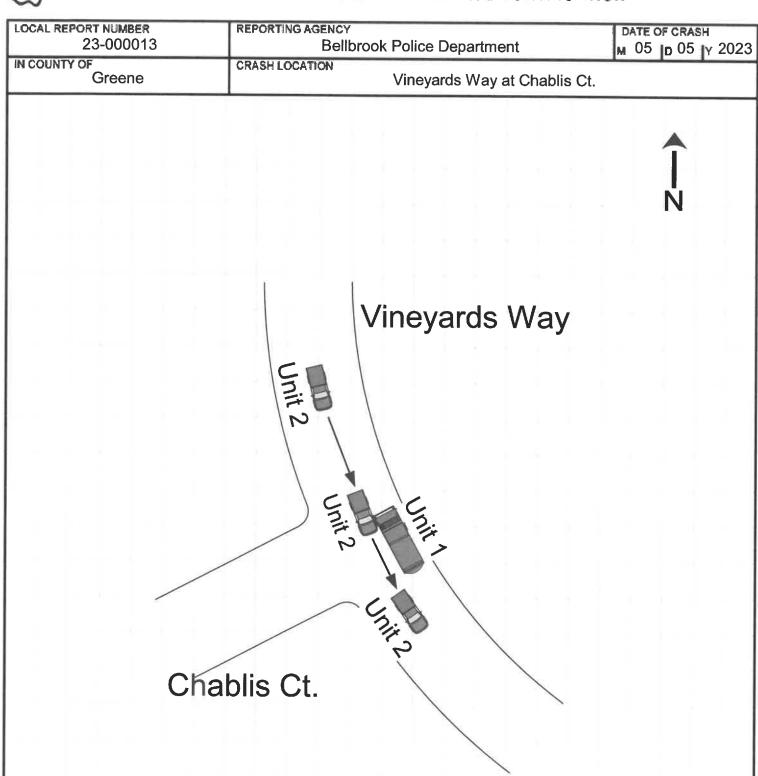
| CHO DICASTANDA TRAFFIC CRASH   | REPORT *DENOTES MANDAT                           | TORY FIELD FOR SUPPLEM                             | LOCAL REPORT NUMBER*                       |  |  |   |  |  |  |
|--|--|--|--|--|--|---|--|--|--|
| M PHOTOS TAKEN OH-2 X 0H-3   | LOCAL INFORMATION                                |  | 23-000013                                  |  |  |   |  |  |  |
| SECONDARY CRASH PRIVATE PROPERTY   | REPORTING AGENCY NAME*  Bellbrook Police Departm | mont 0   | 7 1- SOLVED                                | NUMBER OF UNITS  | UNIT IN ERROR 98 - ANIMAL  |   |  |  |  |
|  | , VILLAGE, TOWNSHIP*                             | nent <u>o</u>                                      | 2,9,0,5,                                   | 2 - UNSOLVED   |  | 199 - UNKNOWN                                 |  |  |  |
| 29 1 1 2-VILLAGE Bellbrook   | ,  |  |  | 05052023 1235 5 1-FATAL                                  |  |   |  |  |  |
| 3-10WRSHII   | LOCATION ROAD NAME                               |  | ROAD TYPE                                  | Z - SERIOUS INJURY                                       |  |   |  |  |  |
| ROUTE TYPE ROUTE NUMBER PREFIX 1- NUMBER 2- SOUTH 2- SOUTH 3- EAST 4- WEST       | Vineyards  |  | WA   | 3-MINOR INJURY   |  |   |  |  |  |
| ROUTE TYPE ROUTE NUMBER PREFIX 1 - NORTH 2 - SOUTH                               | REFERENCE ROAD NAME (ROAD, MILE                  | EPOST, HOUSE #)                                    | ROAD TYPE                                  |  |  |   |  |  |  |
| 3 - EAST 4 - WEST  | Chablis  |  | CT   | -84, 082770 5- PROPERTY DAMAGE                           |  |   |  |  |  |
| REFERENCE POINT DIRECTION  | ROUTE TYPE                                       | ROAD TYPE  |  |  | INTERSECTION RELATE  |   |  |  |  |
| 1 - INTERSECTION 1 - NORTH IR -  | FEDERAL US ROUTE AV - AVEN                       |  | RD - ROAD<br>SQ - SQUARE                   | WITHIN INTERSECTION OR ON APPROACH                       |  |   |  |  |  |
| 3- HOUSE # 3- EAST   | STATE ROUTE BL - BOUL                            | JLEVARD MP - MILEPOST S                            | ST - STREET                                | WITHIN INTERCHANGE AREA NUMBER OF APPROACHES             |  |   |  |  |  |
| DISTANCE DISTANCE CR -   | NUMBERED COUNTY ROUTE CR - CIRC                  |  | E - TERRACE                                | ROADWAY  |  |   |  |  |  |
| 2-FEET   | NUMBERED TOWNSHIP DR - DRIV                      |  | VA - WAY                                   | ROADWAY DIVIDED  |  |   |  |  |  |
|  | HE - HEIG  |  |  |  |  |   |  |  |  |
| LOCATION OF FIRST HARMFUL EVEN  1 - ON ROADWAY 9 - CROSSOVER                     |  | OF CRASH COLLISION/IMPA<br>LISION 4 - REAR-TO-REAR | CT   | DIRECTION OF TRAVEL  1 - NORTH  1 - DIVIDED FLUSH MEDIAN |  |   |  |  |  |
| 2 - ON SHOULDER 10 - DRIVEWAY/ 3 - IN MEDIAN 11 - RAILWAY G                      | TWO MOTO   | TOR S-BACKING                                      |  | 2-SOUTH (<4 FEET)  |  |   |  |  |  |
| 4 - ON ROADSIDE 12 - SHARED US   | E PATHS OR TRANSPOR                              | ORT 7 - SIDESWIPE, SAM                             |  | 3 - EAST 2 - DIVIDED FLUSH MEDIAN<br>(≥4 FEET)           |  |   |  |  |  |
| 5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE                          | 2 - REAR-END<br>3 - HEAD-ON                      | ,  |  | 3 - DIVIDED, DEPRESSED ME<br>4 - DIVIDED, RAISED MEDIAN  |  |   |  |  |  |
| 7 - ON RAMP 14-TOLL BOOTI<br>8 - OFF RAMP 99-OTHER / UN                          |  |  |  | (ANY TYPE)<br>9 - OTHER/UNKNOWN                          |  |   |  |  |  |
| G-GIY KAMI   |  | LOCATION OF CRASH IN WO                            | IDV ZONE                                   | CONTOUR  | CONDITIONS   | SURFACE                                       |  |  |  |
|  | LANE CLOSURE                                     | WORK ZONE  | 4  | . 1 .  | 2  |   |  |  |  |
| 3 -1   | LANE SHIFT/CROSSOVER WORK ON SHOULDER            | WARNING SIGN<br>2 - ADVANCE WARNIN                 | IG AREA                                    | 1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRETE                  |  |   |  |  |  |
| LAW ENFORCEMENT PRESENT  | OR MEDIAN INTERMITTENT OR MOVING WORK            | 3 - TRANSITION AREA 4 - ACTIVITY AREA              | ١  | 2 - STRAIGHT GRADE 2 - WET 2 - BLACKTOP,                 |  |   |  |  |  |
|  | OTHER  | 5 - TERMINATION AR                                 | EA   | 3 - CURVE LEVEL 3 - SNOW BITUMINOUS, ASPHALT             |  |   |  |  |  |
| LIGHT CONDITION  | WEATHER  |  |  | 4 - CURVE GRADE 9 - OTHER/UNKNOWN                        | 4 - ICE<br>5 - SAND, MUD, DIRT,  | 3 - BRICK/BLOCK                               |  |  |  |
| 1 - DAYLIGHT   | 1 1  | SNOW<br>SEVERE CROSSWINDS                          |  | ,                  | OIL, GRAVEL  | 4 - SLAG, GRAVEL,<br>STONE                    |  |  |  |
| 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY   | 2 - CLOUDY 7 - S<br>3 - FOG, SMOG, SMOKE 8 - B   | , SNOW   | 6 - WATER (STANDING, MOVING) 5 - DIRT      |  |  |   |  |  |  |
| 4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING               |  | NG DRIZZLE   | 7 - SLUSH 9 - OTHER/U<br>9 - OTHER/UNKNOWN |  |  |   |  |  |  |
| 9 - OTHER / UNKNOWN  |  |  |  |  |  |   |  |  |  |
| NARRATIVE  |  |  | r Li                                       |  | A  | Indicate the north                            |  |  |  |
| Unit 1 was northbound on Vineyards Way   |  | _  |  |  |  | direction with an "N" on the compass diagram. |  |  |  |
| southbound on Vineyards Way approaching approaching. Unit 1 slowed down and pull |  |  |  | compass diagram.   |  |   |  |  |  |
| make room for Unit 2. Unit 2 sideswiped Unit 1 but then turned arou              |  |  |  |  |  |   |  |  |  |
| the units spoke. Unit 1 offered to call the r                                    | police, but Unit 2 said it was not               |  |  |  |  |   |  |  |  |
| necessary and left without exchanging info                                       | ormation.  |  |  |  |  |   |  |  |  |
| It appears the residence at 3831 Vineyard  | s Way has a doorbell camera. I                   |  |  |  |  | =   |  |  |  |
| debris in the intersection. The debris appe                                      |  |  |  |  |  |   |  |  |  |
| Photos were taken.   |  |  |  |  |  |   |  |  |  |
| See-OH-2-for-diagram.  |  |  |  |  |  |   |  |  |  |
|  |  |  |  |  |  |   |  |  |  |
|  |  |  |  |  |  |   |  |  |  |
|  |  |  |  |  |  |   |  |  |  |
|  |  | -  |  |  |  |   |  |  |  |
| CRASH REPORTED DATE / TIME   |  | SCENE CLEARED                                      | E91  | EPORT TAKEN BY   |  |   |  |  |  |
| 05052023 1150 050  | 56 0   | 5052023  | 1236                                       | POLICE AGENCY MOTORIST                                   |  |   |  |  |  |
|  | CRECKED DY CI                                    |  |  |  |  |   |  |  |  |
|  | C OFFICER'S BADGE NUMBER* CHEC                   |  |  |  | Ohn  By OFFICER'S BADGE NUMBER*  SUPPLEMENT (CORRECTION OF ADDITION TO ME EXISTING REFORM SENT TO GOO'S) |   |  |  |  |
| 0   0   4  | O I  | 4 8  |  |  | 3 , 3  |   |  |  |  |



## OHIO TRAFFIC CRASH REPORT DIAGRAM / NARRATIVE CONTINUATION



NOT TO SCALE

BADGE NUMBER

OFFICER'S SIGNATURE Law #48

**LOCAL REPORT NUMBER** 

| MOTORIST / NON-MOTORIST  |   |  |   |  |   |  | 23-000013  |   |   |   |  |                                      |   |                       |  |
|--|---|--|---|--|---|--|--|---|---|---|--|--------------------------------------|---|-----------------------|--|
| UNET # NAME: LAST, FIRST, MIDDLE Davis, Issac Miles                                      |   |  |   |  |   |  | 02192000 AGE GENDER 23 M   |   |   |   |  |                                      |   |                       |  |
| TORIST   | ADDRESS: STREET, CITY, STATE, ZIP  125 Brumbaugh Ct Union OH 45322                              |  |   |  |   |  |  |   |   | CONTACT PHONE - INCLUDE AREA CODE   |  |                                      |   |                       |  |
| NON-MOTORIS  | INJURIES  | INJURED<br>TAKEN<br>BY   | EMS AGENCY (NAME)   | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  SAFETY EQUIPMENT USED 7 |   |  |  | DOT-Com   |   | N AIR BAG USA   | GE EJECTION  | TRAPPED                              |   |                       |  |
| OTORIST /  | OL STATE  | OPERATOR I   | R LICENSE NUMBER OFFENSE CHAR   |  |   | RGED   | LOCAL<br>CODE  | OFFENSE DESC  | RIPTION   |   | CITATION NUMBER  |                                      |   |                       |  |
|  | OL CLASS  | ENDORSEMENT<br>SELECT UP TO 2  | RESTRICTION SELECT  |  | VER<br>TRACTED  |  | OHOL / DRUG SUSPI  |   | CONDITION   | STATUS TYP  | HOL TEST<br>PE VALUE   |                                      | UG TEST(S<br>PE RESUL   | )<br>T select up yo 4 |  |
|  | UNIT #  | NAME: LAST,  | FIRST, MIDDLE   |  | OTHER DRUG  |  |  |   |   | DATE OF BIRTH   |  |                                      |   |                       |  |
|  | 02  |  |   |  |   |  |  | DATE OF BIRTH AGE GEND M  |   |   |  |                                      |   |                       |  |
| OTORIS   |   |  |   |  | 0) =  |  |  |   |   | CONTACT P   | HONE - INCLUDE AREA CI   | ODE                                  | 1 1   | 1 1                   |  |
| NON-N  | NJURIES 5   | INJURED<br>TAKEN<br>BY   | EMS AGENCY (NAME)   |  | INJUREDT  | INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) USED ( |  |   |   | DOT-COM   |  | AIR BAG USA                          | GE EJECTION   | TRAPPED               |  |
| TORIST   | DL STATE  | OPERATOR L   | ICENSE NUMBER   |  | OFFENSE CHARGED LOCAL OFFENSE DES   |  |  |   | OFFENSE DESC  | CRIPTION CITATION NUMBER  |  |                                      |   |                       |  |
| M  | DL CLASS  | ENDORSEMENT<br>SELECT UPTO 2   | RESTRICTION SELECT  |  | VER<br>TRACTED  | _  | OHOL / DRUG SUSPE  |   | condition 9   | STATUS TYP  | HOLTEST<br>E VALUE   | STATUS TY                            | UG TEST(S<br>PE RESUL   | SELECT UP TO 4        |  |
| ľ  | UNIT#   | NAME: LAST,  | FIRST, MIDDLE   |  | OTHER DRUG  |  |  |   | DATE OF BIRTH AGE GENDE   |   |  |                                      |   |                       |  |
| TSI  | ADDRESS: STREET, CITY, STATE, ZIP   |  |   |  |   |  |  |   | CONTACT PHONE - INCLUDE AREA CODE   |   |  |                                      |   |                       |  |
| I-MOTORI   | INJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME CITY) SAFFTY FOUIPM |  |   |  |   |  |  | SAFETY EQUIPMENT  | SEATING DISTITION ATT DAS USED TO SEATING DISTING   |   |  |                                      |   |                       |  |
| ST / NON   | DL STATE  | STATE OPERATOR LICENSE NUMBER OFFENSE CHA  |   |  | RGFD  | LOCAL  | USED OFFENSE DESC  | DOT-COMP  | LIMMI   | 1   |  |                                      |   |                       |  |
| MOTORI   | DL CLASS  | ENDORSEMENT  |   |  |   |  | CODE   |   |   | J. A. J. J. Holling C.  |  |                                      |   |                       |  |
|  | JE GENSS  | SELECT UPTO 2 DISTRACTED BY  |   |  | ALCOHOL MARIJUANA OTHER DRUG  |  | CONDITION  | STATUS TYP  |   | STATUS TY   | DE RESULT  | SELECT UP TO 4                       |   |                       |  |
| 1  | INJU  | RIES   | SEATING POSITION  1-FRONT-LEFT SIDE   | A 1 - NOT DEP  | IR BAG  |  | OL CLASS   | SISVES  | OL RESTRIC  |   | DRIVER DISTRACT  |                                      | TEST STA  | TUS                   |  |
| 3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY 5 - NO APPARENT INJURY 1 - NOTTRANSPORTED |   | 3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF TRUCK CAB 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST | 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT / SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN  EJECTION 1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE  TRAPPED 1 - NOTTRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - FREED BY NON-MECHANICAL MEANS |  | 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO = D) 5 - MAC MOPED ONLY 6 - NO VALID OL  OL ENDORSEMENT H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOTORCYCLE S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS X - TANKER / HAZMAT  GENDER F - FEMALE M - MALE U - OTHER / UNKNOWN |  | 2 - CDL INTRASTATE 3 - CORRECTIVE LEM 4 - FARM WAIVER 5 - EXCEPT CLASS A 6 - EXCEPT CLASS A 7 - & CLASS B BUS 7 - EXCEPT TRACTO! 8 - INTERMEDIATE RESTRICTIONS 10 - LIMITED TO DAYL 11 - LIMITED TO EMP 12 - LIMITED TO THEI 13 - MECHANICAL DE (SPECIAL BRAKE CONTROLS, OR OT ADAPTIVE DEVIC 14 - MILITARY VEHICLES AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER | NSES  BUS  BUS  R-TRAILER  LICENSE  MIT  LIGHT ONLY  LOYMENT  R  VICES  S, HAND  HER  ES)  LES ONLY  WITHOUT  3 | ES ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING, DIALING)  US 3 - TALKING ON HANDS-FREE COMMUNICATION DEVICE  4 - TALKING ON HAND-HELD COMMUNICATION DEVICE  5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE  7 - OTHER DISTRACTION INSIDE THE VEHICLE  SHOULY PARENT B - OTHER JUNKNOWN  CONDITION  SI 1 - APPARENTLY NORMAL SIS ONLY 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (LEG., DERRESSED, AMORY, DISTURBED)  4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. |   | 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 TYPE  1-NONE  2-BLOOD  3-URINE  4-OTHER  ORUG TEST TYPE  1-AMPHETAMINES  2-BARBITURATES  3-BENZODIAZEPINES |                                      |   |                       |  |
| 10 -<br>11 -<br>99 -   |   | ES, ETC.)<br>CLOTHING<br>EDESTRIAN<br>LY<br>NOWN   |   |  |   |  |  |   |   | 6 - UNDER THE INFLUENCE<br>OF MEDICATIONS / DRUGS<br>/ ALCOHOL<br>9 - OTHER / UNKNOWN |  | 4 - CA<br>5 - CC<br>6 - OF<br>7 - OT | 4 - CANNABINDIDS 5 - COCAINE 6 - OPLATES / OPLOIDS 7 - OTHER 8 - NEGATIVE RESULTS |                       |  |



## TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER

73-000784

REPORTING AGENCY

BELLBROOK PD

DATE OF CRASH

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

| I, Issac Davis HEREBY MAKE THIS VOLUNTARY STATEMENT TO                                       |
|--|
| Steve lane at 3831 Vineyards way Bell brook OFFICER'S NAME  AT 3831 Vineyards way Bell brook |
|  |
| I had Just finish collecting recycle and was   |
| leaving the plat when I saw another in a   |
| blackish colored pickup truck driving in the   |
| middle of the road towards me in the opposite  |
| direction and I slowed down moved over to the  |
| right side as close as I could and I clipped mirrors   |
| with the driver I stopped the truck and checked  |
| the damage done to the left driver side and I  |
| notized the driver had turned around and pulled  |
| behind me we approached each other he was about  |
| b feet tall he was a Caucasian male blue jeans   |
| black Jacket and nat with facial hair hair grey  |
| colored. I told him I could take pictures and  |
| give him my bosses phone number and he   |
| said no he was olkay and that he thought he  |
| missed his turn and that he was looking  |
| down and he saw me at the last second and  |
|  |
| and left the area/plat   |
|  |
| ADDRESS OF WITNESS 125 Brumbaugh Court Union 01+, 45322 PHONE                                |
| SIGNATURE OF WITNESS  X  OFFICER'S SIGNATURE  X  CAPT- S- Z- + 44                            |
| 1 CAPICAL OF   |