



TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER *	CRASH SEVERITY	HIT/SKIP
2012-130755	3 - FATAL 2 - INJURY 3 - PDO	1 - SOLVED 2 - UNSOLVED

PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input checked="" type="checkbox"/> OH-3 <input type="checkbox"/> OTHER	PDO UNDER STATE REPORTABLE DOLLAR AMOUNT	PRIVATE PROPERTY	REPORTING AGENCY NCIC *	REPORTING AGENCY NAME *	NUMBER OF UNITS	UNIT IN ERROR
			018304	MASON POLICE	02	01

COUNTY *	CITY *	CITY, VILLAGE, TOWNSHIP *	CRASH DATE *	TIME OF CRASH	DAY OF WEEK
83		MASON	112202012	1245	THU

DEGREES / MINUTES / SECONDS LATITUDE	LONGITUDE	DECIMAL DEGREES LATITUDE	LONGITUDE
39° 12' 44.5734"	-84° 11' 41.3146"	39.13457145	-84.1311485

ROADWAY DIVISION	DIVIDED LANE DIRECTION OF TRAVEL	NUMBER OF TRAVEL LANES	ROAD TYPES OR MILEPOST ²
<input type="checkbox"/> DIVIDED <input checked="" type="checkbox"/> UNDIVIDED	<input type="checkbox"/> N - NORTHBOUND <input type="checkbox"/> E - EASTBOUND <input type="checkbox"/> S - SOUTHBOUND <input type="checkbox"/> W - WESTBOUND	04	AL - ALLEY CR - CIRCLE HE - HEIGHTS MP - MILEPOST PL - PLAZA ST - STREET WA - WAY AV - AVENUE CT - COURT HW - HIGHWAY PK - PARKWAY RO - ROAD TE - TERRACE BL - BOULEVARD DR - DRIVE LA - LANE PI - PIKE SQ - SQUARE TL - TRAIL

LOCATION ROUTE NUMBER	LOCATION ROUTE TYPE ¹	LOCATION ROAD NAME	LOCATION ROAD TYPE ²	ROUTE TYPES ³
		MASON MONTGOMERY RD	R0	IR - INTERSTATE ROUTE (INC. TURNPIKE) CR - NUMBERED COUNTY ROUTE US - US ROUTE TR - NUMBERED TOWNSHIP ROUTE SR - STATE ROUTE

DISTANCE FROM REFERENCE	DIR FROM REF	REFERENCE ROUTE TYPE ¹	REFERENCE ROUTE NUMBER	REF PREFIX	REFERENCE NAME (ROAD, MILEPOST, HOUSE #)	REFERENCE ROAD TYPE ²
100	N				TYLERSVILLE	R0

REFERENCE POINT USED	CRASH LOCATION	LOCATION OF FIRST HARMFUL EVENT
<input checked="" type="checkbox"/> 1 - INTERSECTION <input type="checkbox"/> 2 - MILE POST <input type="checkbox"/> 3 - HOUSE NUMBER	<input checked="" type="checkbox"/> 01 - NOT AN INTERSECTION <input type="checkbox"/> 02 - FOUR-WAY INTERSECTION <input type="checkbox"/> 03 - T-INTERSECTION <input type="checkbox"/> 04 - Y-INTERSECTION <input type="checkbox"/> 05 - TRAFFIC CIRCLE/ROUNDABOUT	<input type="checkbox"/> 1 - ON ROADWAY <input type="checkbox"/> 2 - ON SHOULDER <input type="checkbox"/> 3 - IN MEDIAN <input type="checkbox"/> 4 - ON ROADSIDE <input type="checkbox"/> 5 - ON GORE <input type="checkbox"/> 6 - OUTSIDE TRAFFICWAY <input type="checkbox"/> 9 - UNKNOWN

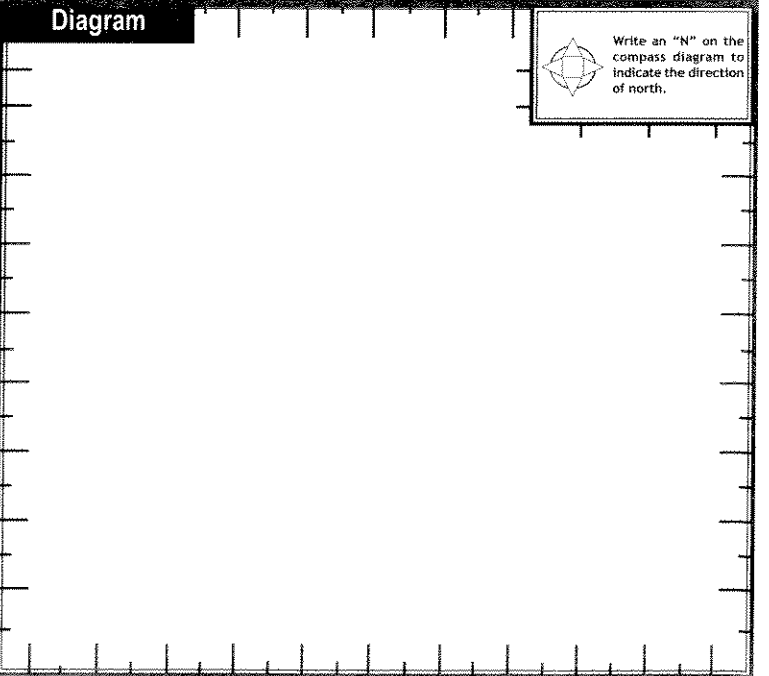
ROAD CONTOUR	ROAD CONDITIONS	WEATHER
<input checked="" type="checkbox"/> 1 - STRAIGHT LEVEL <input type="checkbox"/> 2 - STRAIGHT GRADE <input type="checkbox"/> 3 - CURVE LEVEL <input type="checkbox"/> 4 - CURVE GRADE <input type="checkbox"/> 9 - UNKNOWN	<input checked="" type="checkbox"/> 01 - DRY <input type="checkbox"/> 02 - WET <input type="checkbox"/> 03 - SNOW <input type="checkbox"/> 04 - ICE <input type="checkbox"/> 05 - SAND, MUD, DIRT, OIL, GRAVEL <input type="checkbox"/> 06 - WATER (STANDING, MOVING) <input type="checkbox"/> 07 - SLUSH <input type="checkbox"/> 08 - DEBRIS* <input type="checkbox"/> 09 - RUT, HOLES, BUMPS, UNEVEN PAVEMENT* <input type="checkbox"/> 10 - OTHER <input type="checkbox"/> 99 - UNKNOWN	<input checked="" type="checkbox"/> 1 - CLEAR <input type="checkbox"/> 2 - CLOUDY <input type="checkbox"/> 3 - FOG, SMOG, SMOKE <input type="checkbox"/> 4 - RAIN <input type="checkbox"/> 5 - SLEET, HAIL <input type="checkbox"/> 6 - SNOW <input type="checkbox"/> 7 - SEVERE CROSSWINDS <input type="checkbox"/> 8 - BLOWING SAND, SOIL, DIRT, SNOW <input type="checkbox"/> 9 - OTHER/UNKNOWN

MANNER OF CRASH COLLISION/IMPACT	WEATHER
<input checked="" type="checkbox"/> 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT <input type="checkbox"/> 2 - REAR-END <input type="checkbox"/> 3 - HEAD-ON <input type="checkbox"/> 4 - REAR-TO-REAR <input type="checkbox"/> 5 - BACKING <input type="checkbox"/> 6 - ANGLE <input type="checkbox"/> 7 - SIDESWIPe, SAME DIRECTION <input type="checkbox"/> 8 - SIDESWIPe, OPPOSITE DIRECTION <input type="checkbox"/> 9 - UNKNOWN	<input checked="" type="checkbox"/> 1 - CLEAR <input type="checkbox"/> 2 - CLOUDY <input type="checkbox"/> 3 - FOG, SMOG, SMOKE <input type="checkbox"/> 4 - RAIN <input type="checkbox"/> 5 - SLEET, HAIL <input type="checkbox"/> 6 - SNOW <input type="checkbox"/> 7 - SEVERE CROSSWINDS <input type="checkbox"/> 8 - BLOWING SAND, SOIL, DIRT, SNOW <input type="checkbox"/> 9 - OTHER/UNKNOWN

ROAD SURFACE	LIGHT CONDITIONS	SCHOOL BUS RELATED
<input checked="" type="checkbox"/> 1 - CONCRETE <input type="checkbox"/> 2 - BLACKTOP, BITUMINOUS, ASPHALT <input type="checkbox"/> 3 - BRICK/BLOCK <input type="checkbox"/> 4 - SLAG, GRAVEL, STONE <input type="checkbox"/> 5 - ASPHALT <input type="checkbox"/> 6 - OTHER	<input checked="" type="checkbox"/> 1 - DAYLIGHT <input type="checkbox"/> 2 - DAWN <input type="checkbox"/> 3 - DUSK <input type="checkbox"/> 4 - DARK - LIGHTED ROADWAY <input type="checkbox"/> 5 - DARK - ROADWAY NOT LIGHTED <input type="checkbox"/> 6 - DARK - UNKNOWN ROADWAY LIGHTING <input type="checkbox"/> 7 - GLARE* <input type="checkbox"/> 8 - OTHER	<input type="checkbox"/> SCHOOL ZONE RELATED <input type="checkbox"/> YES, SCHOOL BUS DIRECTLY INVOLVED <input type="checkbox"/> YES, SCHOOL BUS INDIRECTLY INVOLVED

WORK ZONE RELATED	TYPE OF WORK ZONE	LOCATION OF CRASH IN WORK ZONE
<input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE) <input type="checkbox"/> LAW ENFORCEMENT PRESENT (VEHICLE ONLY)	<input type="checkbox"/> 1 - LANE CLOSURE <input type="checkbox"/> 2 - LANE SHIFT/CROSSOVER <input type="checkbox"/> 3 - WORK ON SHOULDER OR MEDIAN <input type="checkbox"/> 4 - INTERMITTENT OR MOVING WORK <input type="checkbox"/> 5 - OTHER	<input type="checkbox"/> 1 - BEFORE THE FIRST WORK ZONE WARNING SIGN <input type="checkbox"/> 2 - ADVANCE WARNING AREA <input type="checkbox"/> 3 - TRANSITION AREA <input type="checkbox"/> 4 - ACTIVITY AREA <input type="checkbox"/> 5 - TERMINATION AREA

NARRATIVE
UNIT #1 STRUCK UNIT #2 FROM BEHIND ON MASON MONTGOMERY RD NEAR TYLERSVILLE ROAD. BOTH VEHICLES WERE DAMAGED.



REPORT TAKEN BY	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO GDPS)	DATE CRASH REPORTED	TIME CRASH REPORTED	DISPATCH TIME	ARRIVAL TIME	TIME CLEARED	OTHER INVESTIGATION TIME	TOTAL MINUTES
<input type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST		1/22/2012	1245	1245	1250	1330	1345	160
OFFICER'S NAME *	OFFICER'S BADGE NUMBER	CHECKED BY	PAGE 1 of 4					
PH Edwards	1047	PH Edwards						



MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER

201121-13071559

UNIT NUMBER 011	NAME: LAST, FIRST, MIDDLE COUSINEAU, MACIE N.	DATE OF BIRTH 11/22/1995	AGE 17	GENDER F - FEMALE M - MALE
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ADDRESS, CITY, STATE, ZIP 5388 CONIFER DRIVE MASCO, OHIO 45040	CONTACT PHONE - INCLUDE AREA CODE 513 398-1916
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INJURIES 1	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04	DOT COMPLIANT <input type="checkbox"/> MOTORCYCLE HELMET	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
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OL STATE OH	OPERATOR LICENSE NUMBER TX349214	OL CLASS 4	No <input type="checkbox"/> VALID OL	M/C <input type="checkbox"/> END.	CONDITION 1	ALCOHOL/DRUG SUSPECTED 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE	DRUG TEST STATUS 1	DRUG TEST TYPE 1
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OFFENSE CHARGED (<input checked="" type="checkbox"/> LOCAL CODE) 333.03	OFFENSE DESCRIPTION ACDA	CITATION NUMBER 72979	HANDS-FREE <input type="checkbox"/> DEVICE USED	DRIVER DISTRACTED BY 1
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UNIT NUMBER 012	NAME: LAST, FIRST, MIDDLE MALIA, SOPHIE R.	DATE OF BIRTH 01/30/1995	AGE 17	GENDER F - FEMALE M - MALE
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ADDRESS, CITY, STATE, ZIP 5364 PRESCOTT CT.	CONTACT PHONE - INCLUDE AREA CODE 704 909-8229
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INJURIES 1	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 04	DOT COMPLIANT <input type="checkbox"/> MOTORCYCLE HELMET	SEATING POSITION 01	AIR BAG USAGE 1	EJECTION 1	TRAPPED 1
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OL STATE OH	OPERATOR LICENSE NUMBER TU900812	OL CLASS 4	No <input type="checkbox"/> VALID OL	M/C <input type="checkbox"/> END.	CONDITION 1	ALCOHOL/DRUG SUSPECTED 1	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE	DRUG TEST STATUS 1	DRUG TEST TYPE 1
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OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE <input type="checkbox"/> DEVICE USED	DRIVER DISTRACTED BY 1
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INJURIES 1 - NO INJURY / NONE REPORTED 2 - POSSIBLE 3 - NON-INCAPACITATING 4 - INCAPACITATING 5 - FATAL	INJURED TAKEN BY 1 - NOT TRANSPORTED / TREATED AT SCENE 2 - EMS 3 - POLICE 4 - OTHER 9 - UNKNOWN	SAFETY EQUIPMENT USED MOTORIST 01 - NONE USED - VEHICLE OCCUPANT 02 - SHOULDER BELT ONLY USED 03 - LAP BELT ONLY USED 04 - SHOULDER AND LAP BELT USED NON-MOTORIST 05 - CHILD RESTRAINT SYSTEM - FORWARD FACING 06 - CHILD RESTRAINT SYSTEM - REAR FACING 07 - BOOSTER SEAT 08 - HELMET USED 09 - UNKNOWN SAFETY EQUIPMENT 10 - HELMET USED 11 - PROTECTIVE PADS USED (ELBOWS, KNEES, ETC.) 12 - REFLECTIVE CLOTHING 13 - LIGHTING 14 - OTHER
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SEATING POSITION 01 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 02 - FRONT - MIDDLE 03 - FRONT - RIGHT SIDE 04 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 05 - SECOND - MIDDLE 06 - SECOND - RIGHT SIDE 07 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 08 - THIRD - MIDDLE 09 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF CAB (TRUCK) 11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A 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 16 - OTHER 17 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT SUCH AS A BUS, PICK-UP WITH CAP) 18 - OTHER 19 - UNKNOWN	AIR BAG USAGE 1 - NOT DEPLOYED 2 - DEPLOYED FRONT 3 - DEPLOYED SIDE 4 - DEPLOYED BOTH FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN
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EJECTION 1 - NOT EJECTED 2 - TOTALLY EJECTED 3 - PARTIALLY EJECTED 4 - NOT APPLICABLE	TRAPPED 1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL MEANS 3 - EXTRICATED BY NON-MECHANICAL MEANS	OPERATOR LICENSE CLASS 1 - CLASS A 2 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO "D") 5 - MC/MOPED ONLY	CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT 3 - EMOTIONAL (DEPRESSED, ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED 6 - UNDER THE INFLUENCE OF MEDICATIONS, DRUGS, ALCOHOL 7 - OTHER	ALCOHOL/DRUG SUSPECTED 1 - NONE 2 - YES - ALCOHOL SUSPECTED 3 - YES - HBD NOT IMPAIRED 4 - YES - DRUGS SUSPECTED 5 - YES - ALCOHOL AND DRUGS SUSPECTED
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ALCOHOL TEST STATUS 1 - NONE GIVEN 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 STATUS 1 - NONE GIVEN 2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS UNKNOWN	DRUG TEST TYPE 1 - NONE 2 - BLOOD 3 - URINE 4 - OTHER	DRIVER DISTRACTED BY 1 - NO DISTRACTION REPORTED 2 - PHONE 3 - TEXTING/E-MAILING 4 - ELECTRONIC COMMUNICATION DEVICE 5 - OTHER ELECTRONIC DEVICE (Navigation Device, Radio, DVD) 6 - OTHER INSIDE THE VEHICLE 7 - EXTERNAL DISTRACTION
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UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER F - FEMALE M - MALE
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ADDRESS, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE
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INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT <input type="checkbox"/> MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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UNIT NUMBER	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER F - FEMALE M - MALE
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ADDRESS, CITY, STATE, ZIP	CONTACT PHONE - INCLUDE AREA CODE
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INJURIES	INJURED TAKEN BY	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED	DOT COMPLIANT <input type="checkbox"/> MOTORCYCLE HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
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UNIT

LOCAL REPORT NUMBER

2012132755

UNIT NUMBER 011	OWNER NAME: LAST, FIRST, MIDDLE <input checked="" type="checkbox"/> SAME AS DRIVER	OWNER PHONE NUMBER - INC. AREA CODE <input checked="" type="checkbox"/> SAME AS DRIVER	DAMAGE SCALE 2	DAMAGED AREA
OWNER ADDRESS: CITY, STATE, ZIP <input checked="" type="checkbox"/> SAME AS DRIVER			1 - NONE	09
LP STATE OH	LICENSE PLATE NUMBER FNJ 7522	VEHICLE IDENTIFICATION NUMBER 3UWCB1211022M424272191	2 - MINOR	08
VEHICLE YEAR 2002	VEHICLE MAKE UW	VEHICLE MODEL BUG	3 - FUNCTIONAL	10
VEHICLE COLOR LT GRN	INSURANCE COMPANY PROGRESSIVE	POLICY NUMBER 21535655-1	4 - DISABLING	07
PROOF OF INSURANCE SHOWN <input checked="" type="checkbox"/>	TOWED BY		9 - UNKNOWN	06
CARRIER NAME, ADDRESS, CITY, STATE, ZIP			CARRIER PHONE - INCLUDE AREA CODE	

US DOT	VEHICLE WEIGHT GVWR/GCWR 1 1 - LESS THAN OR EQUAL TO 10K LBS. 2 - 10,001 TO 26,000 LBS. 3 - MORE THAN 26,000 LBS.	CARGO BODY TYPE 01 01 - NO CARGO BODY TYPE/NOT APPLICABLE 02 - BUS/VAN (9-15 SEATS, INC DRIVER) 03 - BUS (16+ SEATS, INC DRIVER) 04 - VEHICLE TOWING ANOTHER VEHICLE 05 - LOGGING 06 - INTERMODAL CONTAINER CHASSIS 07 - CARGO VAN/ENCLOSED BOX 08 - GRAB, CHIPS, GRAVEL	TRAFFICWAY DESCRIPTION 1 1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - TWO-WAY, DIVIDED, UNPROTECTED PAVED OR GRASS (4 FT.) MEDIAN 4 - TWO-WAY, DIVIDED, POSITIVE MEDIAN BARRIER 5 - ONE-WAY TRAFFICWAY
HM PLACARD ID No.	<input type="checkbox"/> HAZARDOUS MATERIAL RELEASED	09 - POLE 10 - CARGO TANK 11 - FLAT BED 12 - DUMP 13 - CONCRETE MIXER 14 - AUTO TRANSPORTER 15 - GARBAGE/REFUSE 16 - OTHER/UNKNOWN	<input type="checkbox"/> HIT / SKIP UNIT
HM CLASS NUMBER			

NON-MOTORIST LOCATION PRIOR TO IMPACT 01 01 - INTERSECTION - MARKED CROSSWALK 02 - INTERSECTION - NO CROSSWALK 03 - INTERSECTION - OTHER 04 - MIDSLOTT - MARKED CROSSWALK 05 - TRAVEL LANE - OTHER LOCATION 06 - BICYCLE LANE 07 - SHOULDER/ROADSIDE 08 - SIDEWALK 09 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED-USE PATH OR TRAIL 12 - NON-TRAFFICWAY AREA 99 - OTHER/UNKNOWN	TYPE OF USE 1 1 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	UNIT TYPE 02 99 - UNKNOWN OR HIT / SKIP	PASSENGER VEHICLES (LESS THAN 9 PASSENGERS) 01 - SUB-COMPACT 02 - COMPACT 03 - MID SIZE 04 - FULL SIZE 05 - MINIVAN 06 - SPORT UTILITY VEHICLE 07 - PICKUP 08 - VAN 09 - MOTORCYCLE 10 - MOTORIZED BICYCLE 11 - SNOWMOBILE/ATV 12 - OTHER PASSENGER VEHICLE	MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS 13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES 14 - SINGLE UNIT TRUCK; 3+ AXLES 15 - SINGLE UNIT TRUCK / TRAILER 16 - TRUCK/TRACTOR (BOBTAIL) 17 - TRACTOR/SEMI-TRAILER 18 - TRACTOR/DOUBLE 19 - TRACTOR/TRIPLES 20 - OTHER MED/HEAVY VEHICLE	BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER) 21 - BUS/VAN (9-15 SEATS, INC DRIVER) 22 - BUS (16+ SEATS, INC DRIVER) NON-MOTORIST 23 - ANIMAL WITH RIDER 24 - ANIMAL WITH BUGGY, WAGON, SURREY 25 - BICYCLE/PEDALCYCLIST 26 - PEDESTRIAN/SKATER 27 - OTHER NON-MOTORIST
			<input type="checkbox"/> HAS HM PLACARD		

SPECIAL FUNCTION 01 01 - NONE 02 - TAXI 03 - RENTAL TRUCK (OVER 10K LBS) 04 - BUS - SCHOOL (PUBLIC OR PRIVATE) 05 - BUS - TRANSIT 06 - BUS - CHARTER 07 - BUS - SHUTTLE 08 - BUS - OTHER	09 - AMBULANCE 10 - FIRE 11 - HIGHWAY/MAINTENANCE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - OTHER GOVERNMENT 16 - CONSTRUCTION EQUIP.	17 - FARM VEHICLE 18 - FARM EQUIPMENT 19 - MOTORHOME 20 - GOLF CART 21 - TRAIN 22 - OTHER (EXPLAIN IN NARRATIVE)	MOST DAMAGED AREA 02 01 - NONE 02 - CENTER FRONT 03 - RIGHT FRONT 04 - RIGHT SIDE 05 - RIGHT REAR 06 - REAR CENTER 07 - LEFT REAR	08 - LEFT SIDE 09 - LEFT FRONT 10 - TOP AND WINDOWS 11 - UNDERCARRIAGE 12 - LOAD/TRAILER 13 - TOTAL(ALL AREAS) 14 - OTHER	ACTION 3 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN
			02		

PRE-CRASH ACTIONS 11 99 - UNKNOWN	MOTORIST 01 - STRAIGHT AHEAD 02 - BACKING 03 - CHANGING LANES 04 - OVERTAKING/PASSING 05 - MAKING RIGHT TURN 06 - MAKING LEFT TURN	07 - MAKING U-TURN 08 - ENTERING TRAFFIC LANE 09 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - OTHER MOTORIST ACTION	NON-MOTORIST 15 - ENTERING OR CROSSING SPECIFIED LOCATION 16 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING 17 - WORKING 18 - PUSHING VEHICLE 19 - APPROACHING OR LEAVING VEHICLE 20 - STANDING 21 - OTHER NON-MOTORIST ACTION
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CONTRIBUTING CIRCUMSTANCES 09 99 - UNKNOWN	MOTORIST 01 - NONE 02 - FAILURE TO YIELD 03 - RAN RED LIGHT 04 - RAN STOP SIGN 05 - EXCEEDED SPEED LIMIT 06 - UNSAFE SPEED 07 - IMPROPER TURN 08 - LEFT OF CENTER 09 - FOLLOWED TOO CLOSELY/ACDA 10 - IMPROPER LANE CHANGE /PASSING/OFF ROAD	11 - IMPROPER BACKING 12 - IMPROPER START FROM PARKED POSITION 13 - STOPPED OR PARKED ILLEGALLY 14 - OPERATING VEHICLE IN NEGLIGENT MANNER 15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS) 16 - WRONG SIDE/WRONG WAY 17 - FAILURE TO CONTROL 18 - VISION OBSTRUCTION 19 - OPERATING DEFECTIVE EQUIPMENT 20 - LOAD SHIFTING/FALLING/SPILLING 21 - OTHER IMPROPER ACTION	NON-MOTORIST 22 - NONE 23 - IMPROPER CROSSING 24 - DARTING 25 - LYING AND/OR ILLEGALLY IN ROADWAY 26 - FAILURE TO YIELD RIGHT OF WAY 27 - NOT VISIBLE (DARK CLOTHING) 28 - INATTENTIVE 29 - FAILURE TO OBEY TRAFFIC SIGNS /SIGNALS/OFFICER 30 - WRONG SIDE OF THE ROAD 31 - OTHER NON-MOTORIST ACTION	VEHICLE DEFECTS 01 01 - TURN SIGNALS 02 - HEAD LAMPS 03 - TAIL LAMPS 04 - BRAKES 05 - STEERING 06 - TIRE BLOWOUT 07 - WORK OR SLICK TIRES 08 - TRAILER EQUIPMENT DEFECTIVE 09 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT 11 - OTHER DEFECTS
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SEQUENCE OF EVENTS 1 20 2 3 4 5 6 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT 1 99 - UNKNOWN	NON-COLLISION EVENTS 01 - OVERTURN/ROLLOVER 02 - FIRE/EXPLOSION 03 - IMMERSION 04 - JACKKNIFE 05 - CARGO/EQUIPMENT LOSS OR SHIFT 06 - EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC) 07 - CULVERT 08 - RAN OFF ROAD RIGHT 09 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN 11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION
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COLLISION WITH PERSON, VEHICLE OR OBJECT NOT FIXED 14 - PEDESTRIAN 15 - PEDALCYCLE 16 - RAILWAY VEHICLE (TRAIN, ENGINE) 17 - ANIMAL - FARM 18 - ANIMAL - DEER 19 - ANIMAL - OTHER 20 - MOTOR VEHICLE IN TRANSPORT	21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	COLLISION WITH FIXED OBJECT 25 - IMPACT ATTENUATOR/CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIEN OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE 31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT 43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT 50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL, BUILDING, TUNNEL 52 - OTHER FIXED OBJECT
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UNIT SPEED 20	POSTED SPEED 35	TRAFFIC CONTROL 02 01 - NO CONTROLS 02 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGNAL 05 - TRAFFIC FLASHERS 06 - SCHOOL ZONE 07 - RAILROAD CROSSLINGS 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BARRICADE 11 - PERSON (FLAGGER, OFFICER) 12 - PAVEMENT MARKINGS	UNIT DIRECTION FROM 1 TO 2 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN
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UNIT NUMBER 001	OWNER NAME: LAST, FIRST, MIDDLE (<input checked="" type="checkbox"/> SAME AS DRIVER)	OWNER PHONE NUMBER - INC. AREA CODE (<input checked="" type="checkbox"/> SAME AS DRIVER)	DAMAGE SCALE 2	DAMAGED AREA
OWNER ADDRESS: CITY, STATE, ZIP (<input checked="" type="checkbox"/> SAME AS DRIVER)			1 - NONE	
LP STATE OH	LICENSE PLATE NUMBER FEV5503	VEHICLE IDENTIFICATION NUMBER WMEFJ131BA1A1K31G24118	2 - MINOR	
VEHICLE YEAR 2010	VEHICLE MAKE SMART	VEHICLE MODEL Z DR COUPE	3 - FUNCTIONAL	
VEHICLE COLOR BLACK	PROOF OF INSURANCE SHOWN (<input checked="" type="checkbox"/>)	INSURANCE COMPANY USAA	4 - DISABLING	
POLICY NUMBER C02559968C		TOWED BY	9 - UNKNOWN	

CARRIER NAME, ADDRESS, CITY, STATE, ZIP	CARRIER PHONE - INCLUDE AREA CODE
US DOT	VEHICLE WEIGHT GVWR/GCWR
HM PLACARD ID NO.	1 - LESS THAN OR EQUAL TO 10K LBS. 2 - 10,001 TO 26,000 LBS. 3 - MORE THAN 26,000 LBS.
HM CLASS NUMBER	<input type="checkbox"/> HAZARDOUS MATERIAL RELEASED
CARGO BODY TYPE	TRAFFICWAY DESCRIPTION
01 - NO CARGO BODY TYPE/NOT APPLICABLE	1 - TWO-WAY, NOT DIVIDED
02 - BUS/VAN (9-15 SEATS, INC DRIVER)	2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE
03 - BUS (16+ SEATS, INC DRIVER)	3 - TWO-WAY, DIVIDED, UNPROTECTIVE PAINTS OR GRASS (4 FT.) MEDIUM
04 - VEHICLE TOWING ANOTHER VEHICLE	4 - TWO-WAY, DIVIDED, POSITIVE MEDIUM BARRIER
05 - LOGGING	5 - ONE-WAY TRAFFICWAY
06 - INTERMODAL CONTAINER CHASSIS	<input type="checkbox"/> HIT / SKIP UNIT
07 - CARGO VAN/ENCLOSED BOX	
08 - GRAIN, CHIPS, GRAVEL	

NON-MOTORIST LOCATION PRIOR TO IMPACT	TYPE OF USE	UNIT TYPE	PASSENGER VEHICLES (LESS THAN 9 PASSENGERS)	MED/HEAVY TRUCKS OR COMBO UNITS > 10K LBS	BUS/VAN/LIMO (9 OR MORE INCLUDING DRIVER)
01 - INTERSECTION - MARKED CROSSWALK	1 - PERSONAL	01 - SUB-COMPACT	01 - SUB-COMPACT	13 - SINGLE UNIT TRUCK OR VAN 2AXLE, 6 TIRES	21 - BUS/VAN (9-15 SEATS, INC DRIVER)
02 - INTERSECTION - NO CROSSWALK	2 - COMMERCIAL	02 - COMPACT	02 - COMPACT	14 - SINGLE UNIT TRUCK; 3+ AXLES	22 - BUS (16+ SEATS, INC DRIVER)
03 - INTERSECTION - OTHER	3 - GOVERNMENT	03 - MID SIZE	03 - MID SIZE	15 - SINGLE UNIT TRUCK / TRAILER	Non-Motorist
04 - MIDBLOCK - MARKED CROSSWALK	<input type="checkbox"/> IN EMERGENCY RESPONSE	04 - FULL SIZE	04 - FULL SIZE	16 - TRUCK/TRACTOR (BOBTAIL)	23 - ANIMAL WITH RIDER
05 - TRAVEL LANE - OTHER LOCATION		05 - MINIVAN	05 - MINIVAN	17 - TRACTOR/SEMI-TRAILER	24 - ANIMAL WITH BUGGY, WAGON, GUTBERY
06 - BICYCLE LANE		06 - SPORT UTILITY VEHICLE	06 - SPORT UTILITY VEHICLE	18 - TRACTOR/DOUBLE	25 - BICYCLE/PEDALCYCLIST
07 - SHOULDER/ROADSIDE		07 - PICKUP	07 - PICKUP	19 - TRACTOR/Triples	26 - PEDESTRIAN/SKATER
08 - SIDEWALK		08 - VAN	08 - VAN	20 - OTHER MED/HEAVY VEHICLE	27 - OTHER NON-MOTORIST
09 - MEDIUM/CROSSING ISLAND		09 - MOTORCYCLE	09 - MOTORCYCLE		
10 - DRIVEWAY ACCESS		10 - MOTORIZED BICYCLE	10 - MOTORIZED BICYCLE		
11 - SHARED-USE PATH OR TRAIL		11 - SNOWMOBILE/ATV	11 - SNOWMOBILE/ATV		
12 - NON-TRAFFICWAY AREA		12 - OTHER PASSENGER VEHICLE	12 - OTHER PASSENGER VEHICLE		
99 - OTHER/UNKNOWN					

SPECIAL FUNCTION	MOST DAMAGED AREA	IMPACT AREA	ACTION
01 - NONE	01 - NONE	01 - NONE	1 - NON-CONTACT
02 - TAXI	02 - CENTER FRONT	02 - CENTER FRONT	2 - NON-COLLISION
03 - RENTAL TRUCK (GVW 10K LBS)	03 - RIGHT FRONT	03 - RIGHT FRONT	3 - STRIKING
04 - BUS - SCHOOL (PUBLIC OR PRIVATE)	04 - RIGHT SIDE	04 - RIGHT SIDE	4 - STRUCK
05 - BUS - TRANSIT	05 - RIGHT REAR	05 - RIGHT REAR	5 - STRIKING/STRUCK
06 - BUS - CHARTER	06 - REAR CENTER	06 - REAR CENTER	9 - UNKNOWN
07 - BUS - SHUTTLE	07 - LEFT REAR	07 - LEFT REAR	
08 - BUS - OTHER	08 - LEFT SIDE	08 - LEFT SIDE	
	09 - LEFT FRONT	09 - LEFT FRONT	
	10 - TOP AND WINDOWS	10 - TOP AND WINDOWS	
	11 - UNDERCARRIAGE	11 - UNDERCARRIAGE	
	12 - LOAD/TRAILER	12 - LOAD/TRAILER	
	13 - TOTAL(AIRIAS)	13 - TOTAL(AIRIAS)	
	14 - OTHER	14 - OTHER	

PRE-CRASH ACTIONS	MOTORIST	NON-MOTORIST
01 - STRAIGHT AHEAD	01 - STRAIGHT AHEAD	01 - ENTERING OR CROSSING SPECIFIED LOCATION
02 - BACKING	02 - BACKING	02 - WALKING, RUNNING, JOGGING, PLAYING, CYCLING
03 - CHANGING LANES	03 - CHANGING LANES	03 - WORKING
04 - OVERTAKING/PASSING	04 - OVERTAKING/PASSING	04 - PUSHING VEHICLE
05 - MAKING RIGHT TURN	05 - MAKING RIGHT TURN	05 - APPROACHING OR LEAVING VEHICLE
06 - MAKING LEFT TURN	06 - MAKING LEFT TURN	06 - STANDING
07 - MAKING U-TURN	07 - MAKING U-TURN	
08 - ENTERING TRAFFIC LANE	08 - ENTERING TRAFFIC LANE	
09 - LEAVING TRAFFIC LANE	09 - LEAVING TRAFFIC LANE	
10 - PARKED	10 - PARKED	
11 - SLOWING OR STOPPED IN TRAFFIC	11 - SLOWING OR STOPPED IN TRAFFIC	
12 - DRIVERLESS	12 - DRIVERLESS	
13 - NEGOTIATING A CURVE	13 - NEGOTIATING A CURVE	
14 - OTHER MOTORIST ACTION	14 - OTHER MOTORIST ACTION	

CONTRIBUTING CIRCUMSTANCES	VEHICLE DEFECTS
PRIMARY	01 - TURN SIGNALS
01 - NONE	02 - HEAD LAMPS
02 - FAILURE TO YIELD	03 - TAIL LAMPS
03 - RAN RED LIGHT	04 - BRAKES
04 - RAN STOP SIGN	05 - STEERING
05 - EXCEEDED SPEED LIMIT	06 - TIRE BLOWOUT
06 - UNSAFE SPEED	07 - WORN OR SLICK TIRES
07 - IMPROPER TURN	08 - TRAILER EQUIPMENT DEFECTIVE
08 - LEFT OF CENTER	09 - MOTOR TROUBLE
09 - FOLLOWED TOO CLOSELY/ACDA	10 - DISABLED FROM PRIOR ACCIDENT
10 - IMPROPER LANE CHANGE /PASSING/OUT ROAD	11 - OTHER DEFECTS
11 - IMPROPER BACKING	
12 - IMPROPER START FROM PARKED POSITION	
13 - STOPPED OR PARKED ILLEGALLY	
14 - OPERATING VEHICLE IN NEGLIGENT MANNER	
15 - SWERVING TO AVOID (DUE TO EXTERNAL CONDITIONS)	
16 - WRONG SIDE/WRONG WAY	
17 - FAILURE TO CONTROL	
18 - VISION OBSTRUCTION	
19 - OPERATING DEFECTIVE EQUIPMENT	
20 - LOAD SHIFTING/FALLING/SPILLING	
21 - OTHER IMPROPER ACTION	

SEQUENCE OF EVENTS	NON-COLLISION EVENTS	COLLISION WITH FIXED OBJECT
1 - 20	01 - OVERTURN/RUNDOVER	25 - IMPACT ATTENUATOR/CRASH CUSHION
2 -	02 - FIRE/EXPLOSION	26 - BRIDGE OVERHEAD STRUCTURE
3 -	03 - IMPEDIMENT	27 - BRIDGE PIER OR ABUTMENT
4 -	04 - JACKKNIFE	28 - BRIDGE PARAPET
5 -	05 - CARGO/EQUIPMENT LOSS OR SHIFT	29 - BRIDGE RAIL
6 -		30 - GUARDRAIL FACE
FIRST HARMFUL EVENT 1		31 - GUARDRAIL END
MOST HARMFUL EVENT 1		32 - PORTABLE BARRIER
	06 - EQUIPMENT FAILURE (BROOK TIRE, BRAKE FAILURE, ETC)	33 - MEDIUM CABLE BARRIER
	07 - SEPARATION OF UNITS	34 - MEDIUM GUARDRAIL BARRIER
	08 - RAN OFF ROAD RIGHT	35 - MEDIUM CONCRETE BARRIER
	09 - RAN OFF ROAD LEFT	36 - MEDIUM OTHER BARRIER
		37 - TRAFFIC SIGN POST
		38 - OVERHEAD SIGN POST
		39 - LIGHT/LUMINARIES SUPPORT
		40 - UTILITY POLE
	10 - CROSS MEDIUM	41 - OTHER POST, POLE OR SUPPORT
	11 - CROSS CENTER LINE OPPOSITE DIRECTION OF TRAVEL	42 - CULVERT
	12 - DOWNMILL RUNAWAY	43 - CURB
	13 - OTHER NON-COLLISION	44 - DITCH
		45 - EMBANKMENT
		46 - FENCE
		47 - MAILBOX
		48 - TREE
		49 - FIRE HYDRANT
		50 - WORK ZONE MAINTENANCE EQUIPMENT
		51 - WALL, BUILDING, TUNNEL
		52 - OTHER FIXED OBJECT

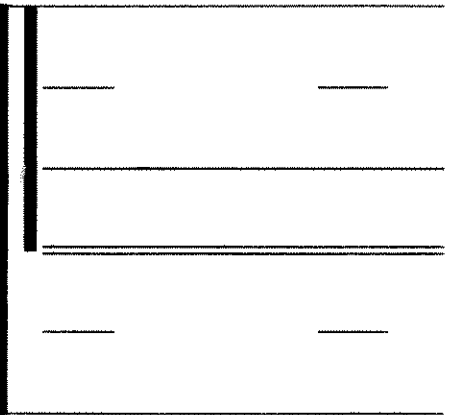
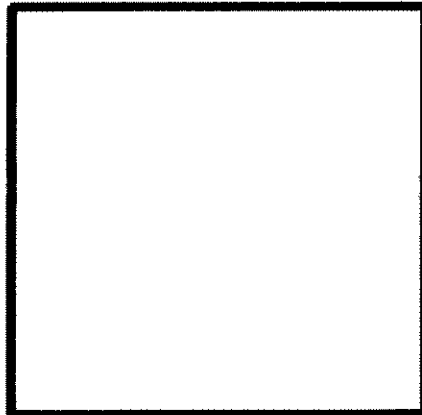
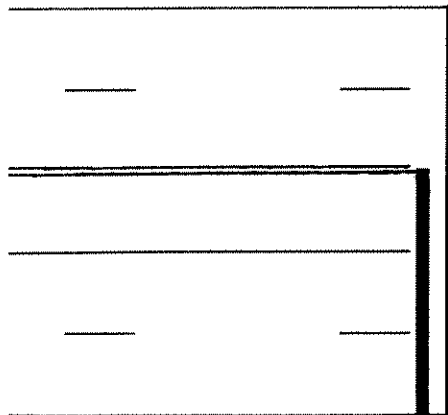
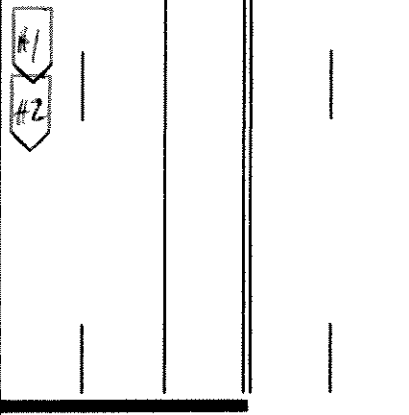
UNIT SPEED	POSTED SPEED	TRAFFIC CONTROL	UNIT DIRECTION
00	35	01 - NO CONTROLS	FROM 1 TO 2
<input checked="" type="checkbox"/> STATED		02 - STOP SIGN	1 - NORTH
<input type="checkbox"/> ESTIMATED		03 - YIELD SIGN	2 - SOUTH
		04 - TRAFFIC SIGNAL	3 - EAST
		05 - TRAFFIC FLASHERS	4 - WEST
		06 - SCHOOL ZONE	5 - NORTHEAST
		07 - RAILROAD CROSSINGS	6 - NORTHWEST
		08 - RAILROAD FLASHERS	7 - SOUTHEAST
		09 - RAILROAD GATES	8 - SOUTHWEST
		10 - CONSTRUCTION BARRIAGE	9 - UNKNOWN
		11 - PERSON (FLARGER, OFFICER)	
		12 - PAVEMENT MARKINGS	
		13 - CROSSWALK LINES	
		14 - WALK/DON'T WALK	
		15 - OTHER	
		16 - NOT REPORTED	

OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

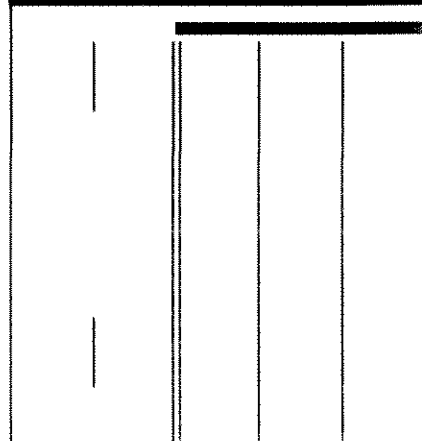
OH-2

LOCAL REPORT NUMBER 12-30755	REPORTING AGENCY MASON POLICE	DATE OF ACCIDENT M 12 D 20 Y 12
IN COUNTY OF WARREN	ACCIDENT LOCATION MASON MONT RD @ TYLERSVILLE RD	

MASON MONTGOMERY RD



TYLERSVILLE RD



NOT TO SCALE

OFFICER'S SIGNATURE Ptl. Eduza	BADGE NUMBER 1047
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LOCAL REPORT NUMBER <i>12-30755</i>	REPORTING AGENCY Mason Police Department	DATE OF CRASH M <i>12</i> D <i>25</i> Y <i>12</i>
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FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

X *MACIE COUSINEAU* HEREBY MAKE THIS VOLUNTARY STATEMENT TO
PRINTED

Ptl. Dan Edwards AT *MM. TUL*
OFFICER'S NAME LOCATION

DESCRIBE WHAT HAPPENED: *The car in front of me came to a sudden stop, not leaving me with enough time to break.*

Q. What was your speed at the time of the crash? A. *20 mph*

Q. What was your direction of travel? A. *South*

Q. Were you wearing a seatbelt? A. *YES*

Q. Were you talking on a cell phone at the time of the crash? A. *NO*

Q. Were you injured due to the crash? A. *NO*

ADDRESS OF WITNESS

SIGNATURE OF WITNESS: *X Macie Cousineau*

OFFICER'S SIGNATURE: *X Ptl. Edwards*

PHONE: *513-398-1916*