PLEMENT REPOR	19-0	LOCAL REPORT	T NUMBER	**
X PHOTOSTAKEN	OH-2 X OH-	Car vs.	Duilding	*		NCIC*	HIT/SKIP	NUMBER OF U	NITS	UNIT IN ERROR
SECONDARY CRASH	X PRIVATE PROPE	RTY Bellbroo	k Police [epartment		0,2,9,0,5		0.1	0	98 - ANIMAL
COUNTY* LOCALITY*	IIA	N: CITY, VILLAGE, TOW	vsнiр*				04302019	TIME* 1059		ASH SEVERITY - FATAL
ROUTE TYPE ROUTE NUM	DWNSHIP DEILDIG		AD NAME			ROAD TYPE	LATITUDE 8			- SERIOUS INJURY SUSPECTED
LOGATIO	2 - SOU 3 - EAS 1 4 - WES	T Bellbrool	< Plaza				20 00	6788	3 -	- MINOR INJURY SUSPECTED
ROUTE TYPE ROUTE NUM		TH REFERENCE	ROAD NAME (R	DAD, MILEPOST,	HOUSE #)	ROAD TYPE	LONGITUDE	DECIMAL DEGREES	4 -	- INJURY POSSIBLE
ROUTE TYPE ROUTE NUM	3 - EAS	T /2					-84.07	3378	5 -	PROPERTY DAMA
1-INTERSECTION	DIRECTION FROM REFERENCE 1 - NORTH	ROUTE T		AL - ALLEY	ROAD TYPE HW- HIGHWAY	RD - ROAD		INTERSECTION		
3 2- MILE POST 3- HOUSE #	2 - SOUTH 3 - EAST	US - FEDERAL US		AV - AVENUE BL - BOULEVARD	LA - LANE	SQ - SQUARE		RSECTION OR O		LJ
DISTANCE	4-WEST DISTANCE	SR - STATE ROUTE CR - NUMBERED C		CR - CIRCLE	OV - OVAL	TE - TERRACE	WITHIN INTE	RCHANGE AREA		BER OF APPROACH
FROM REFERENCE	UNIT OF MEASURE 1 - MILES 2 - FEET	TR - NUMBERED TO	OWNSHIP	CT - COURT DR - DRIVE	PK - PARKWAY PI - PIKE	TL - TRAIL WA - WAY	ROADWAY DI	ROADW	AI	
	3-YARDS			HE - HEIGHTS	PL - PLACE		ROADWAY DI	VIDED		
1 - ON ROADWAY	9 - CROSSO	VER	1 1-1	MANNER OF CRAS			DIRECTION OF TRAVE		MEDIAN DIVIDED FL	USH MEDIAN
2 - ON SHOULDER 3 - IN MEDIAN	11-RAILW	WAY/ALLEY ACCESS AY GRADE CROSSIN	, I I 1	EWO MOTOR	5-BACKING 6-ANGLE		2 - SOUTH 3 - EAST		<4 FEET	
4 - ON ROADSIDE 5 - ON GORE	12-SHARE TRAILS	D USE PATHS OR	N. C.		7 - SIDESWIPE, 8 - SIDESWIPE,	SAME DIRECTION OPPOSITE DIRECTION	4-WEST	1	. ≥4 FEET : DIVIDED, D) EPRESSED MEDIA
6 - OUTSIDE TRAF 7 - ON RAMP	FIC WAY 13-BIKE L 14-TOLL B		3 - H	IEAD-ON	9-OTHER/UNK	NOWN			IVIDED, R ANY TYPE	AISED MEDIAN)
8-OFF RAMP	99-OTHER	/ UNKNOWN						9 - 0	THER/UNK	NOWN
WORK ZONE RELATED		WORK ZONE 1 1 - LANE CLOSURE			ON OF CRASH IN - BEFORE THE 1	I WORK ZONE LST WORK ZONE	CONTOUR	condition 1	ONS	SURFACE
WORKERS PRESENT		2 - LANE SHIFT/CF 3 - WORK ON SHOU		2	WARNING SIG - ADVANCE WAR		1 - STRAIGHT LEVEL	1 - DRY	_	1 - CONCRETE
LAW ENFORCEMENT	PRESENT	OR MEDIAN 4-INTERMITTENT		1	- TRANSITION A - ACTIVITY ARE		2 - STRAIGHT GRADE	2-WET		2 - BLACKTOP,
ACTIVE SCHOOL ZONE		5-OTHER			- TERMINATION		3 - CURVE LEVEL 4 - CURVE GRADE	3-SNOW 4-ICE		BITUMINOUS, ASPHALT
LIGHT CON	IDITION		WEA	THER			9 - OTHER/UNKNOWN	5 - SAND, MUD, I	DIRT,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,
1 2 - DAWN/DUSK		2, 2-0	CLOUDY		CROSSWINDS			6 - WATER (STA	BIDIBLE	STONE 5 - DIRT
3 - DARK LIGHTE 4 - DARK ROADWA	AY NOT LIGHTED	4 - 1	FOG, SMOG, SMO RAIN	9 - FREEZIN		IRT, SNOW EZING DRIZZLE		MOVING) 7 - SLUSH		9 - OTHER/UNKNOW
5 - DARK – UNKNOV 9 - OTHER / UNKNO	VN ROADWAY LIGHTI WN	NG 5 - 5	SLEET, HAIL	99 - OTHER	UNKNOWN			9 - OTHER/UNKN	lown	
VARRATIVE										Indicate the nort
Unit #1 was heading n	orthward attemp	ting to pull into	a handicap r	parking						direction with an "N" on the compass diagram
space in front of 72 Be brakes and crashed in	to the front of the	business.	ppiy the ven	iicle's			-torn.		٧	Lonspass tragram
SEE ATTACHED DRA	WING	THE STATE OF THE S	- William Committee William Prints			¥				
				n -4000m	AAAA					
234	Bad MANA VI. spayer for									
WEST CO. SARVING			***************************************	-		+				
	00000000000000000000000000000000000000	Secretary of Shirtness Processing and State Control of the State Control	EOAAMOP SIMA pas							
									-	
								1		
									4 2	
							**************************************		100 75 100 100 100 100 100 100 100 100 100 10	
CRASH REPORTED DATE	:/TIME	DISPATCH DATE	TIME	ΔΩΩ	IVAL DATE /TIN	1E	SCENE CLEARED DA	TE / TIME	pen	DRT TAKEN BY
4302019 1		302019		.I	2019 1	- 1	4302019	1133		DLICE AGENCY
TOTAL TIME O' DADWAY CLOSED INVESTIG	THER TO					CHECKED BY OFFICE	RIS NAMES	7		OTORIST
1		54 Vetter		ADGE NUMBE <u>R</u> *		CHECKED	OFFICER'S BADGE NU	MBER*		JPPLEMENT DRRECTION ON ADDITION IN EXISTING REPORT SENT TO ODEC!
				, 3	3	1		0,5	1	
/7001 OH1 1/19 [760-0820]									PA	GE 1 OF 3

Case Number: 19-001 Date: 4-30-19 Location: 72 Bell brown Description:	
Location: 72 Gellbrook Please	
Description:	
72 72 Unit #1	
	-1 -1
Bellbrook Plaza	
NOT TO SCALE	

CHO DEPARTMENT MOTORIST / NON-MOTORIST							19-000011					
UNIT # NAME: LAST, FIRST, MIDDLE HARNER, SANDRA WELCH						DATE OF BIRTH AGE GENDE 76 F				GENDER F		
ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE				
676 Ludlow Rd Xenia OH 45385-2976 937 372-0074												
INJURIES	S INJURED TAKEN BY	EMS AGENCY (NAME)	INJURED TAI	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN USED 04			DOT-COM	PLIANT 7	ATR BAG USAGE	EJECTION	TRAPPED	
OL STATE					OFFENSE CHARGED LOCAL CODE			CRIPTION		CITATION	NUMBER	
OL CLASS	S ENDORSEMEN	177756 EMENT RESTRICTION SELECT UPTOS DRIVER ALCOHOL / DRUG SUSPECTED CONDITION ALCOHOL TEST DRUG TEST(S))			
4	SELECT UP TO 2	3	10181	TACTED 5		RIJUANA	1	1 1	E VALUE	TATUS TYPE	RESULT	F SELECT UP TO 4
UNIT #							- Feeting		DATE OF BIRTH		AGE	GENDER
ADDRESS	S: STREET, CITY, S	TATE 719								_ لــــــــــــــــــــــــــــــــــــ		
OTORIS	J. J. Raci, 611 1, 3	rete, cif						CONTACT PI	IONE - INCLUDE AREA C	ODE		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDTAK	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFE USE			DOT-COMP		AIR BAG USAGE EJECTION TRAPPED		
OL STATE	OPERATOR	LICENSE NUMBER	OFFENSE	OFFENSE CHARGED LOCAL CODE			CRIPTION		CITATION NUMBER			
OL CLASS	ENDORSEMEN' SELECT UPTO 2	T RESTRICTION SELEC	DIS	EVER TRACTED	RACTED			ALCOH STATUS TYPE	IOL TEST VALUE	DRU(STATUS TYPE	RESULT	SELEST UP TO 4
			BY		ALCOHOL MA OTHER DRUG	RIJUANA						
UNIT # NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH		AGE	GENDER
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE					
INJURIES	INJURED	EMS AGENCY (NAME)		TAI HIDEO TAVE	-NEG MERIEM PARTITU		CAPPTU CANTRIAGNI			1 1 1		
NOOKILS	TAKEN BY	LIND AGENCT (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUISED				DOT-COMPL		AIR BAG USAGE	EJECTION	TRAPPED	
OL STATE	OPERATOR L	R LICENSE NUMBER OFFENSE			HARGED	ARGED LOCAL OFFENSE DESCI			CRIPTION CITATION NUMBER			
OL CLASS	ENDORSEMENT SELECT UP TO Z	RESTRICTION SELEC	DIS	VER /	ALCOHOL / DRUG SUSPE	CTED	CONDITION	ALCOH STATUS TYPE	DL TEST VALUE S	DRUG TATUS TYPE	RESULT'S	SELECT UP TO 4
			BY		OTHER DRUG	JUANA	1			. 1/1	1 1	
	RIES	SEATING POSITION		IR BAG	OL CLASS		OL RESTRICT		RIVER DISTRACT		EST STAT	us
1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYE		1 - CLASS A 2 - CLASS B		1-ALCOHOL INTERL 2-COL INTRASTATE		- NOT DISTRACTED - MANUALLY OPERATING	1 - NONE	GIVEN REFUSED	
3 - SUSPECTED		2-FRONT-MIDDLE	3 - DEPLOYE	D SIDE	3 - CLASS C		3 - CORRECTIVE LEN		ELECTRONIC COMMUNIC DEVICE (TEXTING, TYPI)	ATION 3-TEST	GIVEN, CONTA	
4 - POSSIBLE IN 5 - NO APPAREN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		D BOTH FRONT / S	IDE 4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DIALING)	JAMP	PLE / UNUSABI GIVEN, RESUL	
J- NO AFFAREN	110041	(MOTORCYCLE PASSENGER)	5- NOT APPI	ICABLE IENT UNKNOWN	5 - M/C MOPED ONLY		5 - EXCEPT CLASS A 6 - EXCEPT CLASS A	BUS 3.	TALKING ON HANDS-FRE COMMUNICATION DEVICE	±	GIVEN, RESUL	
CONTRACTOR CONTRACTOR	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE			6 - NO VALID OL		& CLASS B BUS		TALKING ON HAND-HELD		OWN	
1 - NOT TRANSPO /TREATED AT		7-THIRD - LEFT SIDE	EJ	ECTION	OL ENDORSEM	ENT	7 - EXCEPT TRACTOR 8 - INTERMEDIATE L		COMMUNICATION DEVICE OTHER ACTIVITY WITH A	建工作用利利	HOL TEST	TYPE
2 - EMS	A THESE ALIGNET		1- NOT EJECTED H - HAZMAT				RESTRICTIONS	194794	ELECTRONIC DEVICE	1 - NONE 2 - BLOOK		
	3 - POLICE S - THIRD - MIDDLE 9 - OTHER / UNKNOWN 9 - THIRD - RIGHT SIDE		2 - PARTIALLY EJECTED M - MOTORCYCLE 3 - TOTALLY EJECTED P - PASSENGER				9 - LEARNER'S PERN RESTRICTIONS		PASSENGER OTHER DISTRACTION	3 - URINE		
		10 - SLEEPER SECTION OF TRUCK CAB	4- NOT APPL		N - TANKER		10 - LIMITED TO DAYL		INSIDE THE VEHICLE	4 - BREAT	TH	
1. NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	TO	APPED	Q - MOTOR SCOOTER		11 - LIMITED TO EMPL		OTHER DISTRACTION OUT THE VEHICLE	rside 5-other	₹	
2- SHOULDER BE	ELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1-NOTTRAP		R - THREE-WHEEL MOT S - SCHOOL BUS	SHETCLE	12-LIMITED - OTHER 13-MECHANICAL DEV	rices 9 -	OTHER / UNKNOWN		GTESTT	YPE
	3 - LAP BELT ONLY USED PICK-UP WITH CAP)		2 - EXTRICATED BY			T - DOUBLE & TRIPLE TRAILERS		, HAND IER	CONDITION		1 NONE 2-BLOOD	
CARGOARFA		12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHANICAL MEANS 3 - FREED BY		X - TANKER / HAZMAT	X - TANKER / HAZMAT		(\$) 1	1 - APPARENTLY NORMAL		3 - URINE	
FORWARD FAC	5 - CHILD RESTRAINT SYSTEM – FORWARD FACING 13 - TRAILING UNIT		NON-MECHANICAL MEANS		GENDER	GENDER		********	w to this way the contract t		4 - OTHER	
6- CHILD RESTRA		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			F-FEMALE		AIR BRAKES		EMD (IUNAL (E.G., DEPRESS (NGRY, DISTURBED)		EST RESI	ULT(S)
7 - BOOSTER SEA		15 - NON-MOTORIST			M - MALE		16 - OUTSIDE MIRROR 17 - PROSTHETIC AID		LLNESS		ETAMINES	
8 - HELMET USE		99 - OTHER / UNKNOWN			U - OTHER / UNKNOWN		18-OTHER		ELL ASLEEP, FAINTED, ATIGUED, ETC.	2 - BARBI 3 - BENZO	TURATES DIAZEPINES	
9 - PROTECTIVE I (ELBOW, KNEE									INDER THE INFLUENCE IF MEDICATIONS ' DRUGS	A CARAM		
10 - REFLECTIVE C								1.	ALCOHOL	5 - COCAIN		
11 - LIGHTING - PE / BICYCLE ONL								9 - 0	THER / UNKNOWN	6 - OPTATE 7 - OTHER	S/OPIOIDS	
99 - OTHER/ UNKN											IVE RESULTS	



TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	DEBORTHO LORUSA	
TOTAL KEI OK! HOMBEK	REPORTING AGENCY	DATE OF CRASH
19-11	Bellbrook Police Department	M04/030/19

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

1, Sandra Harner HE	EREBY MAKE THIS VOLUNTARY STATEMENT TO
	AT 72 Bellbrook Plaza
I pulled into the Gar	dilapped parking
place and applied the	brakes, but nothing
Rappened, It Rept goin	g and went into
the building.	0
The night before I	had only lar
detailed When those for	neshed I pulled
the lar in the garage	and the brakes
didn't work correctly	. I finally got it
soffed.	, 3
DRESS OF WITNESS Rd Leija	PHONE 937-307-97/01
SNATURE OF WITNESS OFFICE X	R'S SIGNATURE 1/1/16 Page of
54 7003 4/07 Se (ect	Togo of