

State Seal

LOCAL REPORT #\* **2012006521**

CRASH SEVERITY: **2** 1 FATAL 3 PDO  
2 Injury 4 Unknown

PRIVATE PROPERTY:

HIT / SKIP: **1** 1 NOT HIT / SKIP  
2 SOLVED  
3 UNSOLVED

PHOTOS TAKEN: **Y**

OH-2 **X** OH-3 **X** OH-1P  OTHER

NCIC #\* **08304** REPORTING AGENCY\* **City of Mason - City of Mason Police Depart**

# UNITS: **1** UNIT ERROR: **01** 98=ANIMAL 99=UNKNOWN

DATE OF CRASH\* **03292012**

TIME OF CRASH: **22:40** DAY OF WEEK: **Thu**

CITY\* **X** VILLAGE\*  TWP\*

NAME (OF CITY, VILLAGE OR TOWNSHIP)\* **Mason** COUNTY #\* **83**

LATITUDE:  LONGITUDE:

CRASH OCCURRED ON

PREFIX: **Columbia Road** TYPE LOC: **1** LOCAL INFORMATION:

TYPE LOCATION POINT USED: 1 NAMED STREET 3 NUMBERED ROUTE  
2 NUMBERED STREET

CRASH AT / REFERENCE

DIST REFERENCE: **7300 Columbia Road** REF POINT: **04**

REFERENCE POINT USED: 04 HOUSE NUMBER 08 PLACE NAME W/O REFERENCE  
01 STATE LINE 05 TOWNSHIP BOUNDARY 09 DRIVEWAY  
02 INTERSECTION 2 STREETS 06 MILE POST 10 STREET OR ROUTE W/O  
03 COUNTY LINE 07 CORPORATION LIMIT REFERENCE

**A** UNIT # **1** NAME (LAST, FIRST, MIDDLE): **Ford, Thomas D**

ADDRESS (STREET, CITY, STATE, ZIP CODE): **7434 Turtle Lane, Apt: B, Maineville OH, 45039**

SOCIAL SECURITY NUM:  DATE OF BIRTH: **07151967** AGE: **44** SEX: **M** HOME PHONE #: **(513) 266-5012** WORK PHONE #:

DL STATE: **MO** DL #: **V169246001** IP STATE: **MO** IP #: **BP7YF** INJURED TAKEN BY: **2** 1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY: **Bethesda North** INJURED TAKEN TO:

OWNER'S NAME (IF SAME WRITE "SAME"): **Ford, Thomas D** ADDRESS (STREET, CITY, STATE, ZIP CODE): **Same**

YEAR: **2011** MAKE: **HARL** MODEL:  COLOR: **BLU** INSURANCE COMPANY: **USAA** TOWING SERVICE: **Sora's Towing** OWNER PHONE #: **513-266-5012(H)**

OFFENSE CHARGED:  OFFENSE DESCRIPTION:  CITATION #: **69698** LOCAL CODE?: **X**

**B** UNIT #  NAME (LAST, FIRST, MIDDLE):

ADDRESS (STREET, CITY, STATE, ZIP CODE):

SOCIAL SECURITY NUM:  DATE OF BIRTH:  AGE:  SEX:  HOME PHONE #:  WORK PHONE #:

DL STATE:  DL #:  IP STATE:  IP #:  INJURED TAKEN BY:  1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY:  INJURED TAKEN TO:

OWNER'S NAME (IF SAME WRITE "SAME"):  ADDRESS (STREET, CITY, STATE, ZIP CODE):

YEAR:  MAKE:  MODEL:  COLOR:  INSURANCE COMPANY:  TOWING SERVICE:  OWNER PHONE #:

OFFENSE CHARGED:  OFFENSE DESCRIPTION:  CITATION #:  LOCAL CODE?:

**C** UNIT #  NAME (LAST, FIRST, MIDDLE):  HOME PHONE #:  DATE OF BIRTH:  AGE:  SEX:

ADDRESS (STREET, CITY, STATE, ZIP CODE):

INJURED TAKEN BY: 1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY:  INJURED TAKEN TO:

**D** UNIT #  NAME (LAST, FIRST, MIDDLE):  HOME PHONE #:  DATE OF BIRTH:  AGE:  SEX:

ADDRESS (STREET, CITY, STATE, ZIP CODE):

INJURED TAKEN BY: 1 NONE 2 EMS 3 POLICE 4 OTHER 5 UNKNOWN TRANSPORTED BY:  INJURED TAKEN TO:

SEATING POSITION	SAFETY EQUIPMENT	AIR BAG	AIR BAG SWITCH	EJECTION	TRAPPED	INJURIES
01 FRONT - LEFT (MC DRIVER)	01 NONE USED	01 NOT DEPLOYED	01 NOT PRESENT	01 NOT EJECTED	01 NOT TRAPPED	01 NO INJURY
02 FRONT - MIDDLE	02 SHOULDER BELT ONLY	02 DEPLOYED FRONT	02 IN ON POSITION	02 TOTALLY EJECTED	02 EXTRACTED BY MECHANICAL MEANS	02 POSSIBLE
03 FRONT - RIGHT	03 LAP BELT ONLY	03 DEPLOYED SIDE	03 IN OFF POSITION	03 PARTIALLY EJECTED	03 MEANS	03 NON-INCAPACITATING
04 SECOND - LEFT (MC PASS)	04 SHOULDER LAP BELT	04 DEPLOYED BOTH FRONT SIDE	04 UNKNOWN POSITION	04 NOT APPLICABLE	04 FREED BY NON-MECHANICAL MEANS	04 INCAPACITATING
05 SECOND - MIDDLE	05 CHILD SAFETY SEAT	05 NOT APPLICABLE		05 UNKNOWN	05 MEANS	05 FATAL INJURY
06 SECOND - RIGHT	06 MC HELMET USED	06 UNKNOWN			06 UNKNOWN	06 UNKNOWN
07 THIRD - LEFT (MC PASSENGER SIDE CAR)	07 USE UNKNOWN					
08 THIRD - MIDDLE	NON-MOTORIST					
09 THIRD - RIGHT	08 NONE USED					
10 SLEEPER SECTION OF CAB	09 HELMET USED					
11 ENCLOSED CARGO AREA	10 PROTECTIVE PADS					
12 UNENCLOSED CARGO AREA	11 REFLECTIVE CLOTHING					
13 TRAILING UNIT	12 LIGHTING					
14 EXTERIOR	13 OTHER					
15 OTHER	14 UNKNOWN					
16 NON-MOTORIST						
17 UNKNOWN						

BLANK FOR WITNESS

SUPPLEMENT "X" IF YES

**Narrative**

Unit 1 was travelling south on Columbia Rd. Unit 1 failed to properly handle a left turn in the roadway. Unit 1 struck the curb on the right side and left the roadway. Unit 1 continued across the curb and into an embankment. Unit 1 slid to a stop on its right side. The rider on unit 1 was freed from partial entrapment under unit 1 by following a motorist.

**MANNER OF COLLISION OR IMPACT**

**SCHOOL BUS RELATED**

**1**

01 NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT  
 02 REAR-END  
 03 HEAD-ON  
 04 REAR-TO-REAR  
 05 BACKING  
 06 ANGLE  
 07 SIDESWIRE, SAME DIRECTION  
 08 SIDESWIRE, OPPOSITE DIRECTION  
 09 UNKNOWN

**1**

01 NO  
 02 YES, DIRECTLY INVOLVED  
 03 YES, INDIRECTLY INVOLVED  
 04 UNKNOWN

**WORK ZONE RELATED**

**1**

01 NO  
 02 YES  
 03 UNKNOWN

**TYPE OF WORK ZONE**

01 LANE CLOSURE  
 02 LANE SHIFT/CROSSOVER  
 03 WORK ON SHOULDER OR MEDIAN  
 04 INTERMITTENT/MOVING WORK  
 05 OTHER

**LOCATION OF CRASH IN WORK ZONE**

01 BEFORE FIRST WORK ZONE WARNING SIGN  
 02 ADVANCE WARNING AREA  
 03 TRANSITION AREA  
 04 ACTIVITY AREA

**WORKERS PRESENT**

01 NO  
 02 YES  
 03 UNKNOWN

**WEATHER**

**01**

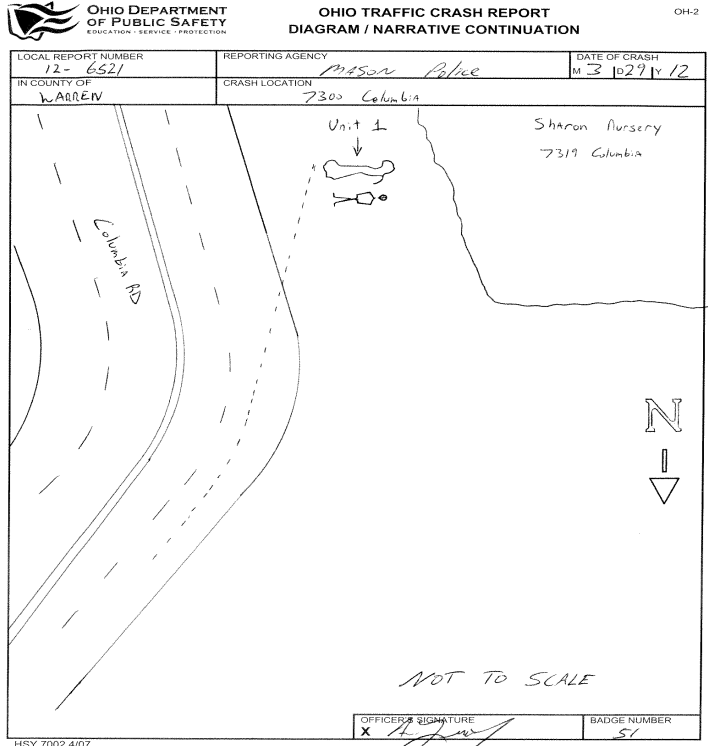
01 CLEAR  
 02 CLOUDY  
 03 FOG, SMOG, SMOKE  
 04 RAIN  
 05 SLEET, HAIL (FREEZING RAIN DRIZZLE)  
 06 SNOW  
 07 SEVERE CROSSWINDS  
 08 BLOWING SAND, SOIL, DIRT, SNOW  
 09 OTHER  
 10 UNKNOWN

**LIGHT CONDITIONS**

PRIMARY SECONDARY

01 DAYLIGHT  
 02 DAWN  
 03 DUSK  
 04 DARK - LIGHTED ROADWAY  
 05 DARK - NOT LIGHTED  
 06 DARK - UNKNOWN LIGHTING  
 07 GLARE  
 08 OTHER  
 09 UNKNOWN

**Diagram**



**Truck/Bus**

THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING:  
 A TRUCK (MOTOR VEHICLE) WITH A GVWR MORE THAN 10,000 POUNDS; OR  
 A TRUCK (MOTOR VEHICLE) WITH A HAZARDOUS MATERIALS PLACARD; OR  
 A BUS DESIGNED FOR AT LEAST 8 PERSONS, INCLUDING DRIVER.

**AND**

THE CRASH RESULTED IN ONE OR MORE OF THE FOLLOWING:  
 A FATALITY; OR  
 AN INJURY REQUIRING TRANSPORTATION FOR IMMEDIATE MEDICAL TREATMENT; OR  
 AT LEAST ONE VEHICLE WAS TOWED DUE TO DISABLING DAMAGE OR REQUIRED  
 INTERVENING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER.

Unit#

COMPANY (FROM SHIPPING PAPERS) \_\_\_\_\_ COMPANY PHONE \_\_\_\_\_

ADDRESS (STREET, CITY, ST, ZIP CODE) \_\_\_\_\_

US DOT	ICC MC	FUOO	TRAILER LP ST.	TRAILER LP YEAR	TRAILER LP#	PLACARD #	# DIA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CARGO BODY TYPE	WEIGHT (GVWR)	CDL Class	Hazardous Materials Placard	Hazardous Materials Released			
01 NOT APPLI CABLE 02 BUS (9-15 INCLUDING DRIVER) 03 VAN ENCLOSED BOX 04 GRAIN CHIPS/ GRAVEL	05 POLE 06 CARGO TAN 07 FLATBED 08 DUMP 09 CONCRETE MIXER 10 AUTO TRANSPORTER 11 GARBAGE/ REFUSE 12 OTHER 13 UNKNOWN	01 CLASS A 02 CLASS B 03 CLASS C 04 CLASS M 05 CLASS D	01 NO 02 YES 03 UNKNOWN	01 NO 02 YES 03 NOT APPLI CABLE 04 UNKNOWN			

**Police Action**

DATE CRASH REPORTED	TIME REC CALL	DISPATCH	ARRIVED	CLEARED	OTHER	TOTAL MINUTES
03/29/2012	22:40	22:40	22:44	23:22	0.00	42.12
OFFICER'S NAME*	PAGE #*	CHECKED BY	DATE REPORT FILED*			
Police Officer Aaron R Yeary	1C51		04/03/2012			
REPORT TAKEN BY	REPORT TAKEN AT	SUPPLEMENT * "X" IF YES	LOCAL REPORT #			
1	1		201200006521			

<b>UNIT NUMBERS</b> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>1</span> <span>A</span> <span>B</span> </div>	<b>DAMAGE AREA</b> 	<b>PRE-CRASH ACTIONS</b> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>06</span> <span>A</span> <span>B</span> </div> <p><b>MOTORIST</b></p> <ol style="list-style-type: none"> <li>MOVEMENTS ESSENTIALLY STRAIGHT AHEAD</li> <li>BACKING</li> <li>CHANGING LANES</li> <li>OVERTAKING/PASSING</li> <li>TURNING RIGHT</li> <li>TURNING LEFT</li> <li>MAKING U-TURN</li> <li>ENTERING TRAFFIC LANE</li> <li>LEAVING TRAFFIC LANE</li> <li>PARKED</li> <li>SLOWING/STOPPING IN TRAFFIC</li> <li>DRIVERLESS</li> <li>OTHER</li> <li>UNKNOWN</li> </ol> <p><b>NON-MOTORIST</b></p> <ol style="list-style-type: none"> <li>ENTERING / CROSSING IN INTERSECTION</li> <li>FEEDBACK</li> <li>WALKING, RUNNING, JOGGING, PLAYING, CYCLING</li> <li>WORKING</li> <li>PUSHING VEHICLE</li> <li>APPROACHING/LEAVING VEHICLE</li> <li>PLAYING / WORKING ON VEHICLE</li> <li>STANDING</li> <li>OTHER</li> <li>UNKNOWN</li> </ol>	<b>SEQUENCE OF EVENTS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:50%; height: 20px;">39</td><td style="width:50%; height: 20px;">1</td></tr> <tr><td style="height: 20px;">40</td><td style="height: 20px;">2</td></tr> <tr><td style="height: 20px;"></td><td style="height: 20px;">3</td></tr> <tr><td style="height: 20px;"></td><td style="height: 20px;">4</td></tr> </table> <p><b>NON-COLLISION</b></p> <ol style="list-style-type: none"> <li>OVERTURN/ROLLOVER</li> <li>FIRE/EXPLOSION</li> <li>IMMERSION</li> <li>JACKKNIFE</li> <li>CARGO EQUIPMENT LOSS / SHIFTS</li> <li>EQUIPMENT FAILURE</li> <li>SEPARATION OF UNITS</li> <li>RAN OFF ROAD RIGHT</li> <li>RAN OFF ROAD LEFT</li> <li>CROSS MEDIAN/CENTERLINE</li> <li>DOWNHILL RUNAWAY</li> <li>OTHER NON-COLLISION</li> <li>UNKNOWN NON-COLLISION</li> </ol> <p><b>COLLISION w/ PERSON, VEHICLE, OR OBJECT NOT FIXED</b></p> <ol style="list-style-type: none"> <li>PEDESTRIAN</li> <li>PEDICYCLE</li> <li>RAILWAY VEHICLE</li> <li>ANIMAL - FARM</li> <li>ANIMAL - DEER</li> <li>ANIMAL - OTHER</li> <li>MOTOR VEHICLE IN TRANSPORT</li> <li>PARKED MOTOR VEHICLE</li> <li>WORK ZONE MAINTENANCE EQUIPMENT</li> <li>OTHER MOVABLE OBJECT</li> <li>UNKNOWN MOVABLE OBJECT</li> </ol> <p><b>COLLISION WITH FIXED OBJECT</b></p> <ol style="list-style-type: none"> <li>IMPACT ATTENUATOR/CRASH CUSHION</li> <li>BRIEGE OVERHEAD STRUCTURE</li> <li>BRIEGE PIER OR ABUTMENT</li> <li>BRIEGE PARAPET</li> <li>BRIEGE RAIL</li> <li>GUARDRAIL FACE</li> <li>GUARDRAIL END</li> <li>MEDIAN BARRIER</li> <li>HIGHWAY TRAFFIC SIGN POST</li> <li>OVERHEAD SIGN POST</li> <li>LIGHT/LUMINAIRE SUPPORT</li> <li>UTILITY POLE</li> <li>OTHER POST, POLE OR SUPPORT</li> <li>CULVERT</li> <li>CURB</li> <li>DITCH</li> <li>EMBANKMENT</li> <li>FENCE</li> <li>MAILBOX</li> <li>TREE</li> <li>OTHER FIXED OBJECT</li> <li>WORK ZONE MAINTENANCE EQUIPMENT</li> <li>UNKNOWN FIXED OBJECT</li> <li>OTHER</li> <li>UNKNOWN</li> </ol>	39	1	40	2		3		4	<b>POSTED SPEED</b> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>45</span> <span>A</span> <span>B</span> </div> <p><b>TRAFFIC CONTROL</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>12</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>NO CONTROLS</li> <li>STOP SIGN</li> <li>YIELD SIGN</li> <li>TRAFFIC SIGNAL</li> <li>TRAFFIC FLASHERS</li> <li>SCHOOL ZONE</li> <li>RAILROAD CROSSBUCKS</li> <li>RAILROAD FLASHERS</li> <li>RAILROAD GATES</li> <li>CONSTRUCTION BARRICADE</li> <li>POLICE OFFICER</li> <li>PAVEMENT MARKINGS</li> <li>CROSSWALK LINES</li> <li>WALK/DON'T WALK SIGNAL</li> <li>TRAFFIC CONTROL DEVICE</li> <li>NOPELATIVE MARKING, OBSCURED</li> <li>OTHER</li> </ol> <p><b>DIIRECTION</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><th>FROM</th><th>TO</th><th>FROM</th><th>TO</th></tr> <tr><td style="width:25%;">1</td><td style="width:25%;">2</td><td style="width:25%;">A</td><td style="width:25%;">B</td></tr> </table> <ol style="list-style-type: none"> <li>NORTH</li> <li>SOUTH</li> <li>EAST</li> <li>WEST</li> <li>NORTHEAST</li> <li>NORTHWEST</li> <li>SOUTHEAST</li> <li>SOUTHWEST</li> <li>UNKNOWN</li> </ol> <p><b>CONDITION</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>6</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>APPARENTLY NORMAL</li> <li>PHYSICAL IMPAIRMENT</li> <li>EMOTIONAL</li> <li>ILLNESS</li> <li>FELL ASLEEP/FATIGUED</li> <li>FALL GUED, ETC.</li> <li>UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ALCOHOL</li> <li>OTHER</li> <li>UNKNOWN</li> </ol> <p><b>ALCOHOL/DRUG SUSPECTED</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>2</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>NONE</li> <li>YES-ALCOHOL SUSPECTED</li> <li>YES-HBD NOT IMPAIRED</li> <li>YES-DRUGS SUSPECTED</li> <li>YES-ALCOHOL / DRUGS SUSPECTED</li> <li>UNKNOWN</li> </ol> <p><b>ALCOHOL TEST STATUS</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>4</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>NONE</li> <li>TEST REFUSED</li> <li>TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE</li> <li>TEST GIVEN, RESULTS KNOWN</li> <li>TEST GIVEN, RESULTS UNKNOWN</li> <li>UNKNOWN</li> </ol> <p><b>ALCOHOL TEST TYPE</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>2</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>NONE</li> <li>BLOOD</li> <li>URINE</li> <li>BREATH</li> <li>OTHER</li> </ol> <p><b>ALCOHOL TEST RESULT</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>A</span> <span>B</span> </div>	FROM	TO	FROM	TO	1	2	A	B	<b>DRUG TEST STATUS</b> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>1</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>NONE</li> <li>TEST REFUSED</li> <li>TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE</li> <li>TEST GIVEN, RESULTS KNOWN</li> <li>TEST GIVEN, RESULTS UNKNOWN</li> <li>UNKNOWN</li> </ol> <p><b>DRUG TEST TYPE</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>1</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>NONE</li> <li>BLOOD</li> <li>URINE</li> <li>OTHER</li> </ol> <p><b>DRUG TEST 1&amp;2 RESULT</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><th>A</th><th>B</th><th>A</th><th>B</th></tr> <tr><td style="width:25%;">1</td><td style="width:25%;">2</td><td style="width:25%;">1</td><td style="width:25%;">2</td></tr> </table> <ol style="list-style-type: none"> <li>NONE</li> <li>MARIJUANA</li> <li>COCAINE</li> <li>OPIATES</li> <li>AMPHETAMINES</li> <li>PCP</li> <li>OTHER</li> <li>UNKNOWN AT TIME OF REPORTING</li> </ol> <p><b>TYPE OF INTERSECTION</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>01</span> </div> <ol style="list-style-type: none"> <li>NOT AN INTERSECTION</li> <li>FOUR-WAY INTERSECTION</li> <li>T-INTERSECTION</li> <li>Y-INTERSECTION</li> <li>TRAFFIC CIRCLE/ROUNDOABOUT</li> <li>FLY-BOUNT, OR MORE</li> <li>ON RAMP</li> <li>OFF RAMP</li> <li>CROSSOVER</li> <li>DRIVEWAY/ACCESS</li> <li>RAILWAY GRADE CROSSING</li> <li>SHRED-USE PATHS OR TRAILS</li> <li>UNKNOWN</li> </ol> <p><b>OCCURRENCE</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>1</span> </div> <ol style="list-style-type: none"> <li>ON ROADWAY</li> <li>ON SHOULDER</li> <li>MEDIAN</li> <li>ON ROADSIDE</li> <li>ON GORE</li> <li>OUTSIDE TRAFFIC WAY</li> <li>UNKNOWN</li> </ol> <p><b>ROAD CONTOUR</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>3</span> </div> <ol style="list-style-type: none"> <li>STRAIGHT LEVEL</li> <li>STRAIGHT GRADE</li> <li>CURVE LEVEL</li> <li>CURVE GRADE</li> </ol> <p><b>ROAD CONDITIONS</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><th>PRI</th><th>MARY</th><th>SEC</th><th>ONDARY</th></tr> <tr><td style="width:25%;">01</td><td style="width:25%;">A</td><td style="width:25%;">B</td><td style="width:25%;">C</td></tr> </table> <ol style="list-style-type: none"> <li>DRY</li> <li>WET</li> <li>SNOW</li> <li>ICE</li> <li>SAND, MUD, DRY, OIL, GRAVEL</li> <li>WATER/STANDING/MOVING</li> <li>SLUSH</li> <li>DEBRIS</li> <li>RUTS, HOLES, BUMPS, UNEVEN PAVEMENT</li> <li>OTHER</li> <li>UNKNOWN</li> <li>SECONDARY ROAD CONDITIONS ONLY</li> </ol>	A	B	A	B	1	2	1	2	PRI	MARY	SEC	ONDARY	01	A	B	C
39	1																																				
40	2																																				
	3																																				
	4																																				
FROM	TO	FROM	TO																																		
1	2	A	B																																		
A	B	A	B																																		
1	2	1	2																																		
PRI	MARY	SEC	ONDARY																																		
01	A	B	C																																		
<b>NON-MOTORIST LOCATION</b> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>MARKED CROSSWALK AT INTERSECTION</li> <li>INTERSECTION/NO CROSSWALK</li> <li>NON-INTERSECTION CROSSWALK</li> <li>DRIVEWAY ACCESS CROSSWALK</li> <li>IN ROADWAY</li> <li>NOT IN ROADWAY</li> <li>MEDIAN (BUT NOT SHOULDER)</li> <li>ISLAND</li> <li>SHOULDER</li> <li>SIDEWALK</li> <li>WITHIN 10 FEET OF ROADWAY (NOT SHOULDER, MEDIAN, SIDEWALK, ISLAND)</li> <li>BEYOND 10 FEET OF ROADWAY (WITHIN TRAFFIC WAY)</li> <li>OUTSIDE TRAFFIC WAY</li> <li>SHARED USE PATHS OR TRAILS</li> <li>UNKNOWN</li> </ol> <p><b>TYPE OF UNIT</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>18</span> <span>A</span> <span>B</span> </div> <p><b>MOTORIST</b></p> <ol style="list-style-type: none"> <li>SUB-COMPACT</li> <li>COMPACT</li> <li>MID SIZE</li> <li>FULL SIZE</li> <li>MIDVAN</li> <li>SPORT UTILITY VEHICLE</li> <li>PICKUP</li> <li>PANEL VAN</li> <li>SINGLE UNIT TRUCK; 2 AXLES, 6 TIRES</li> <li>SINGLE UNIT TRUCK; 3+AXLES</li> <li>TRUCK/TRAILER</li> <li>TRUCK TRACTOR (BOBTAIL)</li> <li>TRACTOR/SEMI-TRAILER</li> <li>TRACTOR/DOUBLE SHORT</li> <li>TRACTOR/DOUBLE LONG</li> <li>FIFTH WHEEL OR CONVERTER DOLLY</li> <li>TRACTOR/TRAILERS</li> <li>MOTORCYCLE</li> <li>MOTORCYCLE (BOBTAIL)</li> <li>SCHOOL BUS</li> <li>CHURCH BUS</li> <li>PUBLIC BUS</li> <li>OTHER BUS</li> <li>POLICE VEHICLE</li> <li>FIRE TRUCK</li> <li>AMBULANCE/RESCUE</li> <li>TAXI</li> <li>MOTOR HOME</li> <li>TRAIN</li> <li>FARM VEHICLE</li> <li>FARM EQUIPMENT</li> <li>SNOWMOBILE</li> <li>CONSTRUCTION EQUIPMENT</li> <li>ALL OTHERS</li> </ol> <p><b>NON-MOTORIST</b></p> <ol style="list-style-type: none"> <li>ANIMAL W/ RIDER</li> <li>ANIMAL W/ BUGGY</li> <li>BICYCLE</li> <li>PEDESTRIAN</li> <li>PEDALCYCLIST</li> <li>SKATER</li> <li>OTHER-NON MOTORIST</li> <li>UNKNOWN</li> </ol>	<b>MOST DAMAGED AREA</b> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>04</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>NONE</li> <li>CENTER FRONT</li> <li>RIGHT FRONT</li> <li>RIGHT SIDE</li> <li>RIGHT REAR</li> <li>REAR CENTER</li> <li>LEFT REAR</li> <li>LEFT SIDE</li> <li>LEFT FRONT</li> <li>TOP AND WINDSHIELD</li> <li>UNDERCARRIAGE</li> <li>LOAD/TRAILER</li> <li>TOTAL (ALL AREAS)</li> <li>OTHER</li> <li>UNKNOWN</li> </ol> <p><b>POINT OF IMPACT</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>04</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>NONE</li> <li>CENTER FRONT</li> <li>RIGHT FRONT</li> <li>RIGHT SIDE</li> <li>RIGHT REAR</li> <li>REAR CENTER</li> <li>LEFT REAR</li> <li>LEFT SIDE</li> <li>LEFT FRONT</li> <li>TOP AND WINDSHIELD</li> <li>UNDERCARRIAGE</li> <li>LOAD/TRAILER</li> <li>TOTAL (ALL AREAS)</li> <li>OTHER</li> <li>UNKNOWN</li> </ol> <p><b>ACTION</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>3</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>NONE-CONTACT</li> <li>NON-COLLISION</li> <li>STRIKING</li> <li>STRUCK</li> <li>BOTH STRIKING AND STRUCK</li> <li>UNKNOWN</li> </ol> <p><b>STRIKING VEHICLE: OVERRIDEN/UNDERRIDDEN</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>1</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>NO UNDERRIDE OR OVERRIDE</li> <li>UNDERRIDE, COMPARTMENT INTRUSION</li> <li>UNDERRIDE, NO COMPARTMENT INTRUSION</li> <li>UNDERRIDE, COMPARTMENT INTRUSION UNKNOWN</li> <li>OVERRIDE, MOTOR VEHICLE IN TRANSPORT</li> <li>OVERRIDE, OTHER VEHICLE</li> <li>UNKNOWN</li> </ol>	<p><b>VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>TURN SIGNALS</li> <li>HEAD LAMPS</li> <li>TAIL LAMPS</li> <li>BRAKES</li> <li>STEERING</li> <li>TIRE BLOWOUT</li> <li>WORN OR SLICK TIRES</li> <li>TRAILER EQUIPMENT DEFECTIVE</li> <li>MOTOR TROUBLE</li> <li>DISABLED FROM PRIOR CRASH</li> <li>OTHER DEFECTS</li> </ol> <p><b>FIRST HARMFUL EVENT</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>1</span> <span>A</span> <span>B</span> </div> <p>OF THE SEQUENCE OF EVENTS WHICH ONE IS THE FIRST HARMFUL EVENT (1-4)</p> <p><b>MOST HARMFUL EVENT</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>2</span> <span>A</span> <span>B</span> </div> <p>OF THE SEQUENCE OF EVENTS WHICH ONE IS THE MOST HARMFUL EVENT (1-4)</p> <p><b>SPEED DETECTED</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>2</span> <span>A</span> <span>B</span> </div> <ol style="list-style-type: none"> <li>STATED</li> <li>ESTIMATED SPEED</li> </ol> <p><b>SPEED</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>45</span> <span>A</span> <span>B</span> </div>	<p><b>SUPPLEMENTS</b> *X* IF YES</p> <p><b>LOCAL REPORT#</b></p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>201200006521</span> </div>																																		

OHIO TRAFFIC ACCIDENT - STATEMENT CONTINUATION

LOCAL REPORT NUMBER 201200006521	REPORTING AGENCY Mason Police Department
-------------------------------------	---



OHIO DEPARTMENT OF PUBLIC SAFETY  
EDUCATION • SERVICE • PROTECTION

OHIO TRAFFIC CRASH REPORT  
DIAGRAM / NARRATIVE CONTINUATION

OH-2

LOCAL REPORT NUMBER 12 6521	REPORTING AGENCY Mason Police	DATE OF CRASH M 3   D 29   Y 12
IN COUNTY OF Warren	CRASH LOCATION 7300 Columbia Rd	

Unit 1 was travelling south on Columbia Rd. Unit 1 failed to proper handle a left turn in the roadway. Unit 1 struck the curb on the right side and left the roadway. Unit 1 continued across the curb and into an embankment. Unit 1 slid to a stop on it right side. The rider on unit 1 was freed from partial entrapment under unit 1 by following a motorist.

OFFICER'S SIGNATURE X 	BADGE NUMBER 51
---	--------------------

HSY 7002 4/07

OHIO TRAFFIC ACCIDENT - STATEMENT CONTINUATION

LOCAL REPORT NUMBER 2012000006521	REPORTING AGENCY Mason Police Department
--------------------------------------	---



OHIO DEPARTMENT OF PUBLIC SAFETY  
EDUCATION • SERVICE • PROTECTION

TRAFFIC CRASH WITNESS STATEMENT

OH-3

LOCAL REPORT NUMBER 12-6521	REPORTING AGENCY Mason Police	DATE OF CRASH M 3   29   Y 12
--------------------------------	----------------------------------	----------------------------------

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

I, Patricia Ford HEREBY MAKE THIS VOLUNTARY STATEMENT TO  
PRINTED

A. Yeary AT 7300 Columbia  
OFFICER'S NAME LOCATION

At about 10:30 pm myself and my husband Thomas Ford left Elis Bar. Headed towards home on Columbia Rd. My husband was on his ~~is~~ motorcycle as he was about to ~~curve~~ take the curve to the left on Columbia Rd he hit the curb and went into the grass and crashed his motorcycle. I was driving behind him and witnessed the crash. I ~~immediately~~ stopped and ran to see if Tom was breathing and then ran back to my car to call 911. <sup>I</sup> could not locate my phone so I stopped ~~to~~ <sup>passing</sup> a car to call 911. I pulled the motorcycle off Tom to relieve the pain from his broken leg and held up his head for support.

ADDRESS OF WITNESS	PHONE 816-856-9124
SIGNATURE OF WITNESS X Patricia Ford	OFFICER'S SIGNATURE X <i>A. Yeary</i>

HSY 7003 4/07