



# TRAFFIC CRASH REPORT

LOCAL REPORT NUMBER *	CRASH SEVERITY	HIT/SKIP
17051903	3 1 - FATAL 2 - INJURY 3 - PDD	1 - SOLVED 2 - UNSOLVED

PHOTOS TAKEN <input type="checkbox"/> OH-2 <input type="checkbox"/> OH-1P <input type="checkbox"/> OH-3 <input type="checkbox"/> OTHER	PDO UNDER STATE REPORTABLE DOLLAR AMOUNT	PRIVATE PROPERTY	REPORTING AGENCY NCIC * 05724	REPORTING AGENCY NAME * BUTLER TWP PD	NUMBER OF UNITS 01	UNIT IN ERROR 01 98 - ANIMAL 99 - UNKNOWN
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COUNTY * 57	CITY * BUTLER	CITY, VILLAGE, TOWNSHIP *	CRASH DATE * 08/12/2017	TIME OF CRASH 20:37	DAY OF WEEK Sat
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DEGREES / MINUTES / SECONDS LATITUDE 0 / 39:51:16.03	LONGITUDE 0 / 084:13:03.84	DECIMAL DEGREES LATITUDE 39.854453	LONGITUDE 84.217734
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ROADWAY DIVISION <input type="checkbox"/> DIVIDED <input checked="" type="checkbox"/> UNDIVIDED	DIVIDED LANE DIRECTION OF TRAVEL N - NORTHBOUND E - EASTBOUND S - SOUTHBOUND W - WESTBOUND	NUMBER OF THRU LANES 02	ROAD TYPES OR MILEPOST <sup>2</sup> AL - ALLEY CR - CIRCLE AV - AVENUE CT - COURT BL - BOULEVARD DR - DRIVE HE - HEIGHTS HW - HIGHWAY LA - LAKE MP - MILEPOST PK - PARKWAY PL - PLACE RD - ROAD ST - STREET WA - WAY TE - TERRACE SQ - SQUARE TL - TRAIL
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LOCATION ROUTE TYPE <sup>1</sup>	LOCATION ROUTE NUMBER	LOC PREFIX N, S, E, W	LOCATION ROAD NAME GREEN ACRES	ROAD TYPE <sup>2</sup> DR	ROUTE TYPES <sup>1</sup> IR - INTERSTATE ROUTE (INC. 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 N, S, E, W	REFERENCE ROUTE TYPE <sup>1</sup>	REFERENCE ROUTE NUMBER	REF PREFIX N, S, E, W	REFERENCE NAME (ROAD, MILEPOST, HOUSE #) BRANTFORD	REFERENCE ROAD TYPE <sup>2</sup> RD
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REFERENCE POINT USED 1 - INTERSECTION 2 - MILE POST 3 - HOUSE NUMBER	CRASH LOCATION 03	CRASH LOCATION 01 - NOT AN INTERSECTION 02 - FOUR-WAY INTERSECTION 03 - T-INTERSECTION 04 - Y-INTERSECTION 05 - TRAFFIC CIRCLE/ROUNDBOUT	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	INTERSECTION RELATED	LOCATION OF FIRST HARMFUL EVENT 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 01	SECONDARY	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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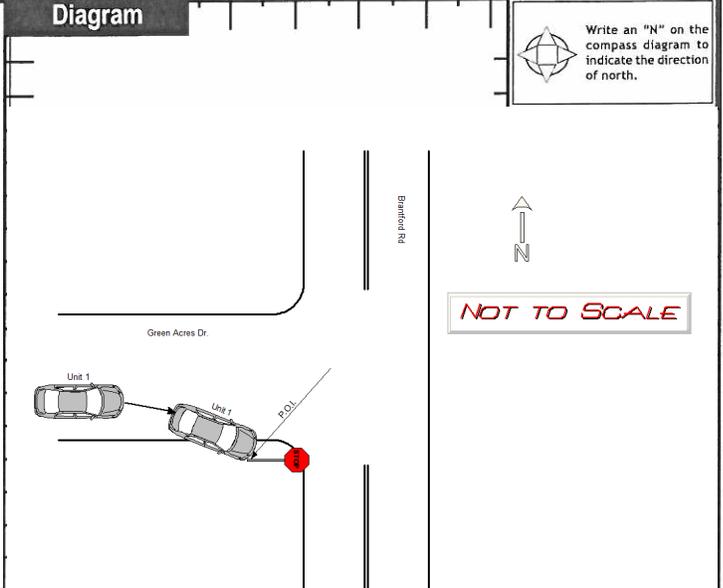
MANNER OF CRASH COLLISION/IMPACT 1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON 4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION 8 - SIDESWIPE, OPPOSITE DIRECTION 9 - UNKNOWN	WEATHER 1 - CLEAR 2 - CLOUDY 3 - FOG, SMOG, SMOKE 4 - RAIN 5 - SLEET, HAIL 6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, SNOW 9 - OTHER/UNKNOWN
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ROAD SURFACE 1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK 4 - SLAG, GRAVEL, STONE 5 - DIRT 6 - OTHER	LIGHT CONDITIONS PRIMARY 4	SECONDARY	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	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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WORK ZONE RELATED <input type="checkbox"/>	WORKERS PRESENT <input type="checkbox"/>	LAW ENFORCEMENT PRESENT (OFFICER/VEHICLE) <input type="checkbox"/>	LAW ENFORCEMENT PRESENT (VEHICLE ONLY) <input type="checkbox"/>	TYPE OF WORK ZONE 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 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 was traveling eastbound on Green Acres Drive in the right lane and when at Brantford Road, Unit 1 lost control of the vehicle and drove off the right side of the road striking the post that holds the stop sign and the street road name signs, knocking it down, and causing damage to his car. Unit 1 was found to be under the influence of drugs and/or alcohol.



REPORT TAKEN BY <input type="checkbox"/> POLICE AGENCY <input checked="" type="checkbox"/> MOTORIST	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPSS) <input type="checkbox"/>
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DATE CRASH REPORTED 08/12/2017	TIME CRASH REPORTED 20:37	DISPATCH TIME 20:44	ARRIVAL TIME 20:50	TIME CLEARED 22:03	OTHER INVESTIGATION TIME 0035	TOTAL MINUTES 108
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OFFICER'S NAME * Ofc. John Rieder	OFFICER'S BADGE NUMBER 15	CHECKED BY Sgt. Lonnie Bilbrey	PAGE OF
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# UNIT

LOCAL REPORT NUMBER

**17051903**

UNIT NUMBER <b>01</b>	OWNER NAME: LAST, FIRST, MIDDLE ( <input type="checkbox"/> SAME AS DRIVER ) <b>BLOOMFIELD, CODY JAMES</b>	OWNER PHONE NUMBER - INC. AREA CODE ( <input type="checkbox"/> SAME AS DRIVER ) <b>(937) 782-8070</b>	DAMAGE SCALE <b>2</b>	DAMAGED AREA FRONT REAR 
OWNER ADDRESS: CITY, STATE, ZIP ( <input type="checkbox"/> SAME AS DRIVER ) <b>4196 CHALMETTE DR BEAVERCREEK, OH 45440</b>			1 - NONE	
LP STATE <b>OH</b>	LICENSE PLATE NUMBER <b>FTR2917</b>	VEHICLE IDENTIFICATION NUMBER <b>1HGCD7235TA035246</b>	2 - MINOR	
VEHICLE YEAR <b>1996</b>	VEHICLE MAKE <b>Honda</b>	VEHICLE MODEL <b>Accord</b>	3 - FUNCTIONAL	
PROOF OF INSURANCE SHOWN <input type="checkbox"/>	INSURANCE COMPANY	POLICY NUMBER	4 - DISABLING	
			9 - UNKNOWN	
CARRIER NAME, ADDRESS, CITY, STATE, ZIP			CARRIER PHONE - INCLUDE AREA CODE	
			<b>Busy Bee Towing</b>	

US DOT	VEHICLE WEIGHT GVWR/GCWR <b>1</b> 1 - LESS THAN OR EQUAL TO 10K LBS. 2 - 10,001 TO 26,000 LBS. 3 - MORE THAN 26,000 LBS.	CARGO BODY TYPE <b>01</b> 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 - GRAIN, CHIPS, GRAVEL	TRAFFICWAY DESCRIPTION <b>1</b> 1 - TWO-WAY, NOT DIVIDED 2 - TWO-WAY, NOT DIVIDED, CONTINUOUS LEFT TURN LANE 3 - TWO-WAY, DIVIDED, UNPROTECTED (PAINTED 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		<input type="checkbox"/> HIT / SKIP UNIT
HM CLASS NUMBER			

NON-MOTORIST LOCATION PRIOR TO IMPACT <b>01</b> 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 <b>1</b> 1 - PERSONAL 2 - COMMERCIAL 3 - GOVERNMENT <input type="checkbox"/> IN EMERGENCY RESPONSE	UNIT TYPE <b>03</b> 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 <b>01</b> 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 <b>03</b> 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 <b>3</b> 1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING 4 - STRUCK 5 - STRIKING/STRUCK 9 - UNKNOWN
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PRE-CRASH ACTIONS <b>01</b> 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 PRIMARY <b>17</b> SECONDARY <b>01</b> 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 <b>01</b> 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 <b>08</b> 2 <b>37</b> 3 <b>01</b> 4 <b>01</b> 5 <b>01</b> 6 <b>01</b> FIRST HARMFUL EVENT <b>2</b> MOST HARMFUL EVENT <b>2</b> 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/CRASH 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	

UNIT SPEED <b>025</b>	POSTED SPEED <b>25</b>	TRAFFIC CONTROL <b>02</b> 01 - NO CONTROLS 02 - STOP SIGN 03 - YIELD SIGN 04 - TRAFFIC SIGNAL 05 - TRAFFIC FLASHERS 06 - SCHOOL ZONE 07 - RAILROAD CROSSBUCKS 08 - RAILROAD FLASHERS 09 - RAILROAD GATES 10 - CONSTRUCTION BARRICADE 11 - PERSON (FLAGGER, OFFICER) 12 - PAVEMENT MARKINGS 13 - CROSSWALK LINES 14 - WALK/DON'T WALK 15 - OTHER 16 - NOT REPORTED	UNIT DIRECTION FROM <b>4</b> TO <b>3</b> 1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST 5 - NORTHEAST 6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - UNKNOWN
<input type="checkbox"/> STATED <input checked="" type="checkbox"/> ESTIMATED			PAGE OF



# MOTORIST / Non-MOTORIST / OCCUPANT

LOCAL REPORT NUMBER

17051903

UNIT NUMBER [ 01 ]	NAME: LAST, FIRST, MIDDLE BLOOMFIELD, CODY JAMES	DATE OF BIRTH 12/17/1997	AGE 19	GENDER M M - MALE F - FEMALE
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ADDRESS, CITY, STATE, ZIP 4196 CHALMETTE DR BEAVERCREEK, OH 45440	CONTACT PHONE - INCLUDE AREA CODE (937) 782-8070
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INJURIES [ 1 ]	INJURED TAKEN BY [ ]	EMS AGENCY [ ]	MEDICAL FACILITY INJURED TAKEN TO [ ]	SAFETY EQUIPMENT USED [ 04 ]	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION [ 01 ]	AIR BAG USAGE [ 1 ]	EJECTION [ 1 ]	TRAPPED [ 1 ]
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OL STATE [ OH ]	OPERATOR LICENSE NUMBER UG446957	OL CLASS [ 4 ]	No VALID OL <input type="checkbox"/>	M/C END. <input type="checkbox"/>	CONDITION [ 6 ]	ALCOHOL/DRUG SUSPECTED [ 4 ]	ALCOHOL TEST STATUS [ 2 ]	ALCOHOL TEST TYPE [ 1 ]	ALCOHOL TEST VALUE [ ]	DRUG TEST STATUS [ 2 ]	DRUG TEST TYPE [ 1 ]
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OFFENSE CHARGED ( <input type="checkbox"/> LOCAL CODE ) 4511.202	OFFENSE DESCRIPTION FAILURE TO CONTROL	CITATION NUMBER 42702	HANDS-FREE DEVICE USED <input type="checkbox"/>	DRIVER DISTRACTED BY [ 1 ] [ ]
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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 MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION [ ]	AIR BAG USAGE [ ]	EJECTION [ ]	TRAPPED [ ]
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OL STATE [ ]	OPERATOR LICENSE NUMBER [ ]	OL CLASS [ ]	No VALID OL <input type="checkbox"/>	M/C END. <input type="checkbox"/>	CONDITION [ ]	ALCOHOL/DRUG SUSPECTED [ ]	ALCOHOL TEST STATUS [ ]	ALCOHOL TEST TYPE [ ]	ALCOHOL TEST VALUE [ ]	DRUG TEST STATUS [ ]	DRUG TEST TYPE [ ]
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OFFENSE CHARGED ( <input type="checkbox"/> LOCAL CODE ) [ ]	OFFENSE DESCRIPTION [ ]	CITATION NUMBER [ ]	HANDS-FREE DEVICE USED <input type="checkbox"/>	DRIVER DISTRACTED BY [ ] [ ]
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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	99 - UNKNOWN SAFETY EQUIPMENT 05 - CHILD RESTRAINT SYSTEM-FORWARD FACING 06 - CHILD RESTRAINT SYSTEM- REAR FACING 07 - BOOSTER SEAT 08 - HELMET USED	NON-MOTORIST 09 - NONE USED 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 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 - 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 MOTORCYCLE HELMET <input type="checkbox"/>	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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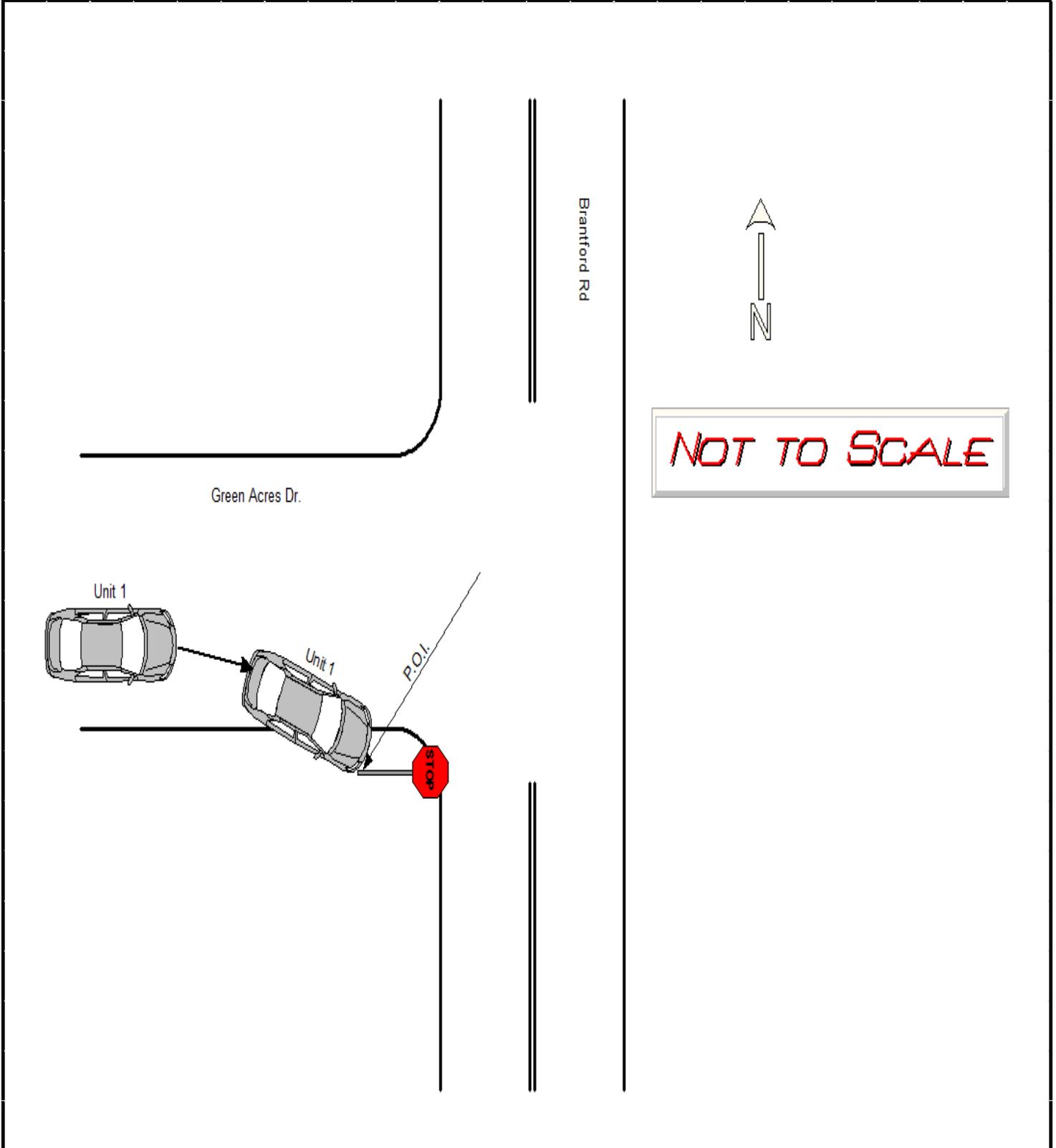
ADDRESS, CITY, STATE, ZIP [ ]	CONTACT PHONE - INCLUDE AREA CODE [ ]
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INJURIES [ ]	INJURED TAKEN BY [ ]	EMS AGENCY [ ]	MEDICAL FACILITY INJURED TAKEN TO [ ]	SAFETY EQUIPMENT USED [ ]	DOT COMPLIANT MOTORCYCLE HELMET <input type="checkbox"/>	SEATING POSITION [ ]	AIR BAG USAGE [ ]	EJECTION [ ]	TRAPPED [ ]
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LOCAL REPORT NUMBER 17051903	REPORTING AGENCY BUTLER TWP PD	DATE OF CRASH M 8   D 12   Y 2017
IN COUNTY OF MONTGOMERY	CRASH LOCATION GREEN ACRES DR/ BRANTFORD RD	



OFFICER'S SIGNATURE <input checked="" type="checkbox"/> Ofc. John Rieder	BADGE NUMBER 15
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LOCAL REPORT NUMBER 17051903	REPORTING AGENCY BUTLER TWP PD	DATE OF CRASH M 8   D 12   Y 2017
IN COUNTY OF MONTGOMERY	CRASH LOCATION GREEN ACRES	

Upon arrival, Officer Jackson had located the suspect vehicle parked on Dawnridge Drive east of Brantford Road. I arrive to assist. I saw the driver, and sole occupant, sitting in his car. I could see an opened 12 ounce can of Bud Light beer in the center console.

Officer Jackson had the driver exit the car and I noted the driver's eyes were very dilated. Officer Jackson and I suspected the driver was under the influence of a narcotic based on his eyes, and the crash.

Officer Jackson administered some field sobriety tests while I stood by as backup. When he completed the tests, I looked at his eyes again and used my flashlight to shine into his eyes to see if his pupils reacted. They did not. His eyes remained dilated, almost fully open, without reacting at all to the light. I could see Officer Jackson's eyes and noted his were of normal size, even in the dark, when compared to the driver's eyes.

Officer Jackson arrested the driver, who was identified as Cody Bloomfield, for OVI. As he was being handcuffed, Mr. Bloomfield made an unsolicited statement. He said, of his own free will, that he was not going to waste anyone's time. He freely admitted that the only thing that could cause him to react like this, and the crash, was the fact he had "Smoked marijuana". I proceeded to investigate the crash after witnessing Officer Jackson read the BMV form 2255, and the subsequent refusal to take any tests by Mr. Bloomfield.

I examined the vehicle and found the front right tire was flat. The bumper and headlight assembly was damaged. I noted a section of bumper from the under carriage missing. I photographed the vehicle and responded to the crash scene. I located the street sign laying flat on the grass at the intersection, with the street name signs still attached and bent. The sign post had been sheered at the bottom and a stub was protruding from the ground. I also saw a silver piece from the car and determined this was the missing piece from unit 1's bumper. I photographed the scene and collected the bumper as evidence.

I responded back to the car and called for a tow truck to remove the vehicle. Busy Bee arrived and removed it. It should be noted the plates on the vehicle did not match the vehicle it was on. Officer Jackson finished processing the driver and issued the appropriate citations. I placed the bumper piece into the property room as evidence. I notified first watch about the downed stop sign and they made arrangements for it to be replaced, and placed a temporary sign up for safety.

Respectfully,

Officer John J. Rieder, #15

										OFFICER'S SIGNATURE <b>X</b> Ofc. John Rieder	BADGE NUMBER 15
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