OHIO DEPARTMENT TRAF	FIC CRASH	REPORT *DENOTE	ES MANDATORY FIELD	FOR SUPPLEME	ENT REPORT	L L	OCAL REPORT NUMBER	*
		LOCAL INFORMATION				2,0,2,4,	- ,0,0,0,1,0	0.6.0.2.
	OH-1P 🔲 OTHER	REPORTING AGENCY NAME	*		NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR
SECONDARY CRASH	PRIVATE PROPERTY	Bellbrook Pol	ice	,0,2	2,9,0,5,	1 - SOLVED	0,2, ,0	98 - ANIMAL 99 - UNKNOWN
COUNTY* LOCALITY*	LOCATION: C	ITY, VILLAGE, TOWNSHIP*				CRASH DATE /1		SH SEVERITY
2.9 1 2-VILLAG		rook				12232024	2100 5	- FATAL
	PREFIX 1 - NORTH	LOCATION ROAD NAME			ROAD TYPE	LATITUDE DE		- SERIOUS INJURY SUSPECTED
ROUTE TYPE ROUTE NUMBER	2-SOUTH 3-EAST	I			D B	,3,9 <sub>2</sub> ,6,3,4,	1 5 0 3	- MINDR INJURY
ROUTE TYPE ROUTE NUMBER	4-WESI	Lakeman REFERENCE ROAD NAME (I	SOAR WILEBOOT HOLE	PE 41	D R ROAD TYPE	LONGITUDE DE		SUSPECTED
ROOTE TIPE ROOTE NOMBER	2 - SOUTH 3 - EAST		toad, miller 03 i, noo.	SE #)	ROADTIPE			- INJURY POSSIBLE - PROPERTY DAMAGE
	4-WEST	2139				-84 <u>,</u> 1,0,2,	6,5,2,	ONLY
REFERENCE POINT DI	RECTION IN REFERENCE	ROUTE TYPE	The state of the s	DADTYPE	D DAMO		INTERSECTION RELATE	D
3 2-MILE POST 3	2 - 1001(711	S - FEDERAL US ROUTE	TALL DESIGNATION OF THE PARTY O		D - ROAD Q - SQUARE	WITHIN INTE	RSECTION OR ON APPROA	/CH
3- HOUSE #	- 3-EASI	R-STATE ROUTE	BL - BOULEVARD ME		T -STREET	WITHIN INTER	RCHANGE AREA NUN	IBER OF APPROACHES
	ISTANCE CF	R - NUMBERED COUNTY ROUTE	A STATE OF THE RESIDENCE OF THE PARTY OF THE		E - TERRAGE	I PARTY	ROADWAY	I ALL TO ALL S
FROM REFERENCE UNII		R - NUMBERED TOWNSHIP	THE RESERVE AND ADDRESS OF THE PARTY OF THE		L - TRAIL /A - WAY			
1.0. 3	2-FEET 3-YARDS	ROUTE	HE - HEIGHTS PL	- PLACE		ROADWAY DIV	IDED	
LOCATION OF FI	RST HARMFUL EVE	INT	MANNER OF CRASH C	OLLISION/IMPAG	СТ	DIRECTION OF TRAVE	MEDIA	N TYPE
1 - ON ROADWAY	9 - CROSSOVE		NOT COLLISION 4 - R BETWEEN 5 - R			1 - NORTH	1 - DIVIDED F	LUSH MEDIAN
0 1 2-ON SHOULDER 3-IN MEDIAN		GRADE CROSSING	TWO MOTOR	ACKING NGLE		2-SOUTH	2 - DIVIDED	LUSH MEDIAN
4 - ON ROADSIDE		USE PATHS OR	4 THIO PRO IN	IDESWIPE, SAME	DIRECTION	3 - EAST 4 - WEST	(≥4 FEET	`}
5 - ON GORE 6 - OUTSIDE TRAFFIC	TRAILS			SIDESWIPE, OPPO: OTHER/UNKNOW				DEPRESSED MEDIAN RAISED MEDIAN
7 - ON RAMP	14-TOLL BOO	отн	- 112MD-014 9-1	THER THRINGS	***		(ANY TYP	E)
8 - OFF RAMP	99-OTHER/L	INKNOWN					9 - OTHER/UN	IKNOWN
WORK ZONE RELATED		WORK ZONE TYPE	1	F CRASH IN WO		CONTOUR	CONDITIONS	SURFACE
WORKERS PRESENT	- 1	LANE CLOSURE ! - LANE SHIFT/CROSSOVER		FORE THE 1ST V ARNING SIGN	VORK ZONE	<u>1</u>	1	2
LAW ENFORCEMENT PRE		-WORK ON SHOULDER		VANCE WARNIN		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE
LAW ENFORCEMENT PRE		OR MEDIAN - INTERMITTENT OR MOVING		ANSITION AREA		2 - STRAIGHT GRADE	2-WET	2 - BLACKTOP,
ACTIVE SCHOOL ZONE		- OTHER		RMINATION ARE	ΕA	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT
LIGHT CONDIT	TION .	W	EATHER			4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK
1 - DAYLIGHT		1 - CLEAR	6 - SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE
4 2-DAWN/DUSK		O1 2-CLOUDY	7 - SEVERE CR				6 - WATER (STANDING,	5 - DIRT
3 - DARK – LIGHTED R 4 - DARK – ROADWAY I		3 - FOG, SMOG, S 4 - RAIN	MOKE 8-BLOWING S. 9-FREEZING F	AND, SOIL, DIRT, RAIN OR FREEZII			MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN
5 - DARK – UNKNOWN	ROADWAY LIGHTIN		99 - OTHER / UI				9 - OTHER/UNKNOWN	
9 - OTHER / UNKNOWN								
NARRATIVE			-	2 4	G 1 3			Indicate the north
Unit 2 was parke								an "N" on the compass diagram.
Lakeman Dr. Uni							V	compass utagram.
Lakeman Dr. and			struck					
the driver side m	irror of Uni	it 2.	-					
BWC ON	_							
								-
			-	0	0	~ _	VI IC	
					$\Theta$	$\Rightarrow$ (	)H2	
								-
			-					-
				_				
				<u> </u>				
CRASH REPORTED DATE /	TIME	DISPATCH DATE / TIME	ARRIV	AL DATE / TIME		SCENE CLEARED I		EPORT TAKEN BY
1, 2, 2, 3, 2, 0, 2, 4, , 2	1,0,0,1,2	2,3,2,0,2,4, ,2,1,0	4 1,2,2,3,2	0, 2, 4, , 2,	1,1,0, 1	L, 2, 2, 3, 2, 0, 2, 4	1 2141 X	
TOTAL TIME OTH ROADWAY CLOSED INVESTIGA	IER TOT	AL OFFICER'S NAME*		Сн	ECKED BY OFFI	CER'S NAME*		MOTORIST
RUADWAT GLUSED INVESTIGA	ITION TIME MINU	Johnston		W	/illiams			SUPPLEMENT (CORRECTION OR ADDITION)
ر م ا م	,   .,		'S BADGE NUMBER*		CHECKED E	ov OFFICER'S BADGE N	UMBER*	TO AM EXISTING REPORT SENT TO BOPS)
0 6 0	) ; ; [1](	0,2 B B	4 3		J	4 2		PAGE 1 OF 5
HSY7001 OH1 1/19 [760-0820]								PAGE OF

LOCAL REPORT NUMBER

# 2,0,2,4,-,0,0,0,1,0,6,0,2,

UNIT#	U-Haul,	(NER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER)  OWNER PHONE: INCLUDE AREA CODE ( SAME AS DRIVER)  18   0   0   4   6   8   4   2   8   5				LI EKO, THINETY	DAMAGE DAMAGE SCALE	
OWNER ADDRESS: STREET, CITY, STATE, ZIP ( SAME AS DRIVER)  2727 N Central AV Avenue Phoenix, AZ 85004						1 - NONE	3 - FUNCTIONAL DAMAGE	
	CENTRAL AV AVER		Z-INITHORDA	AMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN				
				L. L. L. L.	PHONE: INCLUDE AREA CODE	DAMAGED AREA(S)		
(A,Z)	AJ74823	1,G,D,Y,7,R,F	E IDENTIFICATION # F <sub>1</sub> G <sub>1</sub> 5 <sub>1</sub> K <sub>1</sub> 1 <sub>3</sub> 2 <sub>1</sub> 6 <sub>1</sub> 6		9 GMC	INDIC	ATE ALL THAT APPLY	
INSURA VERIF	NCE INSURANCE COME ED STANDARD F		NSURANCE POLICY # 5164473452031	COLOR WHI	VEHICLE MODEL Savana full-sz	E-Man (2	10 12 2	
СОММЕ		IN EMERGENCY RESPONSE	US DOT #		OUS MATERIAL	9 10 2 3	3 9 3	
INTER DEVICE EQUIP		O 1	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	PLACARD	CLASS # PLACARD ID #	8 7 6 5	8 7 5 4 11 12 1 8 5	
_0,5, UNIT TYPE	1 - PASSENGER CAR 2 - PASSENCER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS) # OF TRAILING UNITS	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10-MOPED OR MOTORIZED BICYCLE 11 - ALLTERRAIN VEHICLE (ATY/UTY)	13 - SNOWMOBILE         15           14 - SINGLE UNIT TRUCK         26           15 - SEMI-TRACTOR         27	B-LIMO (LIVERY VEHICLE)  3-BUS CIG+ PASSENGERS)  1-OTHER VEHICLE  1-HEAVY EQUIPMENT  2-ANIMAL WITH RIDER DR  ANIMAL-ORAWN VEHICLE	23-PEDESTRIAN / SKATER 24-WHEELCHAIR (ANY TYPE) 25-OTHER NON-MOTORIST 26-BICYCLE 27-Train 99-Unknown or hit/skip	10	12 11 12 2 9 3 6 6 6 7 6 5	
_2_	WAS VEHICLE OPERATING IN AU Mode when crash occurred 1-yes 2-no 9-other/unk	)? NOWN AUTONOMOUS MODE LEVEL	1 - DRIVER ASSISTANCE 4	- CONDITIONAL AUTOMATION - High automation - Full automation	9 - UNKNOWN	10 12 1 10 10 2 9 3	10 11 12 1 2 1 10 1 10 2 3 3 3 3	
O 1 SPECIAL FUNCTION	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	9 - BUS - OTHER	12 - MILITARY II 13 - POLICE II	5 - FARM 7 - Mowing 8 - Snow Removal 9 - Towing ) - Safety Service Patrol	21 - MAIL CARRIER 99 - DTHER/ UNKNOWN	7 6 5	8 7 5 4 6 6 5	
O 6 CARGO BODY TYPE	1 - NO CARGO BODYTYPE / NOT APPLICABLE 2 - BUS	3 - VEHICLETOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	CHASSIS 9 6 - CARGO VANVENCLOSED BOX 10	- POLE - CARGOTANK )-FLAT BED I-DUMP	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER/ UNKNOWN	9 3 9	3 9 3 9 3	
VEHICLE DEFECTS	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - Steering 6 - Tire Blowout		- MOTOR TROUBLE ) - Disabled from Prior Accident	99-OTHER/UNKNOWN	6  R- NO DAMAGE I	6 6 6	
NON-MOTORIST LOCATION AT IMPACT	1 - INTERSECTION – MARKED CROSSWALK 2 - INTERSECTION – UNMARKED CROSSWALK	3 - INTERSECTION – OTHER 4 - MIDBLOCK – MARKED CROSSWALK 5 - TRAVEL LANE – OTHER LOCATION	7 - SHOULDER / ROADSIDE 10 8 - SIDEWALK 13	- MEDIAN/CROSSING ISLAND - DRIVE WAY ACCESS - SHARED USE PATHS OR TRAILS	12-FIRST RESPONDER AT INCIDENT SCENE 99-OTHER/UNKNOWN		O - UNDERCARRIAGE [14] - ALL AREAS [15] T NOT AT SCENE [16]	
3 ACTION	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER/ UNKNOWN	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LAHES 4 - OVERTAKINO/PASSING 5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 16	- NEGOTIATING A CURVE  - ENTERING OR CROSSING SPECIFIED LOCATION  - WALKING, RUNNING, JOGGING, PLAYING  - WORKING  - PUSHING VEHICLE	18-APP ROACHING OR LEAVING VEHICLE 19-STANDING 20-OTHER NON-MOTORIST 21-STANDING OUTSIDE OISABLEOVEHICLE 99-OTHER/UNKNOWN	0 - NO DAMA	TO UNIT 15 - VEHICLE NOT AT SCENE AM 99 - UNKNOWN	
	1 - NONE	7-LEFT OF CENTER	13 - IMPROPER START FROM A 17	- VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC	
9,9,  CONTRIBUTING CIRCUMSTANCES		8-FOLLOWING TOO CLOSE / ACDA 9-IMPROPER LANE CHANGE 10-IMPROPER PASSING 11-DROVE OFF ROAD	PARKED POSITION  14-STOPPED OR PARKED  ILLEGALLY  15-SWERVING TO AVOID	- OPERATING DEFECTIVE EQUIPMENT - LOAD SHIFTING/FALLING/ SPILLING	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPERACTION	1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN  2 - SIGNAL 5 - YIELD SIGN  3 - FLASHER 6 - NO CONTROL	
	6 - IMPROPERTURN	12-IMPROPER BACKING	20	-IMPROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED	
SEQUENCE	SUPERING C	6 - EQUIPMENT FAILURE	EVENTS 11-CROSS CENTERLINE - 16	- RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE	_2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING	
1 2:1		7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL 18	-ANIMAL - FARM -ANIMAL - DEER	EQUIPMENT 23 - Struck by Falling,	UNIT/NO	N-MOTORIST DIRECTION	
	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT 10 - Cross Median	12-DOWNHILL RUNAWAY 13-OTHER NON-COLLISION 14-PEDESTRIAN 15-PEDALCYCLE 21	-ANIMAL OTHER -MOTORVEHICLE IN TRANSPORT -PARKED MOTORVEHICLE	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM <b>1</b> TO L	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST	
		COLLISION 31-GUARDRAILEND	WITH FIXED OBJECT - 37 - TRAFFIC SIGN POST 43	- STRUCK -CURB	50-WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN	
5	26 - BRIDGE OVERHEAD STRUCTURE	32-PORTABLE BARRIER 33-Median Cable Barrier 34-Median Guardrail	38 - OVERHEAD SIGN POST 44 39 - LIGHT / LUMINARIES 45 SUPPORT 46	-DITCH -EMBANKMENT -FENCE	EQUIPMENT 51 - WALL 52 - BUILDING	UNIT SPEED	DETECTED SPEED  1 - STATED / ESTIMATED SPEED	
6	29-BRIDGE RAIL	BARRIER 35-MEDIAN CONCRETE BARRIER	40 - UTILITY POLE 47 41 - OTHER POST, POLE 48 OR SUPPORT 49	- MAILBOX - Tree - Fire Hydrant	53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / LINKNOWN	POSTED SPEED	2 - CALCULATED / EDR 3 - UNDETERMINED	
4		4	42 - CULVERT			, 2 , 5 ,		
	FIRST HARMFUL EVEN 11U 1/19 [760-0820]	· · · · · · · · · · · · · · · · · · ·	ARMFUL EVENT				PAGE 2 OF 5	



LOCAL REPORT NUMBER

2,0,2,4,-,0,0,0,1,0,6,0,2,

UNIT#		ST, MIDDLE ( SAME AS DRIVER	8)			DE AREA CODE ( SAME AS DRIVER)		DAMAGE	
	Parabit Systems			9	3   7   9   0	<u>  12   8   9   3   6  </u>		DAMAGE SCALE	
	OWNER ADDRESS: STREET, CITY, STATE, ZIP ( SAME AS DRIVER)  1 - NONE 3 - FUNCTIONAL DAMAGE  2139 S Lakeman DP Drive Rollbrook OH 45705								
~	2139 S Lakeman DK Drive Beildrook, OH 45305 2- Minor DAMAGE 4 - DISABLING DAMAGE								
COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP HUB INTERNATIONAL NE 401 BROADHOLLOW RD ROAD MELVILLE, NY 11747 11747  L5, 1, 6, 6, 7, 7, 4, 7, 0, 0								9 - UNKNOWN	
	LICENSE PLATE #	Children of the Control of the Contr	11747 11747 LE IDENTIFICATION #	العاا				DAMAGED AREA(S) Cate all that apply	
	PLW4087		$C_1F_1S_1L_1N_1S_1S_1$	3,4,0	VEHICLE YEA		12	12	
INSURAL VERIFI	INSURANCE COMP		INSURANCE POLICY # 1N6EDOCF5LN726	340	COLOR	VEHICLE MODEL Frontier	11 12	11 12	
- Tunal I	TYPE of USE		US DOT #		WHI D BY: COMPANY	_	9	10 11 1 2	
X COMME		IN EMERGENCY RESPONSE		J			9 3	3 9 9	
INTERI DEVICE EQUIP	LOCK E HIT/SKIP UNI PED	#OCCUPANTS V	EHICLE WEIGHT GVWR/GCWR  1 - <10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.			JS MATERIAL Lass# Placard ID#	8 7 8 5	8 7 6 5 5 4	
O. 4. UNIT TYPE	2 - PASSENGER VAN (MINIVAN) 3 - Sport Utility Vehicle 4 - Pick Up 5 - Cargo Van	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10-MOPED OR MOTORIZED BICYCLE 11 - ALITERPAIN VEHICLE (ATV / UTV)	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNITTRUCK 15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	19 - BUS (16+ 20 - OTHER V 21 - HEAVY E 22 - ANIMAL	PASSENGERS) EHICLE QUIPMENT WITH RIDER OR	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANYTYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	10 0	11 12 1 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK	? O NOWN AUTONOMOUS MODE LEVEL		4 - HIGHAUT 5 - FULLAUT	FOMATION		10 12 1 10 10 2 9 3 5	6 11 12 1 2 2 3 3 9 9 9 3 3	
O 1	2 - TAXI 3 - ELECTRONIC RIDE SHARING	9 - BUS - OTHER	11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	16 - FARM 17 - MOWING 18 - SNOW RE 19 - TOWING 20 - SAFETY!	MOVAL	23 - MAIL CARRIER 99 - Other/Unknown	7 6 6	8 7 5 4	
$0_1$	/ NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER Motor Vehicle 4 - Logging	CHASSIS	8 - POLE 9 - CARGO TA 10 - FLAT BEI 11 - DUMP	NK D	12-CONCRETE MIXER 13-AUTOTRANSPORTER 14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	9 3 9	3 9 3 9 3	
VEHICLE	2 - HEAD LAMPS	4 - BRAKES 5 - Steering 6 - Tire Blowout	7 - WORN OR SLICKTIRES 8 - Trailer Equipment Defective	9 - MOTORTI 10 - DISABLE ACCIDEN	D FROM PRIOR	99-OTHER/UNKNOWN	6 - NO DAMAGE	6 6 6 6 10 10 10 10 10 10 10 10 10 10 10 10 10	
	CROSSWALK 2 - INTERSECTION - UNMARKED	3 - INTERSECTION – OTHER 4 - MIDBLOCK – MARKED CROSSWALK 5 - TRAVEL LANE – OTHER LOCATIO	7 - SHOULDER / ROADSIDE 8 - Side Walk	10 - DRIVEWA	Y ACCESS	12-FIRST RESPONDER AT INCIDENT SCENE 99-OTHER/UNKNOWN		-ALL AREAS [15]	
4 ACTION	2-NON-COLLISION 3-STRIKING 4-STRUCK 5-BOTH STRIKING ACTIONS	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING EANES 4 - OVERTAKING/FASSING 5 - MAKING RICHTTURN 6 - MÄKING LEFT TURN	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED INTRAFFIC	14 - ENTERIN SPECIFIE 15 - WALKING	G OR CROSSING ID LOCATION I, RUNNING, PLAYING	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NOM-MOTORIST 21 - STANDING OUTSIDE DISABLEDVEHICLE 99 - OTHER / UNKNOWN	O - NO DAMA	R TO UNIT 15 - VEHICLE NOT AT SCENE RAM 99 - UNKNOWN	
	1 - NONE	7-LEFT OF CENTER	13-IMPROPER START FROM A	17 - VISION O	RSTRUCTION	21 - LYING IN ROADWAY	The state of the s	TRAFFIC	
O, 1, CONTRIBUTING CIRCUMSTANCES	2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - Unsafe Speed	8 - FOLLOWING TOO CLOSE / ACC 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	PARKED POSITION  14-STOPPED OR PARKED ILLEGALLY  15-SWERVING TO AVOID	18-OPERATII Equipme	NG DEFECTIVE NT FTING/FALLING/	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	1 - ONE-WAY 2 2 - TWO-WAY # OF THROUGH LANES	1 - ROUNDADOUT 4 - STOP SIGN 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL  RAIL GRADE CROSSING	
SEQUENCE	OF EVENTS						ON ROAD	1 - NOT INVOLVED	
1( <b>2,0</b> )	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	16 - RAILWAY 17 - ANIMAL -	– FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,	L2 UNIT / NO	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING  ON-MOTORIST DIRECTION	
2	4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10-Cross Median	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN		– OTHER EHICLE IN RT Motoryehicle	23-31 ROLK BY PALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24-OTHER MOVABLE OBJECT	FROM . 1 TO !	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST	
5	/ CRASH CUSHION 26-BRIDGE OVERHEAD STRUCTURE 27-BRIDGE PIER OR ABUTMENT	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE	43 - CURB 44 - Ditch 45 - Embanki 46 - Fence 47 - Mailbox	MENT	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL	UNIT SPEED	DETECTED SPEED  1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR	
6	29-BRIDGE RAIL	BARRIER 36-MEDIAN OTHER BARRIER	חס פווססמטד	48 - TREE 49 - Fire hyd		54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED	

OHIO DEPARTMENT MOTORIST / NON-MOTORIST  MOTORIST / NON-MOTORIST									LOCAL REPORT NUMBER				
UNIT # NAME: LAST, FIRST, MIDDLE DATE OF BIRTH									0,0,,	AGE	GENDER		
0.1	, 0, 1 PHILLIPS, SHANNON RAE									1 4 1 1 9	9   8	2   4, 2,	F
E22	ADDRESS: STREET, CITY, STATE, ZIP									PHONE - INCLUDE AREA	A CODE		
0		venue DAYTON, OH 4	5416						9 3	7 9 0	2	8 9	3 6
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED.	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED , 0 , 4	DOT-CO		ION AIR BA		N TRAPPED
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN:	SE CHA	RGED	LOCAL CODE	OFFENSE DESC	RIPTION		CITA	TION NUMBER	
010R				4511	.202	ММ		Reasonable	Contro	I	329	924	
OL CLASS	SELECT UP 102	T RESTRICTION SELECT	DIS	VER FRACTED	_	OHOL / DRUG SUSPE		CONDITION	STATUS T	YPE VALUE	STATUS	TYPE RESU	S) LT select herba
. 1		1	BA	1	=	THER DRUG	KDUANA	1 ,	1	<b>1</b>   , , , ,	1,	1 1	
UNIT #	NAME: LAST,	, FIRST, MIDDLE			_					DATE OF BIRTH		AGE	GENDER
0.2										<u>                                     </u>			
	STREET, CITY, S	TATE, ZIP							CONTACT	PHONE - INCLUDE AREA	A CODE		
INJURIES		EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SEATING POSIT	ION AIR BA	G USAGE EJECTION	N TRAPPED
NON L	TAKEN BY							USED	DOT-CO				
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITA	TION NUMBER	
OL CLASS	ENDORSEMEN SELECT UP TO 2	T RESTRICTION SELECT		/ER TRACTED	ALC	OHOL / DRUG SUSPE	CTED	CONDITION		OHOL TEST	STATUS	DRUG TEST(S	S) T select upto 4
			BY	IGIOTED	=	LCOHOL   MAF THER DRUG	RIJUANA				5.74.00	THE MESON	LI SECENTIFICA
UNIT #	NAME: LAST.	J L L L L L L L L L L L L L L L L L L L	<u> </u>		υν	THER DRUG			<u> </u>	DATE OF BIRTH		AGE	GENDER
									, ,	1 1 1 1			, CLNDER
	STREET, CITY, S	TATE, ZIP							CONTACT	PHONE - INCLUDE AREA	CODE		1
OTORI										1 1 1	-1	1 1 1	
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDT	AKEN TO	: MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT USED	DOT-C		ION AIR BA	G USAGE EJECTIO	TRAPPED
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN:	SE CHAI	RGED LOCAL OFFENSE DESC			RIPTION CITATION			TION NUMBER	4
5													
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2 - SUSPECTED S		(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYE			2 - CLASS B		2 - CDL INTRASTATE		2 - MANUALLY OPERAT		2 - TEST REFUSED	
3 - SUSPECTED # 4 - POSSIBLE IN.		3-FRONT - RIGHT SIDE	3 - DEPLOYE 4 - DEPLOYE		NT / SIDE	3 - CLASS C 4 - REGULAR CLASS		3 - CORRECTIVE LEI 4 - FARM WAIVER	NSES	DEVICE (TEXTING, T		3 - TEST GIVEN, CO SAMPLE / UNUS	
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	10 - SLEEPER SECTION 4 - NOT APPLICABLE			N -TANKER		10 - LIMITED TO DAYL		INSIDE THE VEHICLE		4 - BREATH			
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7 - BOOSTER SEAT 15 - NON-MOTORIST M - MALE				16 - OUTSIDE MIRROR  17 - PROSTHETIC AID		4- ILLNESS 5- FELL ASLEEP, FAINTE	ED.	1 - AMPHETAMINE: 2 - BARBITURATES					
8 - HELMET USE 9 - PROTECTIVE		99 - OTHER / UNKNOWN				, vindroiti		18-OTHER		FATIGUED, ETC.	J - 1	3 - BENZODIAZEPI	000
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UNIT 8  ***RAME LAST, TIBST, MIDDLE  ***PARTIES**  ***PART	UNII #	NAME: LAS	I, FIRST, MIDDLE					DATI	E OF BIRTH		AGE	GENDER
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Bailey, David B  ADDRESS: STREET, CITY, STATE, ZIP  2139 S Lakeman DR Drive Bellbrook, OH 45305  NAME: LAST, FIRST, MIDDLE  ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE  ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE  ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE									MEANS			
ADDRESS: STREET, CITY, STATE, ZIP  2139 S Lakeman DR Drive Bellbrook, OH 45305  9 3 7 5 7 2 8 1 7 3  NAME: LAST, FIRST, MIDDLE  ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE  NAME: LAST, FIRST, MIDDLE  DATE OF BIRTH  AGE GENDER  ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE  CONTACT PHONE - INCLUDE AREA CODE		-	LE					DATE	OF BIRTH		AGE	GENDER
2139 S Lakeman DR Drive Bellbrook, OH 45305  NAME: LAST, FIRST, MIDDLE  ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE  ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE  CONTACT PHONE - INCLUDE AREA CODE											3 <sub>1</sub> 5	M
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	NAME: LAST, FIRST, MIDDLE						DATE	OF BIRTH		AGE	GENDER	
	Abbassac										إسلا	
V 8355 OLAD 3/40 (760 4500)	ADDRESS:	SIREET, CITY,	SIAIE, ZIP					CONTACT PHONE	- INCLUDE AREA COI	E		
	SA 8322 UTA	ID 3/10 Fren 4	5001								ACE S	0F <b>5</b>

OCAL REPORT 2024-00010602	AGENCY Bellbrook Police	M 12 D 23 Y 20
COUNTY OF 29 Greene	ACCIDENT LOCATION S. Lakeman DR Drive	
2139 S. Lakeman Dr.	S. Lakeman Dr. Unit 1 Unit 2	ot To Scale
	officers signature BB43\ Johnston, Ryan,	M, BADGE NO



### TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH			
24-10602	Bellbank Police	M/2 023 124			

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

I, DAVIO B BO) LLY  PRINTED  AT 2139 S LOCATION  HEREBY MAKE THIS VOLUNTARY STATEMENT TO  LOCATION  AT 2139 S LOCATION
AFTER HITTIPH THE DRIVER SPE MIRROR BY THE COMPANY MEST MISSON FRONTER TRUCK, TORPICTURES OF POPMINGE  AND RECHED INFO,
ADDRESS OF WITNESS  AJ39 S LOKEMON DR BELLBROK-4 Phone number 937-512-8173  SIGNATURE OF WITNESS  X DAY BALEY  DAYD BALEY  X HY



## TRAFFIC CRASH WITNESS STATEMENT

LOCAL REPORT NUMBER	REPORTING AGENCY	DATE OF CRASH	
24-16602	Bellbrook Police	MB   23   20	1

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

1, Shannon Phillips	HEREBY MAKE THIS VOLUNTARY STATEMENT TO
Johnston OFFICER'S NAME	AT 21395 Lakenan Or.
	200,111,011
, ,	own Lakenay Brive
in a li-HAUL that	
was returning the tr	uck back to the restal
	· While I was driving
I Misjudged the di	starce from the right
side of the vehicle	
was parked out in	from of the residence
at Lakeman Drive	E. I. accidentally hit
the mirror of the tru	ick that was parked.
I circled my vehicle	around then went
up to the residence	of the truck I hit.
I waited for the occi	igants to come to the
door to let them Kho	is what Rappened.
The women onswered and	then She went and got
her husband. He and I	began to exchange
information when police	4
,	*
	i
1345 Holly Ave Dayt	on of 45410
ADDRESS OF WITNESS	Phone number 9379028936
X N MUS AN USES	OFFICER'S SIGNATURE
HSY 7003 12/19 [760-1500]	