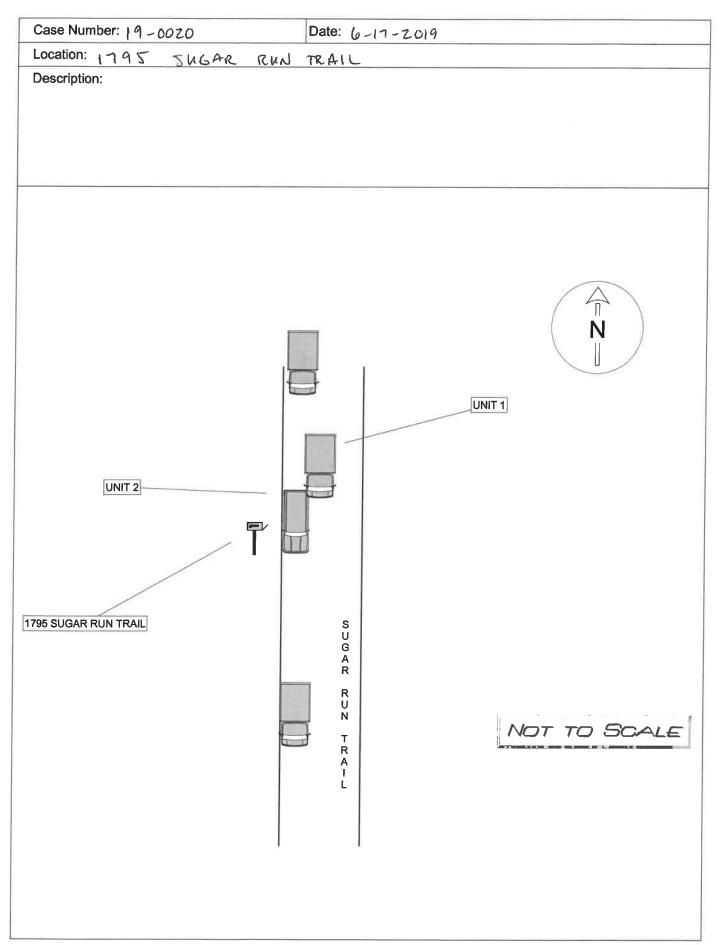
OF PUBLIC SAVETY TRAFFIC CRAS	REPORT	*DENOTES N	MANDATORY F	IELD	FOR SUP	PLEME	T REPORT		_	_	OCAL REP			k		
M PHOTOSTAKEN OH-2 NOH-3 LOCAL INFORMATION 19-00020																
SECONDARY CRASH PRIVATE PROPER	OTHER REPORTING AGENCY NAME* PROPERTY Bellbrook Police Department O 2, 9, 0, 5					:	I T/SKIP 1 - SOLV		NUMBER (2	0		3 - ANI	MAL		
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP* CRASH DATE / TIME* CRASH SEV							- UNK	NOW								
2-9 2-VILLAGE Bellbrook								IRY								
ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORT 2 - SOUT	4	NAME				F	OAD TYPE	LATITUDE DECIMAL DEGREES SUSPECTED								
3 - EAST Sugar Run TL 4-WEST						SUSPECTED										
	ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH 3 - EAST 1 - SEAST 1 - SOUTH 3 - FAST 1 - FAST						LONGITUDE DECIMAL DEGREES 4-INJURY POSSIBLE -84 091492 5-PROPERTY DAMAGONLY									
	ROUTE TYPE			RO	AD TYPE	L	NE E	193	L Y	11	T T T	TON REI		ONLY	_	
1 - INTERSECTION 1 - NORTH IR - INTERSTATE ROUTE(TP) AL - ALLEY HW- HIGHWAY RD - ROAD						WITHIN INTERSECTION OR ON APPROACH										
3- HOUSE # 3- EAST	S - FEDERAL US ROU R - STATE ROUTE	В	L - BOULEVARD	MP-	MILEPOS	ST ST	- STREET	🗆 v	VITHIN	INTER	CHANGE A	REA	NUME	ER OF A	PPRO/	ACHES
FROM REFERENCE UNIT OF MEASURE	R - NUMBERED COUN	ITY ROUTE CT	R - CIRCLE T - COURT		OVAL PARKWA		TERRACE TRAIL	F 10	4		ROA	DWAY	E-1	50		PP :-
1 - MILES 2 - FEET 1 3 - YARDS	R - NUMBERED TOWN ROUTE	U.	R - DRIVE E - HEIGHTS		PIKE PLACE	WA	- WAY	R	OADWA	Y DIVI	DED					
LOCATION OF FIRST HARMFUL EV			NNER OF CRAS					DIRECTI	ON OF T	RAVEL		MI	EDIAN	TYPE		
1 - ON ROADWAY 9 - CROSSON 2 - ON SHOULDER 10 - DRIVEW	ER AY/ALLEY ACCESS	D BE	COLLISION TWEEN O MOTOR		AR-TO-R Cking	EAR		i .	1 - NOR 2 - SOU			1 - DIVIC (< 4 I	ED FL		DIAN	
	GRADE CROSSING USE PATHS OR	r ⊸ ∧EI	HICLES IN	6 - AN 7 - SIC		E, SAME DI	RECTION		3 - EAS 4 - WES	Т		2 - DIVID (≥4 F	ED FL		DIAN	
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LA	NE	2 - REA 3 - HEA	AR-END	8 - SIC	ESWIPE		E DIRECTION		4 - WES	'		3 - DIVID 4 - DIVID				
7 - ON RAMP 14-TOLL BO 8 - OFF RAMP 99-OTHER		-		. •	,							(ANY) 9 - OTHE	TYPE) R/UNK			
WORK ZONE RELATED	WORK ZONE TYP	E	LOCATIO)N OF	CRASH I	N WORK	ZONE	CON	TOUR	Т	COND	ITIONS			IRFAC	
	LANE CLOSURE ? - LANE SHIFT/CROS	SOVER	1		ORE THE		RK ZONE	ے ا	1			1		٤	2	
I —	-WORK ON SHOULD		The second		NCE WA	RNING A	REA	1 - STRAI		- 1				1 - CONC		
	- INTERMITTENT OR	MOVING WOR	< 4	- ACTI	VITY AR	EA		2 - STRAI 3 - CURVI		- 1	- WET - SNOW			2 - BLAC BITU ASPI	MINOL	IS,
LIGHT CONDITION	- UTILEK	WEATH		- 1 - 11		II ANLA		4 - CURVI	,		- ICE		- 1	3 - BRIC		:к
1 - DAYLIGHT	1-CLE	AR	6 - SNOW					9 - OTHER	WUNKNO		- SAND, M OIL, GRA	VEL		4 - SLAG STON		EL,
2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT, SNOW 4 - DARK -							พดพพ									
4 - DARK - ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZING RAIN OR FREEZING DRIZZLE 7 - SLUSH 7 - SLUSH 5 - DARK - UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER/UNKNOWN 9 - OTHER/UNKNOWN																
9-OTHER/UNKNOWN	1				111			111		+				_	_	_
NARRATIVE Unit 1 was traveling south bound on Su	or Pun Trail Uni	it 1 driver et	atad ba	-					1			- 4		directi	te the ion wit 'on the	h
felt the tires hopping and pulled the stee	ring wheel to the	right. Unit 1	struck	-					-						ss diag	
Unit 2 in the driver side rear quarter pa rear and driver side of the vehicle, Unit	was parked lega	ally on the s	treet in						1							3
front of 1795 Sugar Run Trail and was a Salyers he crashed the truck a few wee				_									1			-
Trooper Huffman from Ohio State Patro																-
incident to determine if Unit 1 was safe Sergeant Salyers that the steering, tie re	ds and lugs nuts	to Unit 1 w	ere tight.													
The steering wheel did not have excess drive.	ve play and the t	ruck was sa	fe to	-												2
SEE ATTACHED DRAWING																-
BC on																7
							-									
				-												-
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL 06172019 1621 061720 061720							1 0	SCENE CLEARED DATE / TIME 06172019 1713 POLICE AGENCY								
TOTAL TIME OTHER TOT		Ir	771/2		TI	1 1 1	b BY OFFIC			11	<u> </u>	∸Įi	Шм	OTORIST	Т	
ROADWAY CLOSED INVESTIGATION TIME MINI	Warren	, Joshua		.			es, Ja	ckie			-ne-+	_[1	 (c(JPPLEM DRRECTION	N or ADD	ITION
1 60 1	1 60 112 OFFICER'S BADGE NUMBER* 7 CHECKED BY 0					UFFICER	rs BADE	E NUN	ABER"	5	то 2	AN EXISTING RE	PUMI SENT	n mSh2)		



49 - FIRE HYDRANT

30 - GUARDRAIL FACE

J FIRST HARMFUL EVENT

36 - MEDIAN OTHER BARRIER

42 - CULVERT

☐ MOST HARMFUL EVENT

ONE DEPARTMENT MOTORIST / NON-MOTORIST						19-000020						
UNIT # NAME: LAST, FIRST, MIDDLE O_1 HAAS, JARED SIDNEY						DATE OF BIRTH AGE GENDER 23 M						
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE				
0	3991 SCHEMLEY ST ENON OH 45323 937, 941-2540											
INJURIES 5	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDTAK	ENTO: MEDICAL FACIL	ITY (NAME, CITY	USED 04	DOT-COMPLIANT SEATING POSITION OF THE POSITION	TION AIR BAG USAGE EJECTION TRAPPED 1 1 1 1 1			
OL STATE OH	OPERATOR I	License number 625		OFFENSE	CHARGED	CODE	. OFFENSE DES	CRIPTION	CITATION NUMBER			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELEC	DI	STRACTED	ALCOHOL / DRUG SU		CONDITION	ALCOHOL TEST STATUS TYPE VALUE	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO 4			
4			BY	8 ALCOHOL MARIJUANA 1			1	$\begin{vmatrix} 1 & 1 \\ - & - \end{vmatrix}$				
UNIT #	NAME: LAST,	FIRST, MIDDLE						DATE OF BIRTH	AGE GENDER			
	STREET, CITY, ST	TATE, ZIP						CONTACT PHONE - INCLUDE AREA	A CODE			
OTORI				,								
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKE	EN TO: MEDICAL FACILI	TY (NAME, CITY	SAFETY EQUIPMENT	DOT-COMPLIANT SEATING POSIT	ION AIR BAG USAGE EJECTION TRAPPED			
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENSE (CHARGED	LOCAL	OFFENSE DES	CRIPTION	CITATION NUMBER			
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELEC		STRACTED			CONDITION	ALCOHOL TEST DRUG TEST(S) STATUS TYPE VALUE STATUS TYPE RESULT SELECT UP				
					OTHER DRUG							
UNIT#	NAME: LAST, I	FIRST, MIDDLE						DATE OF BIRTH	AGE GENDER			
ADDRESS:	STREET, CITY, ST	ATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE				
		EMS AGENCY (NAME)		INJURED TAKE	NTO: MEDICAL FACILI	TY (NAME, CITY)		DOT-COMPLIANT SEATING POSITI	ION AIR BAG USAGE EJECTION TRAPPED			
NON L	TAKEN BY	YOCH A HUMBER		2555405 6	W. DOSD	1.004	USED	MC HELMET				
OL STATE	UPERATUR L	ICENSE NUMBER		OFFENSE C	MARGED	CODE	OFFENSE DESC	RTL 110M	CITATION NUMBER			
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED	ALCOHOL / DRUG SUS	PECTED IARIJUANA	CONDITION	STATUS TYPE VALUE	STATUS TYPE RESULT SELECT UP TO 4			
L IN III	RIES	SEATING POSITION		IR BAG	OTHER DRUG	100	OL RESTRIC	TION(S) DRIVER DISTRAC	CTION TEST STATUS			
1- FATAL	KIL J	1 - FRONT - LEFT SIDE	1 - NOT DEF		1-CLASS A		1 - ALCOHOL INTER		1 - NONE GIVEN			
2 - SUSPECTED S 3 - SUSPECTED F		(MOTORCYCLE DRIVER) 2 - FRONT – MIDDLÉ	2 - DEPLOY 3 - DEPLOY		2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE	NSFS ELECTRONIC COMMU	INICATION 3. TEST GIVEN CONTAMINATED			
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE		ED BOTH FRONT / S	IDE 4-REGULAR CLAS	S	4 - FARM WAIVER	DEVICE (TEXTING, TY DIALING)	PRING, SAMPLE/UNUSABLE			
5 - NO APPARENT	T INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	LICABLE MENT UNKNOWN	(OHIO = D) 5 - M/C MOPED ONL	Y	5 - EXCEPT CLASS	2 (REIGHTO ON TIAMOOT	VICE 5 - TEST GIVEN, RESULTS			
	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	, 55,50	men catalon	6 - NO VALID OL		& CLASS B BUS	4 - TALKING ON HAND-HI				
1 - NOT TRANSPO /TREATED AT		7 - THIRD - LEFT SIDE	E.	ECTION	OL ENDORS	EMENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE	LICENSE 5 - OTHER ACTIVITY WIT	THAN I NOME			
2 - EMS	g TUIDD MIDDLE			- NOT EJECTED H - HAZMAT - PARTIALLY EJECTED M - MOTORCYCLE			RESTRICTIONS 9 - LEARNER'S PER	ELECTRONIC DEVICE MIT 6 - PASSENGER	2 - BLOOD			
9-OTHER/UNK	NOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY		P - PASSENGER		RESTRICTIONS	7 - OTHER DISTRACTION				
SAFETY EC	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOT APP	LICABLE	N - TANKER Q - MOTOR SCOOTE		10 - LIMITED TO DAY 11 - LIMITED TO EMP	PLOYMENT 8 - OTHER DISTRACTION				
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		RAPPED	R - THREE-WHEEL		12 - LIMITED - OTHE	9 - OTHER / HAKNOWN	DRUG TEST TYPE			
2 - SHOULDER BE 3 - LAP BELT ONL		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA 2 - EXTRICA		S - SCHOOL BUS	F TDAIL FDS	13 - MECHANICAL DE (SPECIAL BRAKE	ES, HAND	1 - NONE			
4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED CARGO AREA		MECHAN 3 - FREED B	ICAL MEANS		T - DOUBLE & TRIPLE TRAILERS CONTROLS, OR OTH X - TANKER / HAZMAT ADAPTIVE DEVICE		CES) 1 - APPARENTLY NORMAI	2 52505				
FORWARD FACING 13 - TRAILING UNIT			ON-MECHANICAL MEANS GENDER			14 - MILITARY VEHICLE	E - I II I DIONE IMI ALIMINE	1 OTHER				
6 - CHILD RESTR REAR FACING		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)			F-FEMALE		AIR BRAKES	ANGRY, DISTURBED)	DRUG TEST RESULT(S)			
7 - BOOSTER SEA		15 - NON-MOTORIST 99 - OTHER / UNKNOWN			M - MALE U - OTHER / UNKNOV	VN .	16 - OUTSIDE MIRRO 17 - PROSTHETIC AID	1 12811200	1 - AMPHETAMINES D, 2 - BARBITURATES			
8 - HELMET USE 9 - PROTECTIVE I		77 - UTDER I UNKRUMN					18 - OTHER	FATIGUED, EŤC. 6- UNDER THE INFLUENC	3 - BENZODIAZEPINES			
(ELBOW, KNEE								OF MEDICATIONS / DRI /ALCOHOL				
11 - LIGHTING PI	10- REFLECTIVE CLOTHING 11- LIGHTING - PEDESTRIAN / BICYCLE ONLY							9- OTHER / UNKNOWN	IOWN 6-OPIATES/OPIOIDS 7-OTHER			
77 - UTHERT UNKA	I TRUIT			Section 1	المادودالة		HE I FE	To a Salar a lager	8 - NEGATIVE RESULTS			

		7		DATE OF CRASH
LOCAL REPORT NUMBER	19-0020	REPORTING AGENCY BELLEROUX	POLICE	Mac /D/7 /4 19
MOMBELL				

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

1. DAVID HYATT	HEREBY MAKE THIS VOLUNTARY STATEMENT TO
(PRINTED)	AT 1795 Sugar RUN TRAIL
(OFFICERS NAME)	(LOCATION)
At 3:57 pm 6/17/1	19 My daughter called
me to tell me l	ner car was just hit by
a delivery driver	. It Eools 5 MINNTES and I
came to 1799 Sugar	r Run TRAIL: The driver of
	or truck hit her left back
Hyundai Santa to 2	1004. He claims he was in
an accident last	week and truck was not fixe
He told us that	Something was wrong with
The Truck Causing	him to hit her car.
+	
RESS 4018 Clenberry Circle	e Bellbrock OH 45305 937-848-6106
ATURE TO TO THE TOTAL TO THE TOTAL T	OFFICERS SHENATURE
7003 1/82	4000

			DATE OF CRASH
LOCAL REPORT NUMBER	19-0020	REPORTING AGENCY BELLBROOK POUCES	Mob 1017 1419

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

(PRINTED)	HEREBY MAKE THIS VOLUNTARY STATEMENT TO
WARREN	AT 1795 SUGAN RAN TRAIL
(OFFICERS NAME)	Sagar Ray trail when
MENTAL GENT	Jugar Trust Harri
the track Started hopping	g and made the
truck jump to 4	he right causeing the
truck to hit the	Hyundai. I proceeded to
truck to hit the pull over then to	- has now loss
pull over then to	give my IIIw.
	*
<u> </u>	
	•
	I DUOVE
NESS 3991 Schenley St Enon, OH	145313 PHONE 1931 941-2540
NESS SILL SCHOOL OF	FICERS SIGNATURE 1237
NESS and tags	C/h V 31