



TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER * 13 _____ 30878	CRASH SEVERITY 3 - 1 - FATAL 2 - INJURY 3 - PDO	HIT/SKIP 1 - SOLVED 2 - UNSOLVED
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<input checked="" type="checkbox"/> POLICE TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER	<input type="checkbox"/> PDO UNDER STATE RESPONSIBILITY <input type="checkbox"/> PRIVATE PROPERTY	REPORTING AGENCY NO/IO * 08304	REPORTING AGENCY NAME * MASON	NUMBER OF UNITS 01	UNIT IN CRASH 98 - ANIMAL 99 - UNKNOWN
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COUNTY * 83	CITY * MASON	CRASH DATE * 11/01/2013	TIME OF CRASH 0400	DAY OF WEEK FR
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DEGREES / MINUTES / SECONDS LATITUDE 0' 0" 0"	LONGITUDE 0' 0" 0"	DECIMAL DEGREES LATITUDE 39.340459	LONGITUDE -84.304023
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ROADWAY DIVISION <input type="checkbox"/> DIVIDED <input checked="" type="checkbox"/> UNDIVIDED	DIVIDED LANE DIRECTION OF TRAVEL <input type="checkbox"/> N - NORTHBOUND <input type="checkbox"/> S - SOUTHBOUND <input type="checkbox"/> E - EASTBOUND <input type="checkbox"/> W - WESTBOUND	NUMBER OF TRU LINES 02	ROAD TYPES OR MILEPOST ² AL - ALLEY AV - AVENUE BL - BOULEVARD CR - CIRCLE CT - COURT DR - DRIVE HE - HEIGHTS HW - HIGHWAY LA - LANE MP - MILEPOST PK - PARKWAY PI - PIKE PL - PLACE RD - ROAD RD - ROAD SQ - SQUARE ST - STREET TE - TERRACE TL - TRAIL
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LOCATION ROUTE TYPE ¹ 00	LOCATION ROUTE NUMBER 00	LOC PREFIX <input type="checkbox"/> N, S <input type="checkbox"/> E, W	LOCATION ROAD NAME PARKLAKE	LOCATION ROAD TYPE ² DR	ROUTE TYPES ¹ IR - INTERSTATE ROUTE (ING. TURNPIKE) US - US ROUTE SR - STATE ROUTE	CR - NUMBERED COUNTY ROUTE TR - NUMBERED TOWNSHIP ROUTE
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DISTANCE FROM REFERENCE <input type="checkbox"/> MILES <input type="checkbox"/> FEET <input type="checkbox"/> YARDS	DIR FROM REF <input type="checkbox"/> N, S <input type="checkbox"/> E, W	REFERENCE ROUTE TYPE ¹ 00	REFERENCE ROUTE NUMBER 00	REF PREFIX <input type="checkbox"/> N, S <input type="checkbox"/> E, W	REFERENCE NAME (ROAD, MILEPOST, HOUSE #) 6780 PARKLAKE	REFERENCE ROAD TYPE ² DR
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REFERENCE POINT USED 3 - MILE POST	CRASH LOCATION 01	01 - NOT AN INTERSECTION 02 - FOUR-WAY INTERSECTION 03 - T-INTERSECTION 04 - Y-INTERSECTION 05 - TRAFFIC CIRCLE/ROUNDABOUT	06 - FIVE-POINT, OR MORE 07 - ON RAMP 08 - OFF RAMP 09 - CROSSOVER 10 - DRIVEWAY/ALLEY ACCESS	11 - RAILWAY GRADE CROSSING 12 - SHARED-USE PATHS OR TRAILS 99 - UNKNOWN	<input type="checkbox"/> INTERSECTION RELATED	LOCATION OF FIRST HARMFUL EVENT 4	1 - ON ROADWAY 2 - ON SHOULDER 3 - IN MEDIAN 4 - ON ROADSIDE 5 - ON GORE 6 - OUTSIDE TRAFFICWAY 9 - UNKNOWN
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ROAD CONTOUR 1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE 3 - CURVE LEVEL 4 - CURVE GRADE 9 - UNKNOWN	ROAD CONDITIONS PRIMARY 02	SECONDARY 00	01 - DRY 02 - WET 03 - SNOW 04 - ICE 05 - SAND, MUD, DIRT, OIL, GRAVEL 06 - WATER (STANDING, MOVING) 07 - SLUSH 08 - DEBRIS* 09 - RUT, HOLES, BUMPS, UNEVEN PAVEMENT* 10 - OTHER 99 - UNKNOWN	* SECONDARY CONDITION ONLY
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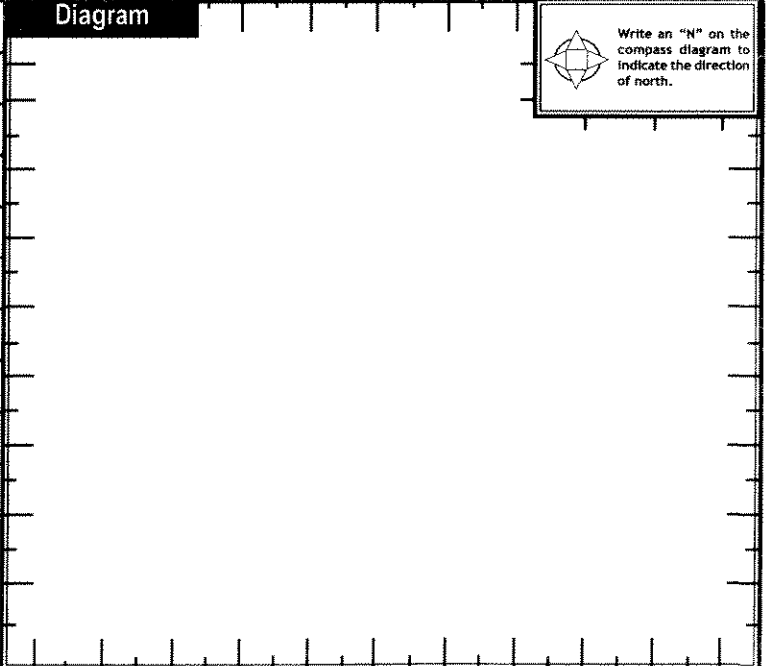
MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - UNKNOWN	WEATHER 4	1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - OTHER/UNKNOWN
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ROAD SURFACE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 6 - OTHER	LIGHT CONDITIONS PRIMARY 4	SECONDARY 00	1 - DAYLIGHT 2 - DAWN 3 - DUSK 4 - DARK - LIGHTED ROADWAY 5 - DARK - ROADWAY NOT LIGHTED 6 - DARK - UNKNOWN ROADWAY LIGHTING 7 - GLARE* 8 - OTHER 9 - UNKNOWN	* SECONDARY CONDITION ONLY	<input type="checkbox"/> SCHOOL BUS RELATED <input type="checkbox"/> SCHOOL ZONE RELATED <input type="checkbox"/> YES, SCHOOL BUS DIRECTLY INVOLVED <input type="checkbox"/> YES, SCHOOL BUS INDIRECTLY INVOLVED
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<input type="checkbox"/> WORK ZONE RELATED <input type="checkbox"/> WORKERS PRESENT <input type="checkbox"/> LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE) <input type="checkbox"/> LAW ENFORCEMENT PRESENT (VEHICLE ONLY)	TYPE OF WORK ZONE 00	1 - LANE CLOSURE 2 - LANE SHIFT/CROSSOVER 3 - WORK ON SHOULDER OR MEDIAN 4 - INTERMITTENT OR MOVING WORK 5 - OTHER	LOCATION OF CRASH IN WORK ZONE 00	1 - BEFORE THE FIRST WORK ZONE WARNING SIGN 2 - ADVANCE WARNING AREA 3 - TRANSITION AREA 4 - ACTIVITY AREA 5 - TERMINATION AREA
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NARRATIVE

Unit 1 left roadway on left side and struck a mailbox and lightpole. Unit 1 entered back on to roadway and left the scene.



REPORT TAKEN BY <input checked="" type="checkbox"/> POLICE AGENCY <input type="checkbox"/> MOTORIST	<input type="checkbox"/> SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)	DATE CRASH REPORTED 11/01/2013	TIME CRASH REPORTED 0826	DISPATCH TIME 0826	ARRIVAL TIME 0839	TIME CLEARED 1028	OTHER INVESTIGATION TIME 0000	TOTAL MINUTES 0112
OFFICER'S NAME * A. Yeary	OFFICER'S BADGE NUMBER 51	CHECKED BY	PAGE 4 OF 3					



MOTORIST / NON-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER

13 34878

UNIT NUMBER 011	NAME: LAST, FIRST, MIDDLE Herrin Bradley J	DATE OF BIRTH 11/15/1985	AGE 28	GENDER M
ADDRESS, CITY, STATE, ZIP 6821 Parklake Dr MASON OH 45040			CONTACT PHONE- INCLUDE AREA CODE 513-702-2517	

INJURIES <input type="checkbox"/>	INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED 99	DOT COMPLIANT <input type="checkbox"/>	SEATING POSITION 01	AIR BAG USAGE <input type="checkbox"/>	EJECTION <input type="checkbox"/>	TRAPPED <input type="checkbox"/>		
OL STATE OH	OPERATOR LICENSE NUMBER SK112692	OL CLASS D	No VALID OL <input type="checkbox"/>	M/C END. <input type="checkbox"/>	CONDITION 6	ALCOHOL/DRUG SUSPECTED 2	ALCOHOL TEST STATUS 1	ALCOHOL TEST TYPE 1	ALCOHOL TEST VALUE	DRUG TEST STATUS 1	DRUG TEST TYPE 1

OFFENSE CHARGED (<input checked="" type="checkbox"/> LOCAL CODE) 331.34	OFFENSE DESCRIPTION Failure to Control	CITATION NUMBER 70959	HANDS-FREE DEVICE USED <input type="checkbox"/>	DRIVER DISTRACTED BY <input type="checkbox"/>
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UNIT NUMBER <input type="checkbox"/>	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER <input type="checkbox"/>
ADDRESS, CITY, STATE, ZIP			CONTACT PHONE- INCLUDE AREA CODE	

INJURIES <input type="checkbox"/>	INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED <input type="checkbox"/>	DOT COMPLIANT <input type="checkbox"/>	SEATING POSITION <input type="checkbox"/>	AIR BAG USAGE <input type="checkbox"/>	EJECTION <input type="checkbox"/>	TRAPPED <input type="checkbox"/>		
OL STATE <input type="checkbox"/>	OPERATOR LICENSE NUMBER	OL CLASS <input type="checkbox"/>	No VALID OL <input type="checkbox"/>	M/C END. <input type="checkbox"/>	CONDITION <input type="checkbox"/>	ALCOHOL/DRUG SUSPECTED <input type="checkbox"/>	ALCOHOL TEST STATUS <input type="checkbox"/>	ALCOHOL TEST TYPE <input type="checkbox"/>	ALCOHOL TEST VALUE	DRUG TEST STATUS <input type="checkbox"/>	DRUG TEST TYPE <input type="checkbox"/>

OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED <input type="checkbox"/>	DRIVER DISTRACTED BY <input type="checkbox"/>
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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 CAB) 12 - PASSENGER IN UNENCLOSED CARGO AREA 13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15 - NON-MOTORIST 16 - OTHER 99 - 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 IS "D") 5 - M/C/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 <input type="checkbox"/>	NAME: LAST, FIRST, MIDDLE	DATE OF BIRTH	AGE	GENDER <input type="checkbox"/>
ADDRESS, CITY, STATE, ZIP			CONTACT PHONE- INCLUDE AREA CODE	

INJURIES <input type="checkbox"/>	INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED <input type="checkbox"/>	DOT COMPLIANT <input type="checkbox"/>	SEATING POSITION <input type="checkbox"/>	AIR BAG USAGE <input type="checkbox"/>	EJECTION <input type="checkbox"/>	TRAPPED <input type="checkbox"/>		
OL STATE <input type="checkbox"/>	OPERATOR LICENSE NUMBER	OL CLASS <input type="checkbox"/>	No VALID OL <input type="checkbox"/>	M/C END. <input type="checkbox"/>	CONDITION <input type="checkbox"/>	ALCOHOL/DRUG SUSPECTED <input type="checkbox"/>	ALCOHOL TEST STATUS <input type="checkbox"/>	ALCOHOL TEST TYPE <input type="checkbox"/>	ALCOHOL TEST VALUE	DRUG TEST STATUS <input type="checkbox"/>	DRUG TEST TYPE <input type="checkbox"/>

OFFENSE CHARGED (<input type="checkbox"/> LOCAL CODE)	OFFENSE DESCRIPTION	CITATION NUMBER	HANDS-FREE DEVICE USED <input type="checkbox"/>	DRIVER DISTRACTED BY <input type="checkbox"/>
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INJURIES <input type="checkbox"/>	INJURED TAKEN BY <input type="checkbox"/>	EMS AGENCY	MEDICAL FACILITY INJURED TAKEN TO	SAFETY EQUIPMENT USED <input type="checkbox"/>	DOT COMPLIANT <input type="checkbox"/>	SEATING POSITION <input type="checkbox"/>	AIR BAG USAGE <input type="checkbox"/>	EJECTION <input type="checkbox"/>	TRAPPED <input type="checkbox"/>
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Unit

Local Report Number
13 30878

Unit Number 01	Owner Name: Last, First, Middle (Same As Driver)	Owner Phone Number - Inc. Area code (Same As Driver)	Damage Scale 4	
Owner Address: City, State, Zip (Same As Driver)			1 - None	
LP State OH	License Plate Number EWG 1202	Vehicle Identification Number 3GNFK13T72G153931	2 - Minor	
Vehicle Year 2002	Vehicle Make Chevy	Vehicle Model Avalanche	3 - Extensive	
Vehicle Color Gold	Proof of Insurance Shown <input checked="" type="checkbox"/>	Insurance Company Safe Auto	4 - Damaged	
Carrier Name, Address, City, State, Zip	Carrier Phone - include area code	Policy Number OH-01248890A-00	5 - Uninsured	
Towed By CASE			6 - Total Loss	

US DOT	Vehicle Weight GVWR/GWR 1 - Less than or Equal to 10,000 lbs. 2 - 10,001 to 26,000 lbs. 3 - More than 26,000 lbs.	Vehicle Body Type 01 - No Trailer 02 - Semi Trailer 03 - Flatbed 04 - Tank 05 - Dump 06 - Concrete Mixer 07 - Auto Transporter 08 - Garbage/Refuse 09 - Other/Unknown	Trafficway Description 1 - Two Way, Not Divided 2 - Two Way, Not Divided, Centerline Control Line 3 - Two Way, Divided, Unpaved/Shoulder 4 - Two Way, Divided, Paved Median 5 - One Way Trafficway
HM Placard ID No.	<input type="checkbox"/> Hazardous Material Released	<input type="checkbox"/> Hit / Skip Unit	

Non-Motorist Location Prior to Impact 01 - Intersection - Marked Crosswalk 02 - Intersection - No Crosswalk 03 - Intersection - Other 04 - Midblock - 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 - Personal 2 - Commercial 3 - Government <input type="checkbox"/> In Emergency Response	Unit Type 06 01 - Passenger Vehicle (Less than 9 passengers) 02 - Sub-compact 03 - Compact 04 - Mid Size 05 - Full Size 06 - Sport Utility Vehicle 07 - Pickup 08 - Van 09 - Motorcycle 10 - Motorized Bicycle 11 - Snowmobile/ATV 12 - Other Passenger Vehicle	Motor/Heavy Trucks or Combo Units > 10k lbs 13 - Single Unit Truck or Van Trailer, 6 tires 14 - Single Unit Truck; 3 axles 15 - Single Unit Truck / Trailer 16 - Truck/Tractor (Boutail) 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)
<input type="checkbox"/> Has HM Placard				

Special Function 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/Air Areas 14 - Other 99 - Unknown	Action 3 1 - Non-Contact 2 - Non-Collision 3 - Striking 4 - Struck 5 - Striking/Struck 9 - Unknown
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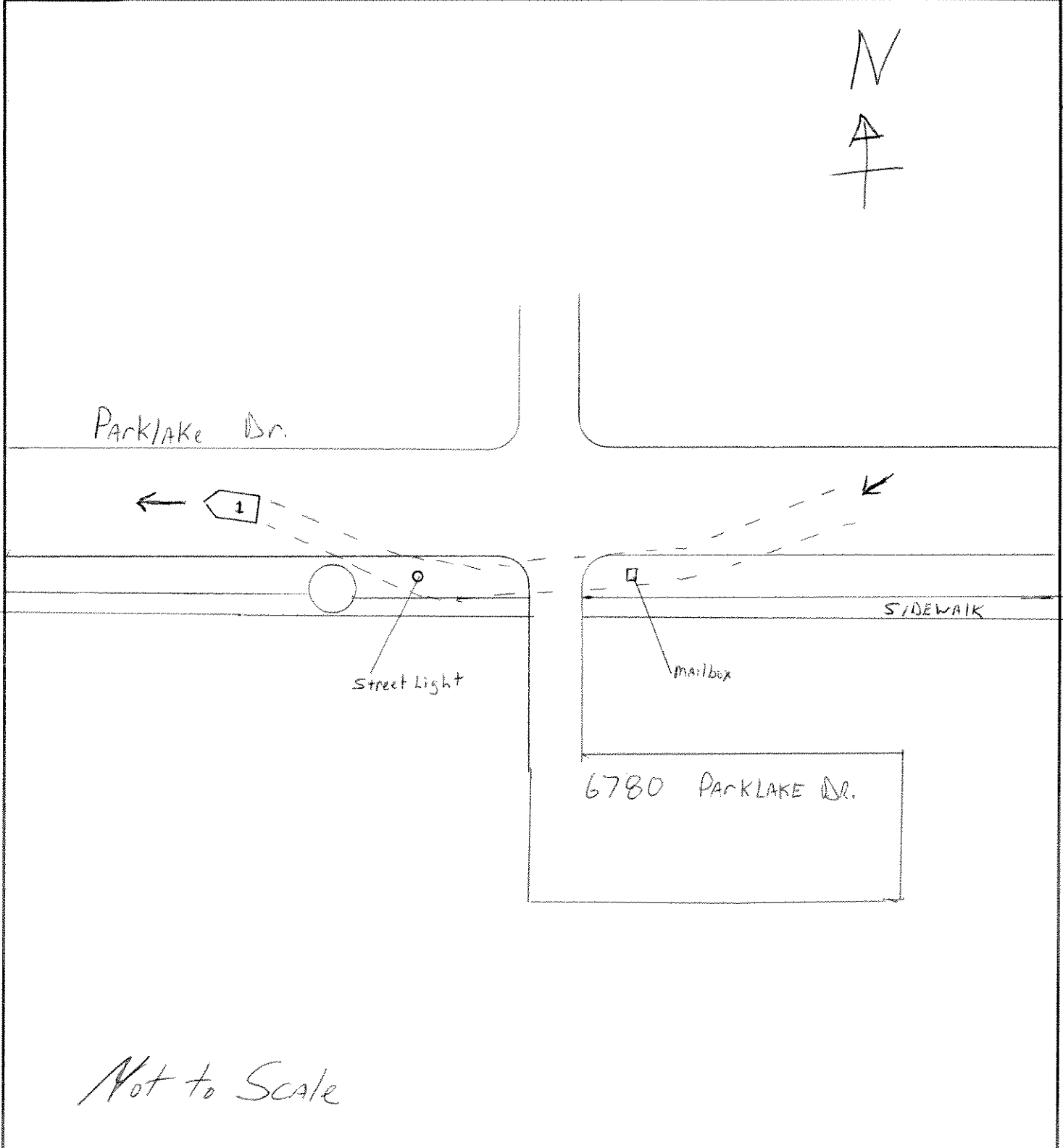
Pre-Crash Actions 01 01 - Straight Ahead 02 - Backing 03 - Changing Lanes 04 - Overtaking/Passing 05 - Making Right Turn 06 - Making Left Turn 07 - Making U-Turn 08 - Entering Traffic Lane 09 - Leaving Traffic Lane 10 - Parked 11 - Slowing or Stopped in Traffic 12 - Driverless 13 - Negotiating a Curve 14 - Other Motorist Action 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

Contributing Circumstances Primary 07 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 Secondary 01 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 - Worn or Slick tires 08 - Trailer Equipment Defective 09 - Motor Trouble 10 - Disabled From Prior Accident 11 - Other Defects
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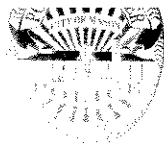
Sequence of Events 1 43 2 47 3 39 4 43 5 00 6 00 First Harmful Event 2 Most Harmful Event 3 99 - Unknown	Non-Collision Events 01 - Overturn/Rollover 02 - Fire/Explosion 03 - Immersion 04 - Jackknife 05 - Cargo/Equipment Loss or Shift 06 - Equipment Failure (Blown Tire, Brake Failure, etc) 07 - Separation of Units 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	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 25 - Impact Attenuator/Crush Cushion 26 - Bridge Overhead Structure 27 - Bridge Pier 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 030	Posted Speed 25	Traffic Control 01 01 - No Control 02 - Stop Sign 03 - Yield Sign 04 - Traffic Sign 05 - Flashing Lights 06 - Road Closes 07 - Railroad Crossings 08 - Railroad Flashing 09 - Railroad Gates 10 - Construction Barricade 11 - Person (Flagger, Officer) 12 - Pavement Markings 13 - Crosswalk Lines 14 - White/Beet Walk 15 - Other 16 - Not Reported	Unit Direction From 3 To 4 1 - North 2 - South 3 - East 4 - West 5 - Northeast 6 - Northwest 7 - Southeast 8 - Southwest 9 - Unknown
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LOCAL REPORT NUMBER <i>13-30878</i>	REPORTING AGENCY <i>MASON Police</i>	DATE OF CRASH M <i>11</i> D <i>01</i> Y <i>13</i>
IN COUNTY OF <i>Warren</i>	CRASH LOCATION <i>6780 Parklake</i>	



OFFICER'S SIGNATURE <i>X [Signature]</i>	BADGE NUMBER <i>57</i>
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Incident Report

Incident Information											
Occurred On/From	Day of Week	Date	Time	Occurred To	Day of Week	Date	Time	Reported On	Date	Time	
	Fri	11/01/2013	3:00:00AM		Fri	11/01/2013	3:00:00AM	→	11/1/2013	8:26:24AM	
Reported As Traffic Crash				Incident Type - Primary Traffic Crash No Injury				Arresting Officer			
Incident Address 6780 Parklake Drive, Mason, OH 45040								Reporting Officer Police Officer Aaron Yeary			
District 4		Stat. Area Southeast		Subdivision Village Lakes		Census Tract		Landmark			
Business Name N/A						Incident Types - Other					

Associated Persons Summary							
Type	Name (Last, First, MI)	Date of Birth	Sex	Home Phone #	Cell Phone #	Work Phone #	Address
Arrested	Herrin, Bradley J	10/15/1985	M	(513) 702-2517	N/A	N/A	6821 Parklake Drive, Mason, OH 45040
Other	Herrin, Mark O	8/11/1954	M	N/A	N/A	N/A	6821 Parklake Drive, Mason, OH 45040

Associated Businesses Summary			
Type	Name	Primary Phone #	Secondary Phone #
No Associated Businesses reported for Incident #: 2013000030878			

Involved Officers			
Officer Title	Officer Name	Officer Type	Division
Police Officer	Aaron R Yeary	Reporting Officer	Police Department
Police Officer	Robert S Temple	Assisting Officer	Police Department

IBR/UCR Offenses				
Offense Number	IBR Type	Chapter	Section	Statute ID / IBR Type Description
No Incident Offenses Recorded for Incident #: 2013000030878				

Complaint Charges				
Seq #	Chapter	Section	Name (Last, First, MI)	Description of Offense
No Complaint Offenses Recorded for Incident #: 2013000030878				

Arrestee Seq. # 1											
Suspect Type		Suspect Name			Alias/Nickname		Occupation		Probation Central File		SSN
N/A		Herrin, Bradley J			N/A		N/A		N/A		N/A
Date of Birth	Age	Sex	Race	Ethnicity	Skin Tone	Height	Weight	Eye Color	Hair Color		
10/15/1985	28	Male	Caucasian	Not Hispanic	N/A	74.00	200	Blue	Bleach or Strawberry		
Scars / Marks / Tattoos / Other Physical Characteristics: No Physical Characteristic Data Reported											

Vehicle Info									
Vehicle No.	Vehicle Make	Vehicle Model	Vehicle Year	VIN	Primary Color	Secondary Color	Plate No.	State	
2011000005411	Chevrolet	Avalanche	2002	N/A	Tan	N/A	EWG1202	OH	

Property
No Property Info reported for Incident #: 2013000030878

CITY OF MASON
6000 Mason-Montgomery Rd
Mason, OH 45040
513-229-8560



File No: LCP131101029700
Dispatch Incident Number: N/A
Print Date: November 2, 2013
Printed By: ayeary

Incident Report

Citations					
Citation No	Code	Date	Status	Statute	Description
No Citations reported for Incident #: 2013000030878					



Incident Report

Narratives for Incident Number 2013000030878 ? Yes

Other Narratives not authorized for print? None

Narratives this user authorized to print:

Narrative by: Police Officer Aaron Yeary Division: Police Department

<u>Date & Time</u>	<u>Narrative Description</u>	<u>Entered by</u>	<u>Status</u>	<u>Reviewed by</u>	<u>Last Edit Date</u>
11/01/2013 13:25		Police Officer Aaron Yeary	Open		11/01/2013

Hit skip crash on Parklake Dr. Brad Herrin was located and cited for leaving the scene of an accident, failure to control and obstructing official business. His vehicle was towed by Case.

Signature - Reporting Officer

Signature - Reviewing Officer

Narrative by: Police Officer Aaron Yeary Division: Police Department

<u>Date & Time</u>	<u>Narrative Description</u>	<u>Entered by</u>	<u>Status</u>	<u>Reviewed by</u>	<u>Last Edit Date</u>
11/02/2013 12:28		Police Officer Aaron Yeary	Open		11/02/2013

Dispatched to a downed mailbox and light pole in the area of 6780 Parklake Dr. Upon arrival I found a mailbox and light pole that had been stuck by a vehicle. I contacted public works about the pole and they in turn notified Duke Energy who was responsible to the repair. While on the phone with public works Officer Temple arrived and proceeded toward the dead end of Parklake Dr. He notified me that the vehicle that stuck the pole was parked on the street. In front of 6821 Parklake Dr. a gold colored Chevy Avalanche was parked on the street with matching damage to the front. The plates, EWG1202, were expired and registered to Brad Herrin to an address in Deerfield Twp. A female walking in the area advised the owner of that car now lives here at 6821 Parklake.

The damage to the vehicle matches the damage done to the pole. You could see the black marks left behind by the fiberglass pole. On the hood was the imprint of the actual street light itself. The windshield was smashed and had a cut in it that matched the hood of the street light. The tires on the vehicle matched those found in the grass of the scene of the damage. The missing side view mirror was later found at the crash site.

We then made contact with the resident at 6821 Parklake. Mark Herrin lived there and advised the vehicle belonged to his son. He said his son, Brad, was currently sleeping. We advised him of the crash and asked to speak with Brad. He then went and woke Brad up. Brad came down and we immediately noticed that he was very intoxicated. His eyes were very blood shot and he smelled of alcohol. I advised him that we were here because of a crash his vehicle was involved in. When asked about it he said "yea, we hit something". I asked who, he then replied "I don't know". I began to ask him about where he was last night. He said he went to 4 bars and was last at a bar in West Chester. He said he got really messed up. When asked how he got home he said anyone could have driven him. He said it could have been any one of 30-40 people because he was a popular guy. I stopped Brad and advised him that we are past the point of investigating this as an intoxicated driver and we just needed information for a crash report.

After several minutes speaking back and forth Brad still refused to tell us who was driving. He refused to tell us who he was with. He would often make rude comments to us and continued to say how messed up he was. I eventually was able to get him to start making phone calls to his friends if someone would have driven him. Brad was cautioned several times to stop his rude behavior or he would be arrested. Since Brad continued to refuse to tell us who was driving it was decided that his vehicle would be towed due to it be unsafe, expired, and used in a hit skip accident. Dispatch contacted Case Towing to respond for the vehicle. While Officer Temple stepped out of the house for a minute to request the tow truck Brad became even more confrontational. He suddenly asked why I was there. I told him again about the crash of his vehicle. He demanded to know where, despite having been told already. Brad would argue with me and thing make unusual comment and laugh.



Incident Report

Narrative by: Police Officer Aaron Yeary Division: Police Department (continued)

<u>Date & Time</u>	<u>Narrative Description</u>	<u>Entered by</u>	<u>Status</u>	<u>Reviewed by</u>	<u>Last Edit Date</u>
11/02/2013 12:28		Police Officer Aaron Yeary	Open		11/02/2013

Officer Temple returned and then spoke to his father Mark in the other room. While trying to make phone call Brad would fumble with his phone and he struggle to find his friends names in the contacts. When asked about working, he advised he was working at Shoptech. I asked why he wasn't there. He said he was supposed to go in a 9:00 today. I advised him that it was already after 9:00. He then began asking his dad to call his work since he could not make it. I asked how he planned on working today if he was so intoxicated. He said that he wasn't that drunk and demanded a breath test. He was told no but was asked to continue to try to locate the driver of his vehicle. He then began telling us about how hot his boss was despite her being older. He was told again to stay on task and locate the driving. Brad continued to refuse to cooperate and was disorderly the entire time we had contact with him.

I then escorted Brad out to my vehicle, he was placed inside the backseat with his phone. He provided his keys so that the vehicle could be towed properly. A tow and inventory form was completed for his vehicle. During the inventory each seat of the vehicle was covered in items except the driver seat. When I ask him how anyone except him was in the vehicle he stated that he probably drove then. I asked him again. He said if there wasn't room for anyone else, then he must have been the only one in there.

Case Towing arrived and took the vehicle. Brad was cited for failure to control, leaving the scene of an accident, parking an unregistered vehicle on the road, and obstructing official business. Even after being advised of the charges Brad continued with his behavior. During the time he sat in my vehicle, he had a very strong smell of alcohol coming from his breath. Brad made offensive comments and tried to make a joke out of the entire event. Brad signed his copies of the citations and was cautioned that he could be arrest and taken to jail in these charges. Brad continued with his behavior and comments even after signing his copies and walked away.

Signature - Reporting Officer

Signature - Reviewing Officer